JEFFERSON COUNTY, ALABAMA

5-YEAR CONSOLIDATED PLAN

October 1, 2010 - September 30, 2014

Submitted ____



JEFFERSON COUNTY COMMISSION

Bettye Fine Collins, President Jim Carns Bobby Humphryes Shelia Y. Smoot

JEFFERSON COUNTY OFFICE OF COMMUNITY & ECONOMIC DEVELOPMENT

Frederick L. Hamilton, Director



3-5 Year Strategic Plan

This document includes Narrative Responses to specific questions that grantees of the Community Development Block Grant, HOME Investment Partnership, Housing Opportunities for People with AIDS

and Emergency Shelter Grants Programs must respond to in order to be compliant with the Consolidated Planning Regulations.

NAME OF JURISDICTION: JEFFERSON COUNTY, ALABAMA

Consolidated Plan Time Period: OCTOBER 1, 2010-SEPTEMBER 30, 2015

GENERAL

Executive Summary

The Executive Summary is required. The Summary must include the objectives and outcomes identified in the plan and an evaluation of past performance.

3-5 Year Strategic Plan Executive Summary:

EXECUTIVE SUMMARY JEFFERSON COUNTY CONSORTIUM PROPOSED 5-YEAR STRATEGIC PLAN SUMMARY FOR COMMUNITY DEVELOPMENT PROGRAMS

INTRODUCTION

The Jefferson County Consortium Proposed Five-Year Strategic Plan outlines the objectives and outcomes to be undertaken by the County with funds from the Community Development Block Grant Program (CDBG), the Home Investment Partnerships Program (HOME), and the Emergency Shelter Grant Program (ESG). Outlined below are the objectives and outcomes identified in the plan and an evaluation of past performance.

Jefferson County expects to receive CDBG funds, CDBG program income; HOME funds, County match and HOME program income; federal ESG funds and will apply to receive State ESG funds for Program Years 2010-2014.

Housing programs will receive a portion of the total CDBG funds available each year. These Housing Programs will include Housing Emergency Grant Program, Volunteer Based Housing, and Fair Housing Counseling.

Non-housing programs to be funded under the CDBG program include economic development programs, public services, public facilities, infrastructure improvements as well as planning and administration costs.

Homeless Assistance Programs: Jefferson County anticipates receiving Federal ESG funds and will apply each year of this Five-Year Strategic Plan to receive State ESG funds. Requirements on ESG funding including operations, renovations, essential

services (limited to 30% of total grant), prevention (limited to 30% of total grant, and must be spent within 6 months), and staff salaries (limited to 10% of total grant). Jefferson County Emergency Shelter Program will also use ESG funds for administration of the ESG program.

HOME Program: Jefferson County anticipates receiving HOME funds for Program Years 2010-2014. This figure will be matched with locally generated matching funds and program income. These funds are proposed for use on a variety of housing programs including the Home Buyers Assistance Program, Community Housing Development Organization (CHDO) activities and special needs rental housing.

HOUSING ACTIVITIES TO BE UNDERTAKEN

The following housing programs may be undertaken with funds from the Community Development Block Grant Program and the HOME Program:

HOME
Administration
CHDO Admin.
CHDO Activity
Special Needs
Homebuyer Assistance
Match

CDBG
Housing Emergency Grant Program
Volunteer Based Housing
Fair Housing Counseling

HOMELESS ASSISTANCE ACTIVITIES TO BE UNDERTAKEN

The following grants may be given to agencies that provide services to the homeless, those threatened with homelessness, and those providing services and housing for those living with HIV:

ESG Administration Operations Essential Services Homeless Prevention

NON-HOUSING COMMUNITY DEVELOPMENT PRIORITIES AND PROPOSED ACTIVITIES TO BE UNDERTAKEN

The following non-housing activities may be undertaken with funds from the Community Development Block Grant Program; all were determined to be high priority activities:

General Administration Housing Program Delivery Economic Development Technical Assistance

NEIGHBORHOOD FACILITIES AND INFRASTRUCTURE

Public Facilities:

Community Centers Senior Citizens' Centers Fire Stations Police Substations Libraries Park Improvements

Infrastructure Improvements:

Waterlines Road Improvements Drainage Improvements Sidewalks

PUBLIC SERVICES

General. More specific public services may be funded based upon applications received during the annual Open Season periods.

ECONOMIC DEVELOPMENT

Jefferson County manages an Economic Business Loan Program that provides low interest loan of up to \$350,000 to businesses for expansion. Loans are provided within the Jefferson County Community Development Consortium, with the goal of creating new jobs for low- and moderate-income residents of the County. Loans may be made from CDBG funds, Section 108 Loans or Float Loans. Section 108 or Float Loans may be from \$750,000 up to \$1,000,000.

Economic Development Float Loan, \$750,000 - \$1,000,000 - Float Loan Criteria: 1. Cost per job; 2. Number of jobs; 3. Type of jobs; and 4. Relative job income expected.

REQUIREMENTS AND PARAMETERS FOR THE ECONOMIC DEVELOPMENT CDBG LOAN PROGRAM

Loan funds may be used to undertake certain Economic Development activities including:

- Acquiring, constructing, rehabilitating or installing commercial or industrial buildings, structures and other real property equipment and improvements.
- Assisting a private, for-profit business with a loan.
- Providing economic development services in connection with other eligible CDBG Economic Development activities.

- Economic Development assistance may be provided directly or through public and private organizations, agencies and other sub-recipients including non-profit and for profit sub-recipients.
- All economic development activities must meet the National Objective Standard of benefiting low-to-moderate income persons. At least 51% of the employees of the business must be low-to-moderate income and have a total household income less than HUD's current low income criteria (80% of median household income).

GENERAL GUIDELINES:

- All loans must meet the Public Benefit Standards of the CDBG Program for individual and aggregate standards. One new job must be created or retained per \$35,000 loaned.
- Minimum loan amount is \$25,000.
- Maximum loan amount is \$350,000 (this amount can be waived by the CDBG Director).
- Loan proceeds can be used for hard costs (building, land, equipment, etc.) and also for soft costs (working capital).
- Loans can be on a first or second lien basis (no third lien loans).
- Loans on equipment cannot exceed a 10 year term.
- Loans on buildings and land cannot exceed a 20 year term.
- The maximum interest rate will be 75% of the bank rate or less.
- All loans are to be secured by lien positions on collateral and will be determined by credit worthiness, collateral coverage, and term of the loan.
- CDBG loan funds cannot be used to avoid bankruptcy, refinancing third party loans, or paying debt service. This will not preclude recasting existing CDBG loans to provide a workout agreement to avoid foreclosure action.
- Proof that other financing has been secured on all gap financing projects and participatory loans.
- All projects must create jobs in Jefferson County excluding the cities of Birmingham, Bessemer, Hoover, Argo, County Line, West Jefferson, Helena and Sumiton.

REQUIREMENTS AND PARAMETERS FOR THE ECONOMIC DEVELOPMENT MICRO LOAN PROGRAM

Loan funds may be used to undertake certain Economic Development activities including:

- Acquiring, constructing, rehabilitating or installing commercial or industrial buildings, structures and other real property equipment and improvements.
- Assisting a private, for profit business with a loan.
- Providing economic development services in connection with other eligible CDBG Economic Development activities.
- Economic Development assistance may be provided directly or through public and private organizations, agencies and other sub-recipients including non-profit and for-profit sub-recipients.
- Micro loans will be used to provide assistance to persons owning or developing a micro enterprise that has five or fewer employees, one or more of whom owns the enterprise. At least 51% of the employees must be lowto-moderate income and have a total household income less than HUD's current low income criteria (80% of median family income).

Specific Micro loan assistance includes provisions for:

- Loan and other forms of financial support for the establishment, stabilization and expansion of small business enterprises (Micro Enterprises).
- Technical assistance, advice and business services to owners and development of micro enterprises.
- Training, technical assistance and other support activities to carry out micro loan activities.
- All micro loans cannot exceed \$25,000 and must meet the public benefit standards of the CDBG Program for individual activities and aggregate standards. A minimum of two (2) jobs must be created to benefit LMI persons to receive assistance under the Micro Loan program. The minimum amount of funds that can be received is \$10,000.
- All projects must create jobs in Jefferson County excluding the cities of Birmingham, Bessemer, Hoover, Argo, County Line, West Jefferson, Helena and Sumiton.

REQUIREMENTS AND PARAMETERS FOR THE ECONOMIC DEVELOPMENT FLOAT LOAN PROGRAM

Community Development Block Grant (CDBG) Float Loans are available to businesses located in Jefferson County (excluding the cities of Birmingham, Bessemer, Hoover, Argo, County Line, West Jefferson, Helena and Sumiton) from the Jefferson County Alabama Department of Community and Economic Development.

An eligible for-profit entity or non-profit entity may apply for a short term loan under this program under the following conditions:

 The business must demonstrate that public financing of the project is necessary and appropriate to create or retain jobs.

- The business must provide an unconditional, irrevocable letter of credit in U. S. dollars in the full amount of the principal and interest due, as collateral for the loan. The letter of credit must come from a financial institution with corporate headquarters in the United States, preferable in Alabama. The financial institution must be acceptable to Jefferson County.
- The business must agree to create jobs and make the majority (51%) of them available to qualified lower income candidates whose total household income is less than HUD's current low income criteria (80% of median family income). Retention of jobs can also be considered as a qualifying factor under certain conditions if a strong case can be made that they will be lost.
- The business must agree to comply with all applicable federal, state, and local laws and regulations.
- Principal and interest will be due at maturity or on demand, whichever occurs first. The normal term for a Float Loan is 18 24 months. However, since funds extended under the Float Loan Program are already committed to other jurisdictions that anticipate using the funds when the loan matures, there is a remote possibility that the loan may be called early to honor the original commitment. The Department of Community and Economic Development will structure the Float Loan with every expectation that the loan will not be called prior to maturity.
- The interest rate on the Float Loan will be negotiated based on the contribution the project will make to job creation or retention but in no case will it be a zero percent loan.
- All Float Loans must meet the Public Benefits Standards of the CDBG Program for individual activities and aggregate standards.
- The amount of assistance received shall range from \$750,000 to \$1,000,000.

Strategic Plan

Due every three, four, or five years (length of period is at the grantee's discretion) no less than 45 days prior to the start of the grantee's program year start date. HUD does not accept plans between August 15 and November 15.

Mission: Jefferson County, Alabama through its Office of Community and Economic Development is committed to developing and maintaining viable communities in an urban county through a variety of activities that promote decent housing, suitable living environments, and the expansion of economic opportunities for low and moderate income persons.

EVALUATION OF PAST PERFORMANCE

Over the past five years Jefferson County has been seeking to accomplish the goals and objectives as set out in the 2005 Five Year Consolidated Plan. Over the past five years Jefferson County has received approximately \$10,000,000 in CDBG funds, \$5,000,000 in HOME funds, and \$450,000 in Emergency Shelter Grant funds. CDBG funds were successfully allocated for housing, public facilities, infrastructure, and

public services. HOME funds were successfully allocated for Special Needs, CHDO Activities, and ADDI. Emergency Shelter Grant funds were successfully allocated for administration, operations, essential services, and homeless prevention.

Jefferson County's performance as it relates to the Annual Action Plans for years 2005-2009 are shown below:

CDBG Housing Program:

Emergency Housing Rehabilitation Grant Program			
		Actual	%
	Goal	Production	Completed
2005	50	100	200%
2006	50	249	298%
2007	28	80	286%
2008	28	96	343%
Total	156	525	332%

Housing Accessibility Grant Program				
	Goal	Actual Production	% Completed	
2005	15	23	153%	
2006	15	19	127%	
2007	10	0	0%	
2008	10	0	0%	
Total	40	42	105%	

Volunteer Based Housing Rehabilitation Program				
		Actual		%
	Goal	Production		Completed
2005	40		2	5%
2006	40		8	20%
2007	20		1	5%
2008	10		39	390%
Total	110		50	50%

Lead/Environmental Hazard Reduction Program			
		Actual	%
	Goal	Production	Completed
2005	10	10	100%
2006	10	31	310%
2007	2	20	1000%
2008	2	0	0%
Total	24	61	277%

Fair Housing/Home Ownership Counseling				
		Actual	%	
	Goal	Production	Completed	
2005	200	304	152%	
2006	200	393	197%	
2007	200	751	376%	
2008	200	235	118%	
Total	800	1,683	160%	

HOME Program:

HOME Buyer Assistance Program				
		Actual		%
	Goal	Production		Completed
2005	29		9	31%
2006	28		15	54%
2007	7		22	314%
2008	7		14	200%
Total	71		69	77%

HOME Rental Housing for the Elderly Program				
	Goal	Actual Production	% Completed	
2005	3	48	48	
2006	0	0	0	
2007	11.	0	0	
2008	16	0	0	
Total	40	48	120%	

NOTE: Jefferson County has under contract/construction and these are Brighton Gardens for 11 units and Hickory Ridge for 14 units.

MANAGING THE PROCESS

Consultation 91.200(b)

1. Identify the lead agency or entity for overseeing the development of the plan and the major public and private agencies responsible for administering programs covered by the consolidated plan.

Response: Jefferson County, Alabama through its Office of Community and Economic Development is the lead agency for overseeing the development of the plan and for the responsibility of administering the programs covered by the Consolidated Plan.

- 2. Identify agencies, groups, and organizations that participated in the process. This should reflect consultation requirements regarding the following:
 - **General** §91.100 (a)(1) Consult with public and private agencies that provide health services, social and fair housing services (including those focusing on services to children, elderly persons, persons with disabilities, persons with HIV/AIDS and their families, homeless persons) during the preparation of the plan.

Response:

AIDS Alabama

AIDS Outreach

Jefferson County Department of Health

Alabama Department of Health

YWCA of Central Alabama

Jefferson County Housing Authority (Fair Housing & Home Ownership

Counseling)

Birmingham Independent Living Resources

United Cerebral Palsy

Greater Birmingham Ministries

Lighthouse Group

Family Guidance Center

Pathways

First Light

Childcare Resources

Aletheia House

Cooperative Downtown Ministries

Bridge Ministries

The Salvation Army

The Christian Service Mission/Mission Birmingham

The Catholic Center for Concern

Glenwood Mental Health Services

Birmingham Coalition for the Homeless

Birmingham Health Care

Helpline Christian Outreach

Veteran's Administration (VA Medical Center)

Birmingham Health Care

 Homeless strategy §91.100 (a)(2) – Consult with public and private agencies that provide assisted housing, health services, and social services to determine what resources are available to address the needs of any persons that are chronically homeless.

Response:

Metropolitan Birmingham Services for the Homeless (One Roof)

The local Continuum of Care – Birmingham Metro Area

• **Lead lead-based paint hazards** §91.100 (a)(3) – Consult with State or local health and child welfare agencies and examine existing data related to lead-based paint hazards and poisonings.

Response:

Jefferson County Department of Health Alabama Department of Public Health Safe State Alabama

• **Adjacent governments** §91.100 (a)(4) -- Notify adjacent governments regarding priority non-housing community development needs.

Response: All 30 municipalities participating in the Jefferson County Consortium were contacted, invited and encouraged to participate in the development of this plan.

Metropolitan planning §91.100 (a)(5) -- Consult with adjacent units of general local government, including local government agencies with metropolitan-wide planning responsibilities, particularly for problems and solutions that go beyond a single jurisdiction, i.e. transportation, workforce development, economic development, etc.

Response:

City of Fairfield City of Gardendale City of Midfield City of Leeds

 HOPWA §91.100 (b) -- Largest city in EMSA consult broadly to develop metropolitan-wide strategy for addressing needs of persons with HIV/AIDS and their families.

Response:

Jefferson County is not a HOPWA entitlement. Jefferson County has, however consulted with AIDS, Alabama and the Alabama Department of Public Health.

 Public housing §91.100 (c) -- Consult with the local public housing agency concerning public housing needs, planned programs, and activities.

Response:

The following entities were consulted with:

Jefferson County Housing Authority; Leeds Housing Authority; Fairfield Housing Authority; and Tarrant Housing Authority

Citizen Participation 91.200 (b)

- 3. Based on the jurisdiction's current citizen participation plan, provide a summary of the citizen participation process used in the development of the consolidated plan. Include a description of actions taken to encourage participation of all its residents, including the following:
 - low- and moderate-income residents where housing and community development funds may be spent;
 - minorities and non-English speaking persons, as well as persons with disabilities;
 - local and regional institutions and other organizations (including businesses, developers, community and faith-based organizations);
 - residents of public and assisted housing developments and recipients of tenant- based assistance;
 - residents of targeted revitalization areas.

Response:

The Jefferson County Office of Community and Economic Development held a series of neighborhood meetings from September, 2009 through May, 2010 to gain citizen input for the development of the 2010 Five-Year Consolidated Plan and 2010 Action Plan. Notices of each meeting were published in the Birmingham News and the Birmingham Times. Notices were also mailed to members of the Jefferson County Consortium Technical Advisory Committee. The Technical Advisory Committee consists of low/mod income residents, minorities, persons with disabilities, businesses, non-profit agencies, as well as faith-based agencies. Consultants were asked to submit needs based on their own inventory of their municipality, community, and service area.

4. Provide a description of the process used to allow citizens to review and submit comments on the proposed consolidated plan, including how the plan (or a summary of the plan) was published for review; the dates, times and locations of a public hearing, or hearings; when and how notice was provided to citizens of the hearing(s); the dates of the 30 day citizen comment period, and if technical assistance was provided to groups developing proposals for funding assistance under the consolidated plan

and how this assistance was provided.

Response:

The Proposed Executive Summary was published in the Birmingham News and the Birmingham Times on Thursday, June 24, 2010. Notices of The Proposed Executive Summary were also mailed to the members of the Jefferson County Consortium Technical Advisory Committee. Copies of the Plan were made available at the Jefferson County Office of Community and Economic Development and 11 different libraries throughout Jefferson County. The thirty-day comment period began on Thursday, June 24, 2010 and ended on Friday, July 23, 2010. The public hearing was held on Thursday, July 15, 2010. Technical assistance was provided to groups developing proposals for funding assistance under the consolidated plan through phone calls and emails.

5. Provide a summary of citizen comments or views received on the plan and explain any comments not accepted and reasons why these comments were not accepted.

Response: To be completed after the thirty-day comment period ends.

*Please note that Citizen Comments and Responses may be included as additional files within the CPMP Tool.

HOUSING AND HOMELESS NEEDS

Housing Needs 91.205

*If not using the CPMP Tool: Complete and submit CHAS Table from: http://socds.huduser.org/scripts/odbic.exe/chas/index.htm *If using the CPMP Tool: Complete and submit the Needs/Housing Table

6. In this narrative, describe the estimated housing needs projected for the next five year period for the following categories of persons: extremely low-income, low-income, moderate-income, and middle-income families, renters and owners, elderly persons, persons with disabilities, including persons with HIV/AIDS and their families, single persons, large families, public housing residents, victims of domestic violence, families on the public housing and section 8 tenant-based waiting list, and discuss specific housing problems, including: cost-burden, severe cost- burden, substandard housing, and overcrowding (especially large families) and substandard conditions being experienced by extremely low-income, low-income, moderate-income, and middle-income renters and owners compare to the jurisdiction as a whole The jurisdiction must define the terms "standard condition" and "substandard condition but suitable for rehabilitation."

Response:

FOR ALL CATEGORIES OF HOUSING & TENURE TYPE (Affordability/Suitability)

Five Year Needs Summary by Tenure Type Based on Year 2000 Census Data.

Median	Tenure	Household	Need
Income	iciraic	Туре	Nocu
THOME		Туре	
0-30%	Rent	Elderly	703
0 0 0 7 7 0		Small	1,470
		Related	
		Large	289
		Related	
		All Other	1,274
		Households	
		Total	3,736
0-30%	Owner	Elderly	2,223
		Small	1,065
		Related	. <u></u>
		Large	175
		Related	
		All Other	862
		Households	
		Total	4,325
31-50%	Rent	Elderly	555
		Small	1,106
		Related	
		Large	187
		Related	
		All Other	1,029
	·	Households	
		Total	2,877
			
31-50%	Owner	Elderly	1,485
		Small	1,328
	<u> </u>	Related	
		Large	406
		Related	
		All Other	397
		Households	
		Total	3,616

•			
51-80%	Rent	Elderly	327
		Small	666
		Related	
		Large	251
		Related	
		All Other	802
		Households	
		Total	2,046
51-80%	Owner	Elderly	1,226
	·	Small	2,179
		Related	
		Large	627
		Related	
		All Other	960
		Households	
		Total	4,992

	Rent Single
0-30%	333
31-50%	643
51-80%	1,294
Total	2,270

Median	Owner Single
0-31%	N/A
31-50%	100
51-80%	32
Total	132

Source:

SOCDS (State of Cities Data Systems)/ CHAS Data: Housing Affordability Data for All Households Output for All Households. HUD.Gov/Consolidated Planning website. This is 2000 data as we find that more recent data is inaccessible.

A. Extremely Low Income Families (0-30% of Median Income):

This is defined by the Regulations governing the Consolidated Plan as a "Family whose income is between 0 and 30 percent of the median income for the area, as determined by HUD with adjustments for smaller and larger families, except that HUD may establish income ceilings higher or lower that 30 percent of the median household income for the area on the basis of HUD's findings that such variations are necessary because of prevailing levels of construction costs or fair market rents, or unusually high or low family incomes."

It is only reasonable to assume that those with lower incomes have greater difficulties in locating "safe, sanitary and decent housing" which is affordable to them. This discussion is subdivided by tenure type (owner-occupied as opposed to renter-occupied) and is further broken down into sub-groups to deal with the special problems and needs associated with family type, race and age.

1) Owner-occupied Housing:

Based upon the 2000 Census, there are -0-* owner-occupied 0-1, 2 or 3 and 3+ Bedroom units which are affordable to those within the 0%-30% income range.

*Data is listed as N/A or not available.

Large Families:

There are approximately -0-* owner-occupied units within the Consortium which have three or more bedrooms and which would theoretically be suitable for large families and are affordable to those within the 5% to 30% income range.

*Data is listed as N/A or not available.

2) Rental Housing:

Based upon the 2000 Census, there are 1,059 rental units with 0-1 bedrooms which are affordable to those within the 0%-30% income range.

There is a greater selection of 2 bedroom units, with 2,550 units being affordable for those who fall in the 0%-30% range.

Three bedroom units offer the middle selection with 2,394 being affordable for those who fall in the 0%-30% range.

Large Families:

There are approximately 2,394 rental units within the Consortium which have three or more bedrooms and which would theoretically be suitable for large families.

While large families theoretically have a large pool of rental units in which to reside, it is essential to remember that only a limited number of these units are affordable to large families that fall within the 0%-30% income range. Large families are more likely to fall within this group than other types of households.

There are approximately 380 large family rental households falling into the 0%-30% income range. Of this group, 76.1% are having housing problems, 63.4% have a cost burden of 30% or greater and 51.1% having a cost burden of greater than 50%.

B. Low Income Households (30-50% of Median Income):

The instructions for the Consolidated Plan defines Low Income Households as "Families whose incomes do not exceed 50 percent of the median income for the area, as determined by HUD with adjustments for smaller and larger families, except that HUD may establish income ceilings higher or lower than 50 percent of the median for the area on the basis of HUD's findings that such variations are necessary because of prevailing levels of construction costs or fair market rents, or unusually high or low family incomes."

It is only reasonable to assume that those with lower incomes have greater difficulties in locating "safe, sanitary and decent housing" which is affordable to them. This discussion is subdivided by tenure type (owner-occupied as opposed to renter-occupied) and is further broken down into sub-groups to deal with the special problems and needs associated with family type, race and age.

1) Owner-occupied Housing:

Based upon the 2000 Census, there are 701 owner-occupied 0-1 Bedroom units which are affordable to those within the 31%-50% income range.

There is a greater selection of 2 bedroom units, with 7,995 being affordable for those who fall in the 31%-50% range.

Three bedroom units offer the greatest selection with 17,058 being affordable for those who fall in the 31%-50% range.

Large Families:

There are approximately 17,058 owner-occupied units within the Consortium which have three or more bedrooms and which would theoretically be suitable for large families. There is insufficient data relating to the specific needs of this group to draw adequate conclusions as to need.

2) Rental Housing

Based upon the 2000 Census, there are 1,464 rental 0-1 bedroom units which are affordable to those within the 31%-50% income range.

There is a greater selection of 2 bedroom units with 5,223 being affordable for those who fall in the 31%-50% range.

Three bedroom units offer the middle selection with 2,125 being affordable for those who fall in the 31%-50% range.

Large Families:

There are approximately 8,812 rental units within the Consortium which have three or more bedrooms, which would theoretically be suitable for large families. This is a smaller number and percent than that found in owner-occupied housing and reflects the predominance of one and two bedroom units in many multi-family complexes.

While large families theoretically have a large pool of rental units in which to reside, it is essential to remember that only a limited number of these units are affordable to large families that fall within the 31%-50% income range. Large families are more likely to fall within this group than other types of households.

C. Moderate Income Households (51-80% of Median Income):

This is defined by the Regulations governing the Consolidated Plan as a "Family whose income does not exceed 80 percent of the median income for area, as determined by HUD with adjustments for smaller and larger families, except that HUD may establish income ceilings higher or lower that 80 percent of the median for the area on the basis of HUD's findings that such variations are necessary because of prevailing levels of construction costs or fair market rents, or unusually high or low family incomes."

It is only reasonable to assume that those with lower incomes have greater difficulties in locating "safe, sanitary and decent housing" which is affordable to them. This discussion is subdivided by tenure type (owner-occupied as opposed to renter-occupied) and is further broken down into subgroups to deal with the special problems and needs associated with family type, race and age. It is assumed, for the purpose of this discussion that units which are affordable for the Very Low Income are also affordable for the low and moderate incomes.

1) Owner-occupied Housing:

Based upon the 2000 Census, there are 602 owner-occupied 0-1 Bedroom units which are affordable to those within the 51%-80% income range.

There is a greater selection of 2 bedroom units with 6,252 being affordable for those who fall in the 51%-80% range.

Three bedroom units offer the greatest selection with 32,073 being affordable for those who fall in the 51%-80% range.

Large Families:

There are approximately 32,073 owner-occupied units within the Consortium which have three or more bedrooms and which would theoretically be suitable for large families.

2) Rental Housing:

Based upon the 2000 Census, there are 3,188 rental 0-1 Bedroom units which are affordable to those within the 51%-80% range.

There is a greater selection of 2 bedroom units, with 6,704 being affordable for those who fall in the 51%-80% range.

Three bedroom units offer the middle selection with 3,258 being affordable for those who fall in the 51%-80% range.

Large Families

There are approximately 3,258 rental units within the Consortium which have three or more bedrooms and which would theoretically be suitable and affordable for large families within this group. This is a smaller number and percent than that found in owner-occupied housing, and this reflects the predominance of one and two bedroom units in many multi-family complexes.

D. Middle Income Households (>80% of Median Income)

Middle income households are defined as households "whose incomes are between 81% and 95% of the median household income for the area, as determined by HUD, with adjustments for small and larger families and for areas with unusually high or low incomes or where needed because of prevailing levels of construction costs or fair market rents".

It is only reasonable to assume that those with greater incomes have fewer difficulties in locating "safe, sanitary and decent housing" which is affordable to them, and this is reflected in the numbers. This discussion is subdivided by tenure type (owner-occupied as opposed to renter-occupied) and is further broken down into sub-groups to deal with the special problems and needs associated with family type, race and age. It is assumed, for the purpose of this discussion that units which are affordable for the 0%-80% income group are also affordable for the moderate income group.

1) Owner-occupied Housing:

Based upon the 2000 Census, there are 498 0-1 bedroom owner-occupied units which are affordable to those within the 81%-95% income range.

There is a greater selection of 2 bedroom units, with 4,327 being affordable for those who fall in the 81%-95% range.

Three bedroom units offer the greatest selection with 37,913 being affordable for those who fall in the 81%-95% range.

Large Families:

There are approximately 37,913 owner-occupied units within the Consortium which have three or more bedrooms and which would theoretically be suitable for large families.

2) Rental Housing

Based upon the 2000 Census, there are 725 0-1 bedroom rental units which are currently being rented to those within the 81%-95% range.

There is a greater selection of 2 bedroom units, with 668 being affordable for those who fall in the 81-95% range.

Three bedroom units offer the greatest selection with 709 being affordable for those who fall in the 81%-95% range.

Large Families:

There are approximately 709 rental units within the Consortium which have three or more bedrooms and which would theoretically be suitable and affordable for large families within this group. This is a smaller number and percent than that found in owner-occupied housing and reflects the predominance of one and two bedroom units in many multi-family complexes.

Source:

SOCDS (State of Cities Data Systems)/ CHAS Data: Housing Affordability Data for All Households Output for All Households. HUD.Gov/Consolidated Planning website. This is 2000 data as we find that more recent data is inaccessible.

SPECIAL CATEGORIES OF RESIDENTS FAMILY TYPE By Race, Tenure and Housing Problems (Substandard Housing)

A. Families

☐ Family Type Distribution of Rental Households With Income 0-30% of Median

All Households				
Total Households Small Family Large Family				
5,830 2,128 380				

Household by Race	Total	Family	Other
White Households	5,830	2,128	380
Black Non-Hispanic Households	2,048	1,212	434
Hispanic Households	114	100	14

Percent of Renter Households With Incomes Below 0-30% of Median Having Any Housing Problems (Substandard Housing)

Households Housing Problems		
Total Households	Small Family %	Large Family %
64%	69.1	76.1

Household by Race	Total %	Family %	Other %
White Households	59.5	67.5	71.4
Black Non-Hispanic Households	70.4	72.0	79.4
Hispanic Households	70.2	70.0	71.4

NEED		
Small Related:	1,470	
Large Related:	289	
All Other		
Households:	1,274	
Total:	3,033	

☐ Family Type Distribution of Owner Households With Incomes 0-30% of Median

All Households		
Total	Small	Large
6,791	1,539	211

Household by Race	Total	Family	Other
White Households	5,379	1,166	925
Black Non-Hispanic Households	1,382	513	308
Hispanic Households	28	28	0

□ Percent of Owner Households With Incomes 0-30% of Median Having Any Housing Problems (Substandard Housing)

All Households		
Total %	Small %	Large %
63.7	69.2	82.9

Household by Race	Total %	Family %	Other %
White Households	62.1	70.7	69.4
Black Non-Hispanic Households	70.0	71.2	65.0
Hispanic Households	85.7	85.7	0.0

☐ Family Type Distribution of Rental Households With Income 31-50% of Median

All Households		
Total	Small	Large
4,363	1,710	308

Household by Race	Total	Family	Other
White Households	2,754	944	918
Black Non-Hispanic Households	1,389	914	327
Hispanic Households	122	. 112	10

NEED	
Small Related:	1,065
Large Related:	175
All Other	
Households:	862
Total:	2,102

□ Percent of Renter Households With Incomes 31-50% of Median Having Any Housing Problems (Substandard Housing)

All Households		
Total % Small % Large %		
65.9	64.7	60.9

Household by Race	Total %	Family %	Other %
White Households	66.0	65.7	78.5
Black Non-Hispanic Households	62.6	59.6	81.3
Hispanic Households	88.5	87.5	100

NEED	
Small Related:	1,065
Large Related:	307
All Other	
Households:	1,280
Total:	2,652

☐ Family Type Distribution of Owner Households With Incomes 31-50% of Median

All Households			
Total	Small	Large	
8,231	601	795	

Household by Race	Total	Family	Other_
White Households	6,605	1,695	599
Black Non-Hispanic Households	1,491	756	160
Hispanic Households	102	80	14

Percent of Owner Households With Incomes 31-50% of Median Having Any Housing Problems (Substandard Housing)

All Households			
Total %	Small %	Large %	
43.9	67.0	67.6	

Household by Race	Total %	Family %	Other %
White Households	40.6	64.6	47.6
Black Non-Hispanic Households	54.6	70.0	55.0
Hispanic Households	56.9	72.5	0.0

NEED		
Small Related:	1,328	
Large Related:	406	
All Other		
Households:	397	
Total:	2,131	

 $\hfill\Box$ Family Type Distribution of Rental Households With Income 51-80% of Median

All Households			
Total	Small	Large	
6,257	2,622	460	

Household by Race	Total	Family	Other
White Households	4,330	1,905	1,545
Black Non-Hispanic Households	1,662	1,933	583
Hispanic Households	152	110	42

Percent of Renter Households With Incomes Below 51-80% of Median Having Any Housing Problems (Substandard Housing)

All Households			
Total %	Small %	Large %	
32.5	25.4	54.6	

Household by Race	Total %	Family %	Other %
White Households	32.8	28.3	35.2
Black Non-Hispanic Households	30.0	29.2	33.8
Hispanic Households	51.3	61.8	23.8

NEED			
Small Related:	1,328		
Large Related:	406		
All Other			
Households:	397		
Total:	2,131		

 $\hfill\Box$ Family Type Distribution of Owner Households With Incomes 51-80% of Median

All Households			
Total	Small	Large	
15,017	5,630	1,323	

Household by Race	Total	Family	Other
White Households	12,982	5,519	1,603
Black Non-Hispanic Households	1,868	1,301	224
Hispanic Households	58	38	10

Percent of Owner Households With Incomes 51-80% of Median Having Any Housing Problems (Substandard Housing)

All Households			
Total %	Small %	Large %	
33.2	38.7	47.0	

Household by Race	Total %	Family %	Other %
White Households	31.6	39.9	50.4
Black Non-Hispanic Households	42.2	40.7	61.6
Hispanic Households	51.7	52.6	-0-

NEED	
Small Related:	2,179
Large Related:	627
All Other	
Households:	1,864
Total:	4,670

Sources:

SOCDS (State of Cities Data System)/CHAS Data: Housing

Problems Output for All Households, Year 2000.

HUD.Gov/Consolidated Planning website.

SOCDS (State of Cities Data System)/CHAS Date: Housing Problems Output for Black/Non-Hispanic Households, Year

2000. HUD.Gov/Consolidated Planning website.

B. SINGLE PERSONS

Data for single person households within the Consortium is not so readily available as that found for other household types. The data used is based upon the 2000 Census of Population and Housing. To derive at an estimation of need, data has been pulled for single person households and 0-1 bedroom units. This data is as follows:

	# Single Person Households	(31,827)
	# Renters (0-1 BR Units)	# Homeowners (0-1 BR Units
•	6,436	1,801
	# Renters by Income Group (0	-1 BR Units)

•	1,059	1,464	0-80% 3,188
	# Owners by Income Group	(0-1 BR Units)	
•	0-30% NA	0-50% 701	0-80% 602

SUBSTANDARD HOUSING/HOUSING PROBLEMS (Single Persons)

Substandard housing is hard to define and harder to measure. The data relating to this subject is also limited. For the purpose of the Consolidated Plan we will use the U.S. Census Bureau, CHAS Data Tables designation of "housing problems" to designate substandard housing units.

□ 0-1 BR Owner-Occupied Substandard Housing

Data is not available for owner-occupied households within the 0%-30% of median income range. There are 701 housing units owned by households within the 31%-50% income range. Those households falling within the 0%-50% range have housing problems at a rate of 46.2%.

Those that fall within the 51%-80% range have housing problems at a rate of 38.9%. Of the 3,188 housing units within this category, 1,240 have housing problems of one type or another. Due to the need of greater detail, we consider these to be substandard housing.

□ 0-1 BR Renter-Occupied Substandard Housing

There are 1,059 housing units rented by households within the 0%-30% income range. Those households falling within the 0%-30% range have housing problems at a rate of 31.5%.

There are 1,464 housing units rented by households within the 31%-50% income range. Those households falling within the 31%-50% range have housing problems at a rate of 43.9% for 643 households.

There are 3,188 housing units rented by households within the 51%-80% income range. Those households falling within the 51%-80% have housing problems at a rate of 40.6%. Of the 3,188 housing units within this category, 1,294 have housing problems of one type or another.

NEED:

Renter:

0-30% of Median : 186 31-50% of Median : 299 51-80% of Median : 673 Total : 1,158

Owner:

0-30% of Median : 00 31-50% of Median : 46 51-80% of Medina : 12 Total : 58

Total Renter and Owner: 1,216

Sources:

2000 Census on Population and Housing, Jefferson County, Alabama 2000 CHAS Data: Affordability Mismatch Output for all Households

C. Elderly Residents

☐ OWNER-OCCUPIED

0-30% of Median

The elderly are far more likely to be, as a rule, homeowners rather than renters. There are currently 3,794 elderly households that fall within the 0%-30% range with over 58.6% having housing problems. There are 58.2% having a cost burden of 30% or greater and 34.8% have a cost burden of greater than 50%.

• 31-50% of Median

The second group are elderly households that fall within the 30%-50% income range. There are 4,357 households in this group, of which 23.3% have housing problems, and 22.5% have a cost burden of greater than 30%. An additional 6.9% have a cost burden of greater than 50%.

51-80% Of Median

The elderly are far more likely to be, as a rule, homeowners rather than renters. There are 6,190 households in the 51%-80% group of homeowners. Of this group, 19.8% are shown as having housing problems. There are 19.2% who have a cost burden of 30% or greater and 6.6% who have a cost burden of greater than 50%.

• 81-95% Of Median

The elderly are far more likely to be, as a rule, homeowners rather than renters. There are currently 13,856 homeowners within the 81%-95% range. Of this group, over 5.6% are shown as having housing problems. There are 5.5% with a cost burden of 30% or greater and 1.3% with a cost burden of greater than 50%.

Cost Burden	30%+	50%+
00-30% MEDIAN	58.2	34.8
31-50% MEDIAN	30.1	16.2
51-80% MEDIAN	19.2	6.6
81-95% MEDIAN	5.5	1.3

NEED:

HOUSING		
NEED/PROBLEMS	%	#
00-30% OF MEDIAN	58.6	2,233
31-50% OF MEDIAN	30.6	1,144
51-80% OF MEDIAN	19.8	1,225
81-95% OF MEDIAN	5.6	775
Owner Total:		5,665

☐ RENTAL

0-30% of Median

While elderly are far more likely to be, as a rule, homeowners rather than renters, there are currently 1,499 such households within the Consortium. Of this group, 46.9% have housing problems. There are 45.9% having a cost burden of 30% or greater and 31.3% having a cost burden of greater than 50%.

• 30-50% of Median

There are 1,066 households in this group, of which 52.1% have housing problems. There are 52.1% with a cost burden of greater than 30% and 17.5% with a cost burden of greater than 50%.

• 51-80% Of Median

There are 933 households in the 51%-80% group of renters. Of this group, 35.0% are shown as having housing problems. There are 34% who have a cost burden of 30% or greater and 13.6 who have a cost burden of greater than 50%.

• 81-95% Of Median

There are currently 1,307 renters within the 81%-95% range. Of this group, over 13.4% are shown as having housing problems. There are 12.3% with a cost burden of 30% or greater and 6.0% with a cost burden of greater than 50%.

COST BURDEN:

COST BURDEN	30%+	50%+
	%	%
00-30%		
MEDIAN	45.9	31.1
31-50%		
MEDIAN	52.1	17.5
51-80%		
MEDIAN	34	13.6
81-95%		
MEDIAN	12.3	6.0

NEED:

HOUSING NEEDS/PROBLEMS	%	Total
00-30% OF MEDIAN	46.9	703
31-50% OF MEDIAN	52.1	555
51-80% OF MEDIAN	35.0	327
81-95% OF MEDIAN	13.4	175
Owner Total:		1,760

Sources:

Year 2000 SOCDS (State of Cities Data)/CHAS Data: Housing Problems

Output for All Households.

D. NON-HOMELESS Populations

Persons with mental illness, disabilities and substance abuse problems need an array of services. Their housing requires a design that ensures residents maximum independence in the least restrictive setting, including independent single or shared living guarters in communities, with or without onsite support. Options include:

- Living with family or friends with adequate support and/or respite services.
- Small, home-like facilities in local communities close to families and friends, with the goal of moving to a less structured living arrangement when clinically appropriate.

Residential placements need to provide the equipment and supplies necessary to assist in successful, long-term housing stability. Admission to state or private hospitals, mental retardation centers, state schools or alcohol and drug abuse treatment centers must not be considered permanent or long-term residential options.

Sources:

City of Birmingham Consolidated Plan for 2005 and 2010

1. MENTALLY ILL

Those individuals experiencing severe and persistent mental illness are often financially impoverished due to the long-term debilitating nature of the illness. The majority of these individuals receive their sole source of income from financial assistance programs – Social Security Disability Insurance or Social Security Income. The housing needs for this population are similar to other low-income individuals. However, because of this limited income, many of these individuals may live in either unsafe or substandard housing. These citizens need case management, support services and outpatient treatment services to monitor and treat their mental illness.

The Alabama Department of Mental Health and Mental Retardation, Division of Mental Illness, provides a comprehensive system of outpatient and residential services for adults with serious mental illness and children with severe emotional disorders. In addition to making services available to individual clients in the least restrictive environment possible, the service delivery system provides continuity of service and support for clients and their families. There are seven department-operated residential facilities for individuals with mental illness. Short-term, acute care is provided by Bryce Hospital in Tuscaloosa, Searcy Hospital in Mt. Vernon, North Alabama Regional Hospital in Decatur and Greil Hospital in Montgomery. Extended psychiatric care is provided at Bryce Hospital for the northern portion of the state and Searcy Hospital in the south. Three facilities provide specialized services: Mary Starke Harper Center (geriatric psychiatry) and Taylor Hardin Secure Medical Facility (forensic evaluation and treatment) in Tuscaloosa and the Thomasville Mental Health Rehabilitation Center (psychiatric rehabilitation). Residential psychiatric services for adolescents are available at Bryce Hospital.

The Alabama Department of Mental Health and Mental Retardation, Mental Retardation Services provides a comprehensive service system across the state. The delivery of services is managed through four geographic regions. The division works closely with community providers to coordinate the flow of services between and among the community and the developmental centers. Developmental centers provide residential services to those people who continue to need institutional care in small, modern, regional centers. These centers include the William D. Partlow Developmental Center in Tuscaloosa, Lurleen B. Wallace Developmental Center in Decatur, Albert P. Brewer Developmental Center in Mobile and J.S. Tarwater Developmental Center in Wetumpka. Each of these facilities provides comprehensive services-including specialized medical, behavioral and programmatic services – that are developed based on individual need. These centers are certified as intermediate care facilities by complying with applicable Medicaid standards and requirements.

Other facilities in the Birmingham area that provide behavioral and/or psychiatric care include the following:

The residential programs are staffed and operated by the Authority. Individuals in the residential programs participate in Day Treatment activities that emphasize an educational and rehabilitative approach. As individuals leave the residential program, efforts are made to place them in supported housing arrangements, and referrals are made to local mental health centers to ensure continued support and treatment.

Birmingham Baptist Medical Center - Montclair

Birmingham Baptist Medical Center – Princeton Brookwood Medical Center (Tenet HealthSystem) Carraway Methodist Medical Center Children's Hospital Hill Crest Behavioral Health Services University of Alabama Hospital VA Medical Center

Sources: City of Birmingham Needs Assessment for 2005

Alabama Department of Mental Health and Mental Retardation

(www.mh.state.al.us)

"The J. B. S. Mental Health Authority (Jefferson Blount & St. Clair County's)

provides a variety of housing options for the population that it serves. The following is a summary taken from their web-site.l

"INDEPENDENT LIVING

"The Horizon Apartments, operated by the Authority is a 19 bed apartment complex, with a resident manager available on a 24-hour basis. The Greenwood Apartments also operated by the Authority is an 11 bed apartment complex with a resident manager available on a 24 hour basis. These complexes offer individuals with serious mental illness an opportunity to live independently with support during emergencies. Case management support is also provided to those residents in need of these services. Referrals are received from local community agencies and the community at large.

"The Authority also owns and operates four, two-bed Townhomes for independent living. Although no resident manager is located on the premises, case management services are provided to all residents. Referrals for the Townhomes are received from local community agencies and the community at large.

In addition the Authority operates 20 scattered site apartments for homeless mentally ill individuals. Case management support is provided as well as Day Treatment activities.

"RESIDENTIAL PROGRAMS

"The Authority operates a residential program for adults with mental illness, which provides treatment and housing for 90 individuals. This program is comprised of four Transitional homes, four Group homes, and a Brief Intensive Treatment Home providing services to ten people each."

Source: JBS Mental Health Authority (Jefferson, Blount & St.; Clair Counties) Website Updated 2010 Page created 17 May 2000

2. DEVELOPMENTALLY DISABLED

- A. The term developmental disability means a severe, chronic disability in an individual five years of age or older that:
- 1. Is attributable to a mental or physical impairment or a combination of mental and physical impairments
- 2. Is manifested before the person attains age 22
- 3. Is likely to continue indefinitely
- 4. Results in substantial functional limitations in three or more of the following areas of major life activity:
 - o self-care
 - o receptive and expressive language
 - o learning
 - o mobility
 - o self-direction
 - o capacity for independent living
 - o economic self-sufficiency and
- 5. Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.
- B. INFANTS AND YOUNG CHILDREN: An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting 3 or more of the criteria described in 1-5 above if the individual, without services and supports, has a high probability of meeting those criteria later in life.

Alabama Council for Developmental Disabilities

RSA Union Building 100 North Union Street Post Office Box 301410 Montgomery, Alabama 36130-1410

Phone: 1-334-242-3973 Toll-Free: 1-800-232-2158

Information and Referral: 1-877-774-9520

FAX: 1-334-242-0797

Email: addpc@mh.state.al.us

For questions and comments about this website, contact jms35475@bellsouth.net Artwork © 2001 by madgraphics

Text © 2001 by the Alabama Council for Developmental Disabilities

Page updated: May 19, 2005 4:16 p.m.

Housing for the disabled must include a variety of options to meet the unique needs of persons with diverse types of disabilities. Services must be provided by area programs or contracted privately, including group home placements, intermediate

care facilities, supported living programs, supported employment, sheltered workshops, home ownership and rental subsidy.

Glenwood Autism and Behavioral Health Center

"Glenwood provides treatment and education services in a least restrictive setting, through a continuum of care, with the highest respect for individuals and families served. Glenwood leads the state in providing behavioral health care and educational services that are responsive and complimentary to a continuum of care for persons with unique mental health disorders. Glenwood supports mental health and educational professionals and promotes research in these specialized areas.

"Child and Adolescent Programs

- Allan Cott School
- Lakeview School Adult Programs
- Adult Day Habilitation
- Vocational Services

"Residential Services

Short- and long-term residential services are available for children and adults in a variety of settings, both on and off the Glenwood campus. Residential programs for a wide range of ages provide more than just housing; they offer a supervised, structured, and supportive environment tailored to meet each person's individual needs.

"Residential Services for Children

- Drummond Center I
- Drummond Center II
- Daniel House I
- Daniel House II
- McDonough House
- Revnolds House

"Adult Residential Services

- Blanford House
- Donita House
- Harper House
- Ireland House
- Jernigan House
- Mitchell House
- Mott Webb House
- Parkland Place

"Residential Care for Adults with Autism

Adults with autism may **live on the Glenwood campus** in homes designed to serve adults who need a structured program with 24-hour supervision and care. Each weekday residents participate in the Adult Day Program. Residential instructors provide training, assistance, and supervision during the evenings, overnight, and on weekends.

"For many adults with autism **community-based apartment** living may be appropriate. Residents share twobedroom apartments and may call on staff, who are present
24-hours a day, when day to day activities present a
challenge.



"Glenwood's **companion programs** provide individual levels of support ranging from live-in assistance to periodic assistance for adults with autism. These services may be provided through one of Glenwood's community homes or in the individual's own home. In every case, the goal of the Companion Program is to gradually increase the amount of time and number of conditions in which adults with autism can function independently.



"Our goal at Glenwood is to provide a home for adults with autism in the least restrictive environment possible.

Glenwood encourages our adult residential clients to be as independent as possible, so instructors emphasize daily living skills such as grocery shopping, cooking, cleaning and other household activities.

"All treatment is based on individualized treatment plans that target goals to be achieved each month. Medical personnel on staff and consultants provide ongoing supervision and coordination of medication regimes, nutritional programs and general health services. Families are also an integral part of the program and are encouraged to participate in all aspects of treatment."

Source: 2010 Website for Glenwood, Inc. the Autism and Behavioral Health System in Birmingham, Alabama.

The Alabama Association of Mental Retardation and Developmental Disabilities (AAMRDD) is a statewide association of local public agencies responsible for planning, needs assessment and services for individuals with mental retardation. Many of these agencies also serve children with developmental disabilities. Through these agencies, mental health services are provided on a local level, rather than sending individuals away to state hospitals and schools. These agencies were formed because concerned families and citizens wanted agencies that focused their efforts on individuals with mental retardation rather than being a part of a system which also served individuals with mental illness and substance abuse. The local agency serving Birmingham is the Mental Retardation and Developmental Disabilities Health Care Authority of Jefferson County. The agency provides information and referral services, case management, assessment, day services, employment and supported employment, residential services, in-home services and early intervention. Its residential services include making living arrangements for individuals in six- to ten-person group type homes, supervised two-to six-person homes, individual foster type homes and in apartments with supervision or supports, which are based upon individual needs and preferences.

The Alabama Council for Developmental Disabilities is made up of 36 member organizations that oversee activities in advocacy, capacity building, and systems change. These initiatives contribute to a coordinated comprehensive system of community services that are directed by people with developmental disabilities and/or their families. This approach results in consumer and family-centered activities that have individualized supports and other forms of assistance that enable individuals with developmental disabilities to exercise self-determination, independence, productivity, integration and inclusion in all facets of community life. Support and assistance in achieving independent living is provided by The Independent Living Center of Birmingham and the Lifelong Coordination Clinic, also located in Birmingham.

Sources:

City of Birmingham Needs Assessment for 2005 & 2010

Alabama Council for Developmental Disabilities (www.acdd.org) Alabama Associations of Mental Retardation and Developmental

Disabilities

Glenwood Autism and Behavioral Health System Website 2010 in

Birmingham, Alabama

3. ALCOHOL AND SUBSTANCE ABUSERS

The majority of people that suffer from any form of alcohol or substance abuse maintain jobs and homes at the beginning stages of their problem. However, as the problem progresses, the ability to maintain a well functioning lifestyle diminishes. This problem touches every income and racial group, but is found to be most prevalent among the lowest income groups. Preventive programs incorporated into housing services provided to low-income persons are necessary to address this problem.

The Alabama Department of Mental Health and Mental Retardation, Division of Substance Abuse Services has the responsibility for development, coordination and management of a comprehensive system of treatment and prevention services for

alcoholism/drug addiction and abuse. This responsibility encompasses contracting for services with local providers, monitoring service contracts, evaluating and certifying service programs according to Department standards for substance abuse programs, and developing models for a continuum of treatment and prevention services.

Substance abuse treatment facilities in Birmingham that provide treatment and/or residential services include the following.

- Alcohol and Drug Abuse Treatment Centers
- Aletheia House
- Birmingham Healthcare
- Birmingham Metro Treatment Center
- Bradford Health Services, Birmingham Regional Office
- Department of Veterans Affairs, Medical Center
- Fellowship House
- Jefferson County Committee for Economic Opportunity, Community Substance Abuse Program
- Oakmont Center
- Tri-County Treatment Center
- University of Alabama at Birmingham, Center for Psychiatric Medicine
- University of Alabama at Birmingham, Substance Abuse Programs

Sources: City of Birmingham Needs Assessment for 2005 & 2010
U.S. Department of Health and Human Services, Substance Abuse & Mental Health Services Administration, Substance Abuse Treatment Facility Locator (http://go.vicinity.com/samhsa/)

4. HIV/AIDS

The Alabama Statewide Coordinated Statement of Need (SCSN) of 2009, reports Housing is one of the barriers facing those with AIDS/HIV.

Lack of housing facilities and funding to create additional housing facilities for HIV Consumers and their families creates additional challenges in maintaining over all health status of HIV Consumers.

The Executive Summary –AIDS Alabama Needs 2007 Assessment Survey reports the following housing data for those living with HIV/AIDS in the State of Alabama.

Lived in own place = 61%
Lived in someone else's place = 25%
Lived in welfare hotel, temp housing, shelter, streets, jail or halfway house,
drug treatment program housing = 8%
Average Time Living in current situation
Less than 1 year = 27%
1-5 years = 41%
5 years or more = 26%
Average Length of most recent homelessness = 392 days

In past 6 months, length of homelessness = 45 days

The Southern States Manifesto (HIV/AIDS & STD's in the South: A Call to Action) was issued on March 2, 2003 reports the following:

"....several studies confirm that stable housing is one of the greatest needs of persons living with HIV/AIDS. Without stable housing, individuals living with HIV/AIDS cannot access the complex treatment and care vital to survive. Research has confirmed that stable housing, coupled with supportive services responsive to their complex needs, increases the ability of persons living with HIV/AIDS, particularly those who are poor and low-income, to access and comply with life-sustaining HIV/AIDS treatment."

"AIDS is an impoverishing disease that increases the risk of homelessness and disproportionately affects very low-income persons and communities of color. Statistics reported to HUD by HOPWA grantees reflect that demographic disparity. Clients benefiting from HOPWA – supportive housing were reported as: 53% Black/African-American, 21% Latino/Latino, 1% Asian/Pacific Islanders, and 1% Native American/Alaskan Native. The remaining 24% were White/Caucasian; 91% of all HOPWA clients were persons/households with monthly incomes of less than \$1,000, and more than 50% of those households earned less than \$6,000.00 per year (HUD, 1999)."

1) HIV/AIDS in Alabama

On April 15, 2005, the Alabama Department of Public Health reported that the total HIV/AIDS cases reported to date in Alabama total 13,799. Of this number, the following death rates are reflected:

	AIDS	%	HIV	%
Living	3,678	46.7	5,382	91%
Deceased	4,204	53.3	535	9&

2) HIV/AIDS in Jefferson County

Of 13,799 cases reported in 2005, 4,018 are in Jefferson County. Of the 16,969 cases reported in 2010, 5,571 are estimated to be within Jefferson County. Deaths in Jefferson County from HIV are shown below for years 2000-2003 and 2008.

Year	Total	Male	Female	White	Black & Other
2000	57	44	13	9	48
2001	58	45	13	5	53
2002	44	35	5	11	33
2003	40	30	10	7	33
2008	35	25	. 10	7	28

4) Services to Local Communities and to People with HIV/AIDS

The mission of the Division of HIV/AIDS Prevention and Control, in collaboration with community partners, is to reduce the incidence of HIV infections, to increase life expectancy for those infected, and to improve the quality of life for persons living with or affected by HIV. The charge of the Division is to:

- monitor the epidemic
- improve public understanding of HIV
- prevent or reduce behaviors that transmit HIV
- increase individual knowledge of HIV serostatus
- Strengthen systems for referral to appropriate prevention and treatment services



BIRMINGHAM AIDS OUTREACH (BAO)

"During 2005 BAO provided a diverse range of services designed to assist our clients in their quest to live healthier lives.

- The food bank prepared and distributed 3,395 food boxes, weighing approximately 60 lbs. each.
- BAO provided 526 instances of financial assistance to help clients make copays and purchase medicines, medical supplies, and nutritional supplements.
- We provided 2,840 instances of transportation assistance in 2003.
- BAO provided 1,253 instances of personal hygiene products.
- Holiday gift boxes served 292 adults and 66 children.
- There were 797 unduplicated sessions of counseling, Friends and Family night attendance was 224, S.I.S (Women's Support Group) served 98 individuals and a total of 2,421 hours of Case Management work.
- BAO provided 104 Post Test Education sessions.
- Volunteer services (hair cuts, massages, and Chi-gong) served 134 clients.

"Good health for people living with HIV and AIDS is about more than food and medicine. We must also reach out in an effort of emotional support. To this end, we provide our clients and their friends and families with many opportunities for group and individual counseling, socialization, and one-on-one support and attention.

"Support Groups

"Wednesdays: 1:00 pm - 2:30 pm at BAO Support group for people living with HIV/AIDS

"Last Thursday of every month: 11:30 am - 1:00 pm at BAO S.I.S - (Sisters in Style) Support group for HIV positive women meets for lunch and activities

"Second Tuesday night of every month: 6:00 pm - 8:00 pm at BAO Friends and Family Night Dinner and games for consumers and their friends and families

"Individual Counseling

"For depression, stress, relationship issues, loss, anger, fear about the future – appointment required. For more information contact: E-mail Polly Kellar Phone: 205.322.4197 extension 11

"BAO currently provides prevention education to the community through two programs: Brother-to-Brother and the Youth Advisory Council, in addition to other special requested events.

"Brother to Brother

"Brother-to-Brother is one of only a few secondary prevention education programs in the nation, and the first such program in the state of Alabama. Brother-to-Brother provides prevention education information, as well as empowerment skills building and self-worth enhancement, to HIV positive men who have sex with men. Through this program, participating consumers come to understand the considerable risk of reinfection and learn skills that will assist them in making healthy decisions for themselves and prevent HIV transmission to negative partners. For meeting times and more information on Brother to Brother support Group

"Youth Advisory Council

"The Youth Advisory Council (YAC) is an award-winning group of young men and women, ages 13-19, who are trained as peer educators and provide primary prevention education to the adolescent community on a peer-to-peer basis. Peer education programs across the nation report considerable success in their efforts to educate adolescents about the realities and risks of HIV and AIDS. BAO's Youth Advisory Council is no exception. YAC was awarded the national Youth in Action Award in 2002 and was recognized by the American Red Cross as "Educators of the Year.

"For more information contact: Stephen Elrod Phone: 205.322.4197 extension 13"

AIDS ALABAMA

AIDS Alabama- Jefferson County Needs Assessment Jefferson County Consolidated Plan 2010-2014 Jefferson County Statistics:

"The Centers for Disease Control and Prevention (CDC) estimate that there are currently 1.2 million people living with HIV/AIDS in the United States and that more than 56,000 persons become newly infected each year. AIDS housing experts estimate that about half of these people – over 500,000 households – will need some form of housing assistance during the course of their illness (NAHC, 2008). At current funding levels, the federal Housing Opportunities for Persons with AIDS (HOPWA) program serves only about 70,500 households per year. Yet there is not a single county in the United States where a person who relies on the maximum federal Supplemental Security Income (SSI) payment (\$674 in 2010) can afford even a studio apartment (National Low Income Housing Coalition, 2008).

"As of April 1, 2010, a combined 16,969 HIV/AIDS cases have been reported to the Alabama Department of Public Health (ADPH). Of this total, 4,806 cases have been reported in Jefferson County. These totals do not include persons tested in other states who have relocated to Alabama or persons who are not aware of their HIV status. The Governor's Statewide Interagency Council on Homelessness reports that there are approximately 155 homeless, HIV-positive individuals in the county on any given night.

"Correlation between HIV and housing:

"Research studies reported on the issue show that:

- 1. It is estimated that 40 to 60% of all persons living with HIV/AIDS will experience homelessness or housing instability at some point in their lifetime (Housing and HIV/AIDS Research Summit, 2005).
- 2. Homeless or unstably housed persons were two to six times more likely to "...have recently used hard drugs, shared needles or exchanged sex..." than similar low-income persons who were stably housed (AIDS and Behavior, 2007).
- 3. Receipt of housing assistance enabled homeless persons with substance use and mental health problems to achieve stability over time and to cease or reduce both drug-related and sexual-risk behaviors (AIDS and Behavior, 2007).
- 4. Over a 12-year period, housing status and receipt of housing assistance consistently predicted entry and retention in HIV medical care, regardless of demographics, drug use, health and mental health status, or receipt of other services (AIDS and Behavior, 2007).

"These and other recent findings add to the growing body of evidence that housing itself independently reduces risk of HIV infection/transmission and improves the health of persons living with HIV. This evidence challenges the prevailing "risky person" model for understanding the co-occurrence of homelessness, HIV/AIDS, and poor health outcomes.

"Rising infection rates coupled with inadequate funding, resources, and infrastructures have resulted in a disparate and catastrophic situation in our public health care systems in the South. The impact of HIV/AIDS on populations that also disproportionately reflect vast poverty and inadequate support continues to fuel the challenges of 1) reducing new infections; 2) identifying infections as early as possible; and 3) providing adequate care, treatment, and housing.

"Homelessness is a major risk factor for HIV, and HIV is a major risk factor for homelessness." (National AIDS Housing Coalition)

*AIDS is the most serious complication caused by infection with HIV. The virus attacks the white blood cells which protect the body from infection and thus lowers the body's ability to fight diseases and infections."

Source:

AIDS, Alabama - 2010

Birmingham AIDS Outreach - 2010 Website

5) RACIAL DISPARITY: HIV/AIDS AND AFRICAN AMERICANS

In our 2005 Consolidated Plan we found that African Americans (AF-AM) represented 26% of the state's population; however, 62.6% (8,538) of all reported HIV/AIDS cases in Alabama were from this group. AF-AM males represented 43.8% of all HIV/AIDS reported and AF-AM females represent 18.8% of all HIV/AIDS reported. Considering the income characteristics noted in the Southern States Manifesto, it is not unreasonable to assume that of all HIV/AIDS cases, African-Americans suffer the most severely from housing problems and are thus where the greatest need exists.

The Alabama Department of Public Health reports that "as of April 1, 2010, 7,389 Human Immunodeficiency Virus (HIV) infections and 9,680 Acquired Immune Deficiency Syndrom (AIDS)* cases have been reported to the Alabama Department of Public Health. A combined total of reported HIV/AIDS cases in Alabama are 16,969." This is a significant increase over the 2005 figure of 13,799.

African-Americans (AF-AM's) "represent 26% of the state's population; however, 63.9% (10,846) of all reported HIV/AIDS in Alabama are from this group.

AF-AM males represent 44.7% (7,579) of all HIV/AIDS reported.

AF-AM females represent 19.3% (3,267) of all HIV/AIDS reported."

Jefferson County has the highest reported percentage of HIV/AIDS in the State of Alabama. The percentage in Jefferson County is 29.4 of the state total. That works out to 5,571 of the State of Alabama Total of 16, 969 HIV/AIDS. By using the state

average racial breakdown for Jefferson County, we can estimate that 3,688 HIV/AIDS in Jefferson County are AF-AM. Of this group, we estimate that:

AF-AM males in Jefferson County represent 3,218 of all HIV/AIDS reported in Jefferson County.

AF-AM females in Jefferson County represent 1,389 of all HIV/AIDS reported in Jefferson County.

The report SHAPING THE NEW RESPONSES: HIV/AIDS's LATINOS – The DEEP SOUTH – ALABAMA "the Latino Population is among the fasting growing in the South, attracted by jobs in agriculture, poultry and hog farms, construction, landscaping and other services, and some manufacturing jobs. Birmingham has the largest Latino population in Alabama with estimates ranging from 70,000-100,000."

ALABAMA

Table 2: Demographic and epidemiological facts:

Estimated 2007 state population (ACS):	4,628,000
Estimated 2007 Latino population (ACS):	25,000 (2.70%)
Reported cumulative HIV/AIDS cases	15,683*
6/30/08	

Table 3: Alabama reported overall and Latino HIV diagnoses, 2005-2007

Year	HIV incidence	Latino HIV diag.	Lat. % of total
2005	849	22	2.59%
2006	934	23	2.46%
2007	900*	31*	3.44%*

Sources: HIV/AIDS Surveillance Branch, Alabama Department of Public Health, End of the Year Report 2005, http://www.adph.org/aids; Anthony Merriweather, 'HIV/AIDS in Alabama's Hispanic Community', presentation at Alabama Statewide Roundtable, February 21, 2008;

Table 4: Adult and Adolescent Annual AIDS Case Rate per 100,000 Population, by Race/Ethnicity, Reported in 2006, Alabama

Caucasian	African-American	Latino
4.9	32.5	18.3

Source: Kaiser Family Foundation, www.statehealthfacts.org

Table 5: Rates per 100,000 population of total adults and adolescents living with HIV/AIDS in Alabama at the end of 2006

Caucasian	African-American	Latino
111.1	619.0	210.6

Source: CDC (2008) HIV/AIDS Surveillance Supplement Report 13(1): 39-40.

^{*}Lani Thompson, Alabama Department of Public Health, personal communication 11/6/2008.

6. Domestic Violence (Note: City of Birmingham/Jefferson County are under the same umbrella as this is a community wide problem.

"For many women and children, home is not a safe place to be. Law enforcement studies show that women are more likely to be victims of domestic violence than of burglary, muggings or other physical crimes combined (*Bureau of Justice*). Child advocacy organizations report that child abuse is 15 times more likely to occur in families where domestic violence is present (*National Coalition Against Domestic Violence*). While fleeing this violence may seem to be the most logical option, without resources a woman and her children may find themselves homeless.

"Domestic violence knows no racial, ethnic, religious, or economic boundaries. While an estimated 95% of domestic violence victims are females, these women come from all types of backgrounds. However, it is often the women with the fewest personal and economic resources that seek assistance. Alabama Criminal Justice Information Center statistics reveal that in 2008 there were 7 homicides, 36 rapes and 4,043 assaults reported in Jefferson County during that 12 month period, alone. Every month the YWCA receives almost a thousand incident/offense reports from the Birmingham Police Department related to domestic violence cases. Given that this reflects only those that are reported, it is easy to understand that there may be over 12,000 abused women—in addition to their children—in the City of Birmingham in one year, alone.

"The confluence of those living in poverty in this City and the number of abused and battered women and children in the City of Birmingham is staggering. The 2008 American Community Survey estimates that just over 664,101 people live in Birmingham, Alabama. Of this population, it is estimated that roughly 9.4% of all families fall below the poverty level and 24.7% of female headed-families fall below the poverty level. Additionally, 12.6% of all Birmingham individuals live below the poverty level. From such figures it is easy to understand that the majority of victims have minimal resources to escape their batterers and are in need of safe shelter and housing.

"The most recent Gaps Analysis and 2009 Point in Time survey conducted through Metropolitan Birmingham Services for the Homeless confirms the need for shelter as well as transitional housing services for victims of domestic violence in Birmingham. Unfortunately in light of the nature of reporting for this subpopulation and based on its historical work with these individuals and families, the YWCA is convinced that those needs have, nevertheless, been under-reported.

"In its subpopulations count, MBSH's Gaps Analysis identifies 141 sheltered individuals and 20 unsheltered individuals, all identifying as victims of domestic violence. This results in a total of 161 single victims of domestic violence that were reported within the continuum during the 2009 Point in Time Count—it does not include accompanying children.

"These numbers, although under-reported, do speak to the need for shelter—both ongoing and new space—for domestic violence victims. As evidenced earlier within this section, statistical data proves that there are upwards of 12,000 reported victims of domestic abuse annually. This figure, blended with factors of economic hardship that preclude one's ability to find safe housing, the prevalence of poverty discussed

earlier, and the YWCA's position as the only provider of DV services in a three county area, begins to create a far greater picture of the number of sheltered and unsheltered individuals and families escaping domestic violence in Birmingham.

"Further complicating this clear under-reporting is the fact that during the point in time count, any qualifying family who could not be placed in a shelter because there was no room was immediately placed in a hotel room. These folks were also not reported as being "unsheltered."

"The crisis of domestic violence as well as the need for safe, decent and affordable housing opportunities disproportionately affects vulnerable populations including those at the lowest ends of the economic scale, effectively destabilizing communities."

Public Housing Authorities

There are four Public Housing Authorities within the Jefferson County Community Development Consortium identified as follows:

Fairfield Housing Authority

6704 Avenue D Fairfield, Al. 35064

Exec. Director:

Fave White

Phone #

205-933-8017

Fax #

205-925-9711

Status	Developments	Units
In Management	2	302
In Development	0	0
Total	2	302

Section 8 I	Section 8 Inventory			
Increments Units				
1	466			

Number of Families on PHA Waiting List by Bedroom Size						
0-BR 1-BR 2-BR 3-BR 4-BR 5-BR						5-BR
Family						
Elderly/Disabled Data Requested but Non Provided						

HUD Assessment Score: 62 Substandard Physical

Jefferson County Housing Authority

3700 Industrial Parkway Birmingham, Al. 35217

Exec. Director:

Lewis McDonald

Phone # :

205-849-0123

Fax #

205-849-0137

Status	Developments	Units
In Management	5	574
In Development	0	0
Total	5	574

Section 8 Inventory			
Increments Units			
1	1,678		

Number of Families on PHA Waiting List by Bedroom Size						
0-BR 1-BR 2-BR 3-BR 4-BR 5-E						5-BR
Family	0	87	154	167	5	0
Elderly/Disabled	0	70	15	14	0	0

The Jefferson County Housing Authority also has 577 applications on its' Section 8 Voucher Program Waiting List out of an application pool of 2,700 applications. Those selected for the waiting list were selected by a random process via Internet.

HUD Assessment Score: 87 Standard Performer

Leeds Housing Authority

1630 Moore Street Leeds, Alabama 35094

Exec. Director:

Angela Cole

Phone #

205-699-6213

Fax #

205-699-2208

Status	Developments	Units
In Management	1	158
In Development	0	0
Total	1	158

Section 8 Inventory				
Increments Units				
1 182				

Number of Families on PHA Waiting List by Bedroom Size						
0-BR 1-BR 2-BR 3-BR 4-BR 5-BF						
Family						
Elderly/Disabled	erly/Disabled Data Requested but Non Provided.					

HUD Assessment Score: 91 High Performer

Tarrant Housing Authority

624 Bell Avenue Tarrant, Al. 35217

Exec. Director:

Katherine Jones

Phone #

205-841-2270

Fax #

205-841-2226

Status	Developments	Units
In Management	1	97
In Development	0	0
Total	1	97

Section 8 Inventory				
Increments Units				
1	97			

Number of Families on PHA Waiting List by Bedroom Size							
	0-BR	1-BR	2-BR	3-BR	4-BR	5-BR	
	50 app	olications	on the c	urrent PHA	Waiting Lis	t	

The Tarrant Housing Authority also has 20 applications on its' Section 8 Voucher Program Waiting List. Plans are "in the works to take Section 8 and Public Housing applications sometime the summer" (summer of 2010).

HUD Assessment Score: 87 Standard Performer

- **Sources:** 1. Southern States Manifesto HIV/AIDS & STD's in the South: A Call to Action, March 2, 2003.
 - 2. "Brief Facts on African-Americans and HIV/AIDS", Alabama Department of Public Health HIV/AIDS Surveillance Branch for 2005 and 2010.
 - 3. "HIV/AIDS Alabama", Alabama Department of Public Health, HIV/AIDS Surveillance Branch, 4/18/05 and 5/12/10.
 - 4. Jefferson County Health Profiles from 2000-2003 and produced by the Center for Health Statistics, Statistical Analysis Division and found in the Alabama Department of Public Health Web-site (2005 and 2010).
 - 5. City of Birmingham Needs Assessment for 2005
 - 6. AIDS Outreach Website, May 2010
 - 7. AIDS Alabama Jefferson County Needs Assessment, May 2010
 - 8. Alabama Statewide Coordinated State of Need (SCSN) 2009 Alabama Department of Public Health Division of HIV/AIDS Prevention & Control Ryan White Part B Grantee
 - Alabama and HIV/AIDS -AIDS Policy Development Center UCLA Program in Global Health- Division of Infectious Diseases- David Geffen School of Medicine - University of California, Lost Angeles -March 2, 2007 by Sharif Sawires, Greg Szekeres and Thomas J. Coates PhD

- 10.YWCA of Central Alabama provided data relating to Domestic Violence. Jennifer Clarke/Suzanne Durham 2010
- 11.HUD.GOV/Public Housing/HA Profiles on 4/30/2010
- 12. HUD.GOV/Public Housing/PHA Contact Information on 5/30/2010
- 13.Data Provided by the Jefferson County Housing Authority on 5/12/10 Lewis McDonald, Executive Director.
- 7. To the extent that any racial or ethnic group has a disproportionately greater need for any income category in comparison to the needs of that category as a whole, the jurisdiction must provide an assessment of that specific need. For this purpose, disproportionately greater need exists when the percentage of persons in a category of need who are members of a particular racial or ethnic group is at least ten percentage points higher than the percentage of persons in the category as a whole.

Response:

Racial Disparity in Rental Housing:

One factors is found, as a rule in most races and it is that the higher the income, the lower percent with housing problems. Beyond that common denominator, there is a significant disparity in housing conditions by race. White households have less housing problems than African-American households. The primary difference between White and African-American renters is in the under 30% of MFI and the greater than 80% MFI. Whites have a higher rate of housing problems for households in the >30 to <50% and >50 and <80 % MFI range. Hispanic households have a significantly greater percentage of housing problems than African-American or White households based upon the Year 2000 Census. The Year 2000 Census figures are suspiciously low for Hispanic Households.

% Housing Problems Per Household for African-American Non-Hispanic Rental Households						
Renters	Elderly 1&2 Member Households	Family Households	All Other Households	Total Renter		
<=30% MFI	55.9	72.0	79.3	70.4		
>30 to <50% MFI	39.2	59.6	81.3	62.4		
>50 to <80% MFI	0.0	29.2	33.8	30.0		
>80% MFI	0.0	10.9	9.4	10.2		
Total Households	44.5	40.4	42.1	41.3		

% Housing Problems Per Household for White Non-Hispanic Rental Households					
Renters	Elderly 1&2 Member Households	Family Households	All Other Households	Total Renter	
<=30% MFI	43.4	67.5	66.3	59.5	
>30 to <50% MFI	53.4	65.7	78.5	66.0	

<80% MFI >80% MFI	13.4	4.6	3.1	5.0
Total Households	35.4	23.4	28.2	27.5

% F	% Housing Problems Per Household for Hispanic Rental Households						
Renters	Elderly 1&2 Member Households	Family Households	All Other Households	Total Renter			
<=30% MFI	NA	70.0	71.4	70.2			
>30 to <50% MFI	NA	87.5	100.0	88.5			
>50 to <80% MFI	NA	61.8	23.8	51.3			
>80% MFI	100.0	36/4	10.2	25.9			
Total Households	100.0	66.2	24.4	54.8			

Racial Disparity in Owner Housing:

One factors is found, as a rule in most races and it is that the higher the income, the lower percent with housing problems. Beyond that common denominator, there is a significant disparity in housing conditions by race. White households have less housing problems than African-American households in all categories. Hispanic households have a significantly greater percentage of housing problems than African-American or White households based upon the Year 2000 Census for Family Households only. The Year 2000 Census figures are suspiciously low for Hispanic Households.

	% Housing Problems Per Household for African-American Non-Hispanic Owner Households						
Owners	Elderly 1&2 Member Households	Family Households	All Other Households	Total Renter			
<=30% MFI	71.1	71.2	65.9	70.0			
>30 to <50% MFI	34.3	70.0	55.0	54.6			
>50 to <80% MFI	35.5	40.7	61.6	42.2			
>80% MFI	11.2	8.6	16.6	9.72			
Total Households	39.3	22.3	36.6	26.8			

% Housing Problems Per Household for White Non-Hispanic Owner Households					
Owners	Elderly 1&2 Member Households	Family Households	All Other Households	Total Renter	
<=30% MFI	56.8	70.7	69.4	62.1	

Total Households	18.5	14.0	26.6	16.7
>80% MFI	5.3	7.8	13.8	7.9
>50 to <80% MFI	18.6	39.9	50.4	31.6
>30 to <50% MFI	30.2	64.4	47.6	40.6

% F	_	lems Per Ho Wner House		
Owners		Family Households		Total Renter
<=30% MFI	NA	85.7	NA	85.7
>30 to <50% MFI	0.0	72.5	0.0	56.9
>50 to <80% MFI	100.0	56.6	0.0	51.7
>80% MFI	10.5	17.4	0.0	16.0
Total Households	25.0	36.1	0.0	32.4

The Jefferson County Community Development Consortium has a 2000 Census Population of 666,047 persons. Of this group, 58.1% are White and 39.4% are Black. The Consortium is a crazy quilt of minority/non-minority concentrations ranging from 95.5% white (Brookside) to 89.1% black (Brighton). To define areas of racial/ethnic concentrations, the County has looked at census tracts and block groups which show a significant minority presence. For the purpose of the 2010 Consolidated Plan, areas of racial/ethnic concentrations are defined as tracts/block groups which have minority populations of 20% or more. These areas are shown as follows:

United States Total Persons-281,421,906 White-75.1% Black-12.1%

Alabama Total Persons-4,447,100 White-71.1% Black-26.0%

Jefferson County Total Persons-666,047 White-58.1% Black-39,4%

Hoover Total Persons-62,742 White-88.7% Black-6.8% Adamsville Total Persons-4,965 White- 75.8% Black- 22.8%

Brighton Total Persons-3,640 White - 9.0% Black - 89.1%

Center Point CDP Total Persons - 22,784 White - 72.9% Black -24.2%

Edgewater CDP Total Persons - 730 White - 37.9% Black - 61.1%

Fairfield CDP Total Persons - 12,381 White - 8.9% Black - 90.2%

Forestdale CDP Total Persons - 10,509 White - 52.9% Black - 45.9%

Graysville Total Persons - 2,344 White - 75.3% Black - 23.1%

Irondale Total Persons - 9,813 White - 71.7% Black - 25.3%

Lipscomb Total Persons - 2,458 White - 32.5% Black - 65.6%

McDonald Chapel Total Persons - 1,054 White - 66.6% Black - 29.6% Midfield Total Persons - 5,626 White - 39.3% Black - 59.5%

NOTE: The United States, State of Alabama, Jefferson County & the City of Hoover are shown for comparison purposes only.

Source: U.S. Census Bureau (American Fact Finder) – Data Set: Census 2000 Summary File 1 (100% data) QCT-P6 Race and Hispanic or Latino: 2000

Homeless Needs 91.205 (c)

*Refer to the Homeless Needs Table 1A or the CPMP Tool's Needs.xls workbook

8. Homeless Needs— The jurisdiction must provide a concise summary of the nature and extent of homelessness in the jurisdiction, (including rural homelessness and chronic homelessness where applicable), addressing separately the need for facilities and services for homeless persons and homeless families with children, both sheltered and unsheltered, and homeless subpopulations, in accordance with Table 1A. The summary must include the characteristics and needs of low-income individuals and children, (especially extremely low-income) who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered.

Response:

Table 1A Homeless and Special Needs Populations Continuum of Care: Housing Gap Analysis Chart

Current Under Unmet Need/ Inventory Development Gap

	Individu	ıals		*
Example	Emergency Shelter	100	40	26
	Emergency Shelter	245		250
Beds	Transitional Housing	391		80
	Permanent Supportive Housing	541		950
	Total	1177		1280
	Persons	in Families With C	hildren	
	Emergency Shelter	67		50
Beds	Transitional Housing	397		100
	Permanent Supportive Housing	664		350
	Total	1128		500

Continuum of Care: Homeless Population and Subpopulations Chart

Part 1: Homeless Population	Shel	tered	Unsheltered	Total
	Emergency	Transitional		
Number of Families with Children				
(Family Households):	31	86	118	235

Number of Persons in Families with Children	85	228	315	628
Number of Single Individuals and Persons in Households without children	287	469	889	1645
(Add Lines Numbered 1 & 2 Total Persons)	372	697	1204	2273
Part 2: Homeless Subpopulations		Sheltered	Unsheltered	Total
a. Chronically Homeless	285		326	611
b. Seriously Mentally Ill	385			
b. Seriously Mentally III c. Chronic Substance Abuse	385 826			
c. Chronic Substance Abuse	826			
c. Chronic Substance Abuse d. Veterans	826 400			

Jefferson County has found that it is faced, like many other parts of the country, with a burgeoning homeless population. The service area is defined as the city limits of Birmingham, including the downtown metropolitan area, and various areas of Jefferson County. The homeless providers of shelters and services for the homeless are generally found within the City of Birmingham. While this is technically outside of the jurisdiction of the Jefferson County Community Development Consortium, we cannot assume that the Consortium has no homeless population. According to monthly reports submitted and monitoring visits of various providers, there are many clients of essential and homeless prevention services whose last known addresses have been within Jefferson County's Consortium.

Jefferson County works in cooperation with a Continuum of Care developed by the Metropolitan Birmingham Services for the Homeless (MBSH). MBSH conducts a survey of homeless persons each January. Data collected during the 2009 homeless count revealed there were 636 shelter beds for homeless adults without dependent children and 313 homeless persons with children that were in shelters in 2009. In the 2009 survey, MBSH determined that there were 315 unsheltered family members and 889 persons without dependent children that were unsheltered.

At the time of the 2009 count there were 1,069 homeless persons housed in shelters. Of these, 313 (29%) were in homeless families with children and 756 (71%) were individuals. Shelters include all emergency and transitional shelters for the homeless, but do not include persons who are "doubling up" and persons in mental health, chemical dependency, or criminal justice facilities. Shelters also do not include formerly homeless families and individuals living in permanent supportive housing. Birmingham has 1,205 units of permanent housing with 664 of these units set aside for families with children.

In order to count homeless persons who were unsheltered (sleeping in places not meant for human habitation such as streets, parks, alleys, transportation depots, and abandoned buildings), MBSH used trained volunteers to conduct interviews at known locations where persons who are homeless congregate. The volunteers conducted interviews and each person was assigned a unique ID number which was used to de-duplicate the final database.

The count revealed that there were 285 chronically homeless persons in shelters; 326 chronically homeless persons were encountered with no shelter. Among other homeless sub-populations:

- 385 persons were seriously mentally ill and sheltered with 511 unsheltered
- 826 chronic substance abusers were sheltered, while 414 were not sheltered
- 141 victims of domestic violence and 20 were not sheltered
- 141 persons with HIV/AIDS were housed while 25 were not
- 400 veterans were sheltered while 59 were not sheltered, and
- 20 unaccompanied youth (under 18) while 34 were not sheltered.

Based upon the recent gaps analysis table, the primary needs demonstrate a high urgency for more social services and affordable housing to best aid the homeless. Career training, job placement, transportation, transitional, and permanent supportive housing are necessary to accomplish this successfully. Permanent supportive housing is identified in the Gaps Analysis Table as having the highest gap of unmet needs both for individuals and families.

The needs of those who are in danger of becoming homeless are both different and similar to those who are currently homeless. The basic difference is shelter as opposed to lack of shelter. Individuals who fall within the 30% or less of median income are constantly in danger of losing their shelter. Even if they do not have to face the problems of drug/alcohol dependency or physical/mental abuse, their limited financial resources pose a constant danger. This danger is particularly acute for the elderly and those with physical/mental disabilities.

Jefferson County fully acknowledges the importance of meeting these necessities and desires to continue receiving funding to better serve our homeless population. The Continuum of Care approach remains effective in prioritizing homeless needs in the community. In addition, the development of the Homeless Management Information Strategies (HMIS) system is making significant progress in providing more accurate and unduplicated data to track the effectiveness of homeless programs.

9. Describe, to the extent information is available, the nature and extent of homelessness by racial and ethnic group. A quantitative analysis is not required. If a jurisdiction provides estimates of the at-risk population(s), it should also include a description of the operational definition of the atrisk group and the methodology used to generate the estimates.

Response:

Jefferson County's most recent data from a survey conducted by the University of Alabama cited findings in the 10 year Plan to End Homelessness for 2007 – 2017. The survey was completed in an effort to help the community have a better understanding of those experiencing homelessness. Of the 1,414 participants who were surveyed 88% were born and raised in Birmingham. The following are conclusions as listed:

• Family Status:

o unaccompanied adults:

74%

Homeless with families:

26%

0	Single parent families:	16%
0	Couples with children:	7%
0	Couples without children:	2%
0	Various other family arrangements:	1%

- Gender: 70 percent were men and 30 percent were women
- Race/Ethnicity: 68 percent were African American, 31 percent were Caucasian/White, and 31 percent were Hispanic. Other races were less than 2 percent.
- Education: 2 percent have college degree, 6 percent have trade school or business, certificate, 66 percent have a high School diploma and/or college courses, and 27 percent have less than a high school diploma.
- Time spent homeless: 52 percent were homeless less than eight months, and 66 percent were first time homeless within the past three years.
- Place of residence at the time of the interview: 34 percent lived in transitional housing, 22 percent lived in emergency shelters, 12 percent were in treatment facilities, 12 percent were living on the street, and 7 percent were living with a friend or relative.

According to the report from the Ten Year Plan, more men (70%) are homeless than women (30%). These statistics indicate a gender difference when reporting contributing factors to homelessness. Women are more than likely to report that family difficulties such as domestic violence and divorce contributed to their homelessness. Men are more likely to report substance abuse, illness, or disability. Ironically, the Birmingham homeless individual, on average, had a considerably higher high school graduation rate (around 70%) and at least 2% were identified who had achieved a Master's degree from an institution of higher learning.

Non-homeless Special Needs 91.205 (d) including HOPWA

*Please also refer to the Non-homeless Special Needs Tables 1A & 1B or, in the CPMP Tool, the Needs.xls workbook.

Table 1B
Special Needs (Non-Homeless) Populations

SPECIAL NEEDS SUBPOPULATIONS	Priority Need Level High, Medium, Low, No Such Need	Unmet Need	Dollars to Address Unmet Need	Multi- Year Goals	Annual Goals
Elderly	Н	2,553	\$354,867,000	24	4
Frail Elderly	L	UNK	0	0	0 .
Severe Mental Illness	М	200	\$27,800,000	0	0
Developmentally Disabled	М	139	\$19,321.00	0	0
Physically Disabled	L	UNK.	0	0	0

Persons w/ Alcohol/Other Drug	L	UNK	0	0	0	
Addictions						
Persons w/HIV/AIDS	M	596	0	0	0	
Victims of Domestic Violence	М	UNK	0	0	0	
Other	L	UNK	0	0	0	
TOTAL		3,488	\$382,686,321	24	4	

UNK = Unknown

10. Estimate, to the extent practicable, the number of persons in various subpopulations that are not homeless but may require housing or supportive services, including the elderly, frail elderly, persons with disabilities (mental, physical, developmental, persons with HIV/AIDS and their families), persons with alcohol or other drug addiction, victims of domestic violence, public housing residents, and any other categories the jurisdiction may specify and describe their supportive housing needs. The jurisdiction can use the Non-Homeless Special Needs Table (Table 1B or Needs.xls in CPMP Tool) of their Consolidated Plan to help identify these needs.

*Note: HOPWA recipients must identify the size and characteristics of the population with HIV/AIDS and their families that will be served in the metropolitan area.

Response:

HIV/AIDS

"AIDS Alabama's housing portfolio continues to grow in order to provide safe and affordable housing for the HIV-positive individuals and families of Jefferson County. With this growth the agency faces the struggle of preserving the integrity of each facility due to inadequate funding and limited resources. There is a definite need for increased operational funding. Operational expenses to maintain such properties can be thousands of dollars every month and include maintenance, case management, and transportation costs.

"The need for increased affordable, HIV-specific housing also exists. AIDS Alabama currently maintains a waiting list for its long-term rental assistance program, which has been temporarily suspended due to insufficient funding. At any given time there are waiting lists for AIDS Alabama-operated housing and programs.

"There is also a need for HIV-specific emergency shelters and transitional housing. These types of housing require intensive case management and supportive services to create a lasting impact in the lives of these individuals and families who do not possess the skill sets to maintain permanent housing. Therefore, there is an additional need for supportive services and programmatic funding. Services such as basic living

skills counseling, child care resources, and vocational training will foster self-sufficiency and instill independence in these consumers.

"How to meet those needs:

- Acquisition and new construction of HIV-specific transitional housing (for example, a small (10-20 units) apartment complex)
- Acquisition and new construction of HIV-specific emergency shelter housing (for example, two units with four emergency beds)
- Acquisition and new construction of HIV-specific permanent housing (for example, two to three bedroom houses for individuals/families)
- Funding for leasing opportunities to expand housing
- Resource identification for possible development opportunities
- Funding for programs staff
- Housing information funding to promote housing programs and provide outreach
- Funding for supportive services (such as case management and financial assistance)
- Funding for operations of properties
- Technical assistance for existing projects"

Source: AIDS, Alabama Website for 2010.

Lead-based Paint 91.205 (e)

11. Estimate the number of housing units* that contain lead-based paint hazards, as defined in section 1004 of the Residential Lead-Based Paint Hazard Reduction Act of 1992, and are occupied by extremely low-income, low-income, and moderate-income families.

*If using the CPMP Tool, this number can be provided on the Housing Needs Table in the Needs.xls file.

Response:

In 2005 there were approximately 39,558 homes within the Jefferson County Community Development Consortium where lead based paint poses a hazard. We further estimate that 75% or 29,668 are occupied by and pose a hazard to

extremely low-income, low-income and moderate-income families. Areas which contain higher than average concentration of said households living in a lead hazard home are considered as Target Areas for lead hazard reduction work in Jefferson County. These include the following communities/zip codes:

Adamsville - 35005
Brighton - 35020
CenterPoint - 35215
Docena - 35060
Edgewater/McDonald's Chapel - 35224
Fairfield - 35064
Fultondale - 35068
Graysville - 35073
Lipscomb - 35020
Midfield - 35228
Tarrant - 35217
Warrior - 35180

The Environmental Defense Fund Scorecard website looks at children with a high risk of lead poisoning. This data is for all of Jefferson County including the cities of Birmingham, Bessemer and Hoover. This data is summarized below:

Number of housing units with a high risk of lead hazards: 7,400 Percent of housing units with a high risk of lead hazards: 3% Number of housing units built before 1950: 50,000 Number of housing units with low income: 39,000 Percent of housing units with low income: 15%

Number of children under 5 living below poverty: 12,000

Percent of children under 5 below poverty: 29%

Source: Green Media Toolshed. Environmental Scorecard website.

Housing Market Analysis 91.210

Refer to the Housing Market Analysis Table in the Needs xls workbook

12. Based on information available to the jurisdiction, describe the significant characteristics of the housing market in terms of supply, demand, condition, and the cost of housing; the housing stock available to serve persons with disabilities; and to serve persons with HIV/AIDS and their families.

Response:

The signifigant characteristics of the housing markets in terms of supply, demand, condition and the cost of housing are discuss below by category.

A. Supply

The 2000 Census showed 167,843 housing units within the Jefferson County Community Development Consortium. Of this number, 31,159 are rental units and 137,674 are owner units.

Of 167,843 units, 97,031 are theoretically afforable to households within the 0% to 80% of Median Family Income (MFI) range. Out of 97,297 affordable units, 30,758 are rental and 66,297 are owner units.

Affordability has a geographic component in both rental and owner categories.

1) Gross Rents? Supply of Rental Units for Selected Areas (2,000 Data):

Gross Rents/ Supply of Rental Units for selected areas within the Jefferson County Community Development Consortium are shown below. The City of Hoover is shown for comparison purposes.

2000 Gros	s Rents	Jefferson Co	unty Comn	nunity Dev	elopment Co	onsortium
	-\$200	\$200-400	\$401-600	\$601- \$800	\$801- \$1,000	\$1,000 & Over
Adamsville	0	62	78	38	0	0
		107	100	4.4	1	
Brighton	76	187	109	14	0	0
Centerpoint CDP	105	242	1,336	628	176	65
Fairfield	244	496	585	182	49	21
Gardendale	8	52	323	351	30	18
·						
Graysville	8	23	66	5	0	7
Homewood	53	236	2,255	1,379	425	237
Irondale	30	62	173	335	266	32
Leeds	82	410	476	114	69	31
Midfield	14	56	146	123	0	0
Vestavia	12	101	400	901	315	318
Tarrant	71	219	434	102	24	8
Warrior	43	168	146	11	0	0
Hoover	42	148	1,924	3,579	1,814	750
Total	788	2,462	8,451	7,762	3,168	1,487
Total All Units						24,118

The general conclusion to be drawn from the above 2000 data for rental

housing is that affordability and supply depends to some degree on location. Units built in the newer more affluent suburbs are less likely to be in the lower end of the rent range.

Data available for 2010 is not as conclusive, since we do not have the breakdown's by community as found in the 2000 data. The rapid increase in multi-family foreclosures is, however, indicative of problems within the market.

Gross Rents (2006-2008 Data)

	Jefferson County	Bessemer	Birmingham	Homewood	Hoover
Total:	84,426	4,385	41,488	4,224	9,104
With cash Rent	78,431	4,032	39,188	4,207	8,766
Less than \$200	7,187	1,057	4,411	71	0
\$200 to \$299	6,143	380	4,655	71	104
\$300 to \$499	20,756	1,578	13,184	289	359
\$500 to \$749	29,336	1,578	13,184	289	4,175
\$750 to \$999	10,400	91	2,608	1,013	2,763
\$1000 or more	4,609	72	763	772	1,365
No Cash Rent	5,995	353	2,300	17	338

Source:

C25056 Contract Rent – Universe: Renter Occupied Housing Units. Data Sets: 2006-2008 American Community Survey 3-Year Estimates Survey: American Community Survey

If one deletes the non-Consortium areas of Birmingham, Bessemer and Hoover (50% since Hoover is in two counties) You will get a more representative picture as shown below for 2006-2008:

Total Rental Units	Jefferson County	
(Cash Rent)	30,623	
Less than \$200	1,719	
\$200 to \$299	1056	
\$300 to \$499	5,814	
\$500 to \$749	12,486	
\$750 to \$999	3,091	
\$1,000 or more	3,173	
Total	27,339	

While this is more representative than the County figure including non-Consortium municipalities, it does not provide the geographic detail that is needed for planning.

2) Median Value of Single Family Owner Occupied Homes:

Cost of Homeownership is a limiting factor when it comes to both supply and affordability. The table below gives the median values of single family homes in selected areas of the Consortium. Other areas such as the City of Hoover are shown for comparison purposes only. The older industrial core communities are the most likely to offer affordable housing. Jefferson

County is fortunate in that only a few areas is homeownership beyond any reasonable interpretation of affordable.

The 2,010 data available is indicative of an overall decline in market value. A further complicating factor is the "glut" of foreclosures on the market. The reader should note the difference between foreclosed and nonforeclosed properties combined with the realive size of the two types of sales. The foreclosures have weakened property values and reduced the median value of single family owner occupied homes.

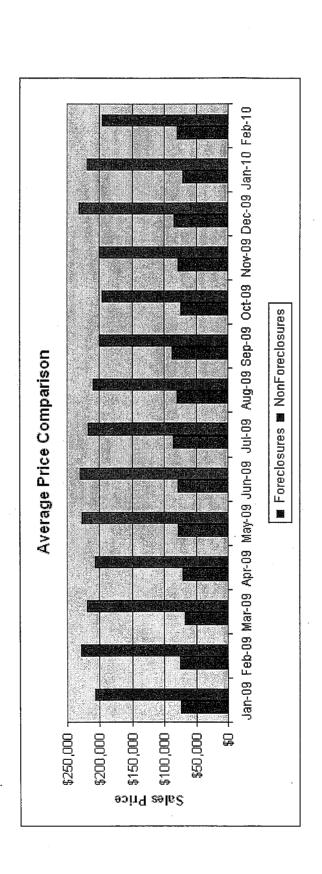
FEBRUARY HOME SALES REPORT & YEAR-TO-DATE SALES YEAR-TO-DATE STATISTICS

	#	# of Sales	S	Ave	Average Sales Price	90	M	Median Sales Price	92]
	2008	2009	2010	2008	2009	2010	2008	2009	2010
January	877	564	565	\$192,152	\$151,584	\$161,031	\$152,500	\$129,900	Unk
February	626	725	645	\$178,600	\$171,062	\$149,204	\$152,500	\$130,000	\$131,900
March	1162	854		\$195,950	\$160,929		\$159,900	\$138,000	
April	1154	887		\$195,740	\$165,540		\$156,000	\$141,000	
May	1277	626		\$205,371	\$185,713		\$17,240	\$156,000	
June	1253	1090		\$196,504	\$189,332		\$164,400	\$160,000	
July	1207	1049		\$202,882	\$185,056		\$165,000	\$161,900	
August	1146	907		\$189,587	\$175,935		\$150,300	\$148,500	
September	1172	956		\$182,955	\$172,602		\$155,500	\$152,700	
October	826	933		\$168,073	\$160,266		\$132,000	\$142,500	
November	603	879		\$179,837	\$171,070		\$139,900	\$145,000	
December	798	765		\$174,968	\$187,689		\$139,900	\$150,500	

Source: <u>Birmingham Realtor</u> On-Line Magazine for April 2010. On-Line@www.barbham.com

FORECLOSURES:

	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09	Jul-09	Aug-09	Sep-09	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10
Foreclosures	\$74,061	\$76,086	\$67,626	\$70,480	\$78,310	\$77,999	\$86,441	\$80,945	\$87,854	\$74,766	\$79,045	\$85,060	\$71,489	\$80,212
NonForeclosures	\$206,150	\$227,702	\$206,150 \$227,702 \$218,772 \$207,189 \$	\$207,189	\$226,128	\$229,380	\$218,346	\$210,444	\$200,050	\$196,631	\$200,401		\$231,045 \$218,985	\$196,703



Source: Birmingham Realtor On-Line Magazine for April 2010. On-Line@www.barbham.com

Source:

Birmingham Realtor On-Line Magazine for April 2010. On-

Line@www.barbham.com

3) Median of Selected Monthly Owner Costs:

The cost of homeownership varies radically from one end of the Consortium to another. The table below shows the range of ownership for selected areas of the Consortium. Please note the cost difference between someone with a mortgage and some without.

	Year 2000 M	with the state of the					
Place	With Mortgage		Place				
United States	\$1,088	\$295	Homewood	\$1,162	\$290		
Alabama	\$816	\$228	Hueytwon	\$796	\$244		
Jefferson Co.	\$876	\$251	Irondale	\$944	\$254		
Hoover	\$1,389	\$334	Kimberly	\$898	\$201		
Leeds	\$815	\$229	Lipscomb	\$610	\$244		
Adamsville	\$833	\$223	McDonald's Chapel	\$499	\$222		
Brighton	\$685	\$239	Maytown	\$685	\$233		
Brookside	\$728	\$226	Midfield	\$655	\$588		
Cahaba Heights CDP	\$1,036	\$244	Vestavia Hills	\$1,540	\$384		
Cardiff	\$443	\$250	Minor CDP	\$782	\$22		
Centerpoint CDP	\$808	\$221	Morris	\$1,107	\$233		
Chalkville CDP	\$857	\$243	Mtn. Brook	\$1,953	\$233		
Clay CDP	\$898	\$266	Mt. Olive CDP	\$969	\$201		
Concord CDP	\$716	\$228	Mulga	\$550	\$234		
Edgewater CDP	\$619	\$180	Pinson CDP	\$834	\$214		
Fairfield	\$813	\$245	Pleasant Grove	\$975	\$216		
Forestdale CDP	\$951	\$230	Rock Creek CDP	. \$774	\$281		
Fultondale	\$781	\$229	Tarrant	\$616	· \$384		
Gardendale	\$874	\$222	Trafford	\$650	\$650		
Grayson Valley CDP	\$801	\$246	Trussville	\$1,236	\$281		
Graysville	\$665	\$218					

NOTE: The United States, State of Alabama, Jefferson County & the City of Hoover are shown for comparison purposes.

NOTE: 2010 Data Unavailable

Source:

U.S. Census Bureau (American Fact Finder) - Highlights from the

Census 2000 Demographic Profiles.

4) Where is New Single Family Housing Being Built (Construction Dollars)?

New housing goes where the money is. It is most likely to be found in existing or relatively new middle and upper income areas. Affordable housing is high risk in that it is harder to sell and the profit margin is not as great as in conventional non-affordable housing. Issues such as credit greatly hinder the ability of the lower income buyer to purchase a home. These factors explain the need for government assistance in the area of homeownership. The table below shows where the development dollars are being spent for single family housing. Please note the effect that the current economic/mortgage crisis has had on single family housing production/costs for Jefferson County. In 2006 \$483,015,897 in single family housing units where built in the jurisdictions noted below while in 2009 the dollar value was reduced to \$136,143,722 a reduction of approximately 65% over a four year period in said jurisdictions. This is further reflected in the table relating to Building Permits.

jurisaictio			Single Family F		•
Year	2006	2007	2008	2009	Total
Community					
Adamsville	742,940	0	474,739	125,000	1,342,679
Bessemer	7,358,300	4,619,200	1,809,567	345,000	14,132,067
Birmingham	54,557,389	40,302,965	0	13,541,203	108,401,557
Brighton	0	0	0	0	0
Brookside	100,000	370,000	470,000	0	940,000
Fairfield	0	0	0	0	0
Fultondale	1,548,857	0	1,558,176	119,000	3,226,033
Gardendale	37,756,751	30,446,790	6,591,243	4,660,760	79,455,544
Graysville	0	199,000	0	90,000	289,000
Homewood	9,746,190	11,304,500	15,248,950	3,197,000	39,496,640
Hoover	163,340,332	156,341,736	66,495,282	57,063,972	443,241,322
Hueytown	7,159,196	4,774,911	1,919,360	2,068,191	15,921,658
Irondale	4,125,139	2,181,966	1,416,114	826,975	8,550,194
Kimberly	12,158,750	8,719,632	5,628,579	3,706,000	30,212,961
Leeds	16,594,985	17,803,697	13,115,562	11,987,323	59,501,567
Lipscomb	0	74,359	0	0	74,359
Maytown	0	0	0	0	0
Midfield	172,305	0	0	. 0	172,305
Morris town	2,758,000	480,000	240,000	350,000	3,828,000
Mt. Brook	37,855,000	22,572,000	22,716,000	7,567,000	90,710,000
Mulga	0	0	0	0	0
North Johns					
town	0	0	0	00	0
Pleasant	7 040 400	4.540.000	4 040 000	000.000	40 774 700
Grove	7,349,100	4,516,000	1,616,600	290,000	13,771,700
Tarrant	0	0	0	450,000	396,000
Trafford Trussville	110,000	126,000		150,000	386,000
	65,472,361	39,495,785	17,990,850	14,709,321	137,668,317
Vestavia Hills	51,741,905	36,782,459	17,202,534	15,082,977	120,809,875
Warrior	2,338,397	2,969,133	762,551 0	264,000 0	6,334,081
West Jefferson Totals	30,000 483,015,897	384,080,133	175,256,107	136,143,722	30,000 1,178,495,859
iotais	403,015,09/	304,000,133	170,200,107	130, 143,122	1,170,490,009

Source:

U.S. Census Bureau-Monthly New Privately-Owned Residential Building

Permits - 2009

5) Where Single Family Units Are Being Built (# of units)

Building Permits - Single Family Housing

Year	2006	2007	2008	2009	Total
Community					
Adamsville	6	0	5	1	12
Bessemer	97	63	14	2	176
Birmingham	303	232	132	75	742
Brighton	4	2	1	2	9
Brookside	1	3	3	0	7
Fairfield	0	0	0	0	0
Fultondale	42	34	28	19	123
Gardendale	212	170	34	37	453
Graysville	0	2	0 .	1	3
Homewood	38	40	80	19	177
Hoover	720	613	287	265	1885
Hueytown	51	54	24	16	145
Irondale	38	20	16	7	81
Kimberly	75	50	38	28	191
Leeds	99	80	90	62	331
Lipscomb	1	· 1	1	1	4
Maytown	0	0	0	0	0
Midfield	13	6	4	0	23
Morris town	9	9	2	2	22
Mt. Brook	71	34	34	11	150
Mulga	0	0	0	0	0
North Johns					
town	0	0	0	0	0
Pleasant					
Grove	43	28	11	2	84
Tarrant	3	0	0	0	3
Trafford	1	2	0	1	4
Trussville	354	198	93	79	724
Vestavia Hills	136	73	38	29	276
Warrior	27	34	7	3	71
West Jefferson	1	0	0	0	1
Total:	2345	1748	942	662	5697

Source:

U.S. Census Bureau-Monthly New Privately-Owned Residential Building Permits - 2010

6) Where Multi-Family (5+ units) Housing Units Are Being Built

Census Bureau records on building permits for 5 or more unit multi-family developments indicated that most of the activity (dollars and #'s of units built) in the Consortium has been the City of Hoover. The table shown below gives the breakdown for the period from 2006 to 2009.

Construction Costs - Multi-Family (5 + units) Housing

Year	2006	2007	2008	2009	Total
Community			·		
Birmingham	69,220,383	6,747,781	0	0	75,968,164
Homewood	29,616,000	0	0	0	29,616,000
Hoover	10,235,578	5,322,456	80,562,352	0	96,120,386
Irondale	0	7,186,800	0	0	7,186,800

Source:

U.S. Census Bureau-Monthly New Privately-Owned Residential Building Permits, 2010

7) Where are Multi-Family (5+ units) Housing Units Being Built (# of Units)

Census Bureau records on building permits for 5 or more unit multi-family developments indicated that most of the activity (dollars and #'s of units built) in the Consortium has been in the City of Hoover. The table shown below gives the dollar breakdown for the period from 2006 to 2009.

Building Permits - Multi-Family (5 + units) Housing

Year	2006	2007	2008	2009	Total
Community					
Birmingham	50	8	18	0	76
Homewood	2	0	0	0	2
Hoover	9	1	11	0	21
Irondale	0	5	2	0 ·	7

Source:

U.S. Census Bureau-Monthly New Privately-Owned Residential Building

Permits, 2010

B. Demand:

Vacancy rates are low within the Consortium and this is indicative of a strong demand. The affordable rental vacancy rate is 3% or 2,793 units out of 31,159 units. The owner vacancy rate is 2% or 1,592 units out of a total of 136,674 affordable owner units within the Consortium. The Birmingham Association of Realtors reports that year-to-date sales (1/1/10-6/30/10) are ahead of 2009. Average days-on-market dropped to 108 days in 2010 (1/1/10-6/30/10) comparted to 95 for the first six months of 2004.

Sources:

Housing Market Analysis Table

SOCDS CHAS Data: 2000 Affordability Mismatch Output for All

Households

Birmingham Association of Realtors Press Release, 7/18/05., 3501 Independence Drive, Birmingham, Alabama 35209.

C. Condition:

Housing conditions within the Consortium paint a mixed picture. Using HUD provided data relating to affordability, there are 9,454 substandard (units showing housing problems) rental housing units within the Consortium out of a total of 31,159 affordable units. There are also 3,394 substandard owner occupied units out of a total of 136,674. The figures for substandard owner units are suspect. When one looks at the substandard units found in the Needs narrative you draw a different conclusion and count. These numbers indicate that there are 12,932 substandard owner occupied units within the Consortium.

Sources:

Housing Market Analysis Table

SOCDS CHAS Data: 2000 Affordability Mismatch Output for All

Households

SOCDS CHAS Data: 2000 Housing Problems Output for All Households

D. Cost: This data is found under "A" Supply.

E. Housing Stock Available to Serve Persons with Disabilities:

Persons with mental illness, disabilities and substance abuse problems need an array of services. Their housing requires a design that ensures residents maximum independence in the least restrictive setting, including independent single or shared living quarters in communities, with or without onsite support. Options include:

- Living with family or friends with adequate support and/or respite services.
- Small, home-like facilities in local communities close to families and friends, with the goal of moving to a less structured living arrangement when clinically appropriate.

Residential placements need to provide the equipment and supplies necessary to assist in successful, long-term housing stability. Admission to state or private hospitals, mental retardation centers, state schools or alcohol and drug abuse treatment centers must not be considered permanent or long-term residential options.

Sources: City of Birmingham StrategicPlan for 2005 and 2010

1) MENTALLY ILL

Those individuals experiencing severe and persistent mental illness are often financially impoverished due to the long-term debilitating nature of the illness. The majority of these individuals receive their sole source of income from financial assistance programs – Social Security Disability Insurance or Social Security Income. The housing needs for this population are similar to other low-income individuals. However, because of this limited income, many of these individuals may live in either unsafe or substandard housing. The citizens need case management, support services and outpatient treatment services to monitor and treat their mental illness.

The Alabama Department of Mental Health and Mental Retardation, Division of Mental Illness provides a comprehensive system of outpatient and residential services for adults with serious mental illness and children with severe emotional disorders. In addition to making services available to individual clients in the least restrictive environment possible, the service delivery system provides continuity of service and support for clients and their families. There are seven department-operated residential facilities for individuals with mental illness. Short-term, acute care is provided by Bryce Hospital in Tuscaloosa, Searcy Hospital in Mt. Vernon, North Alabama Regional Hospital in Decatur and Greil Hospital in Montgomery. Extended psychiatric care is provided at Bryce Hospital for the northern portion of the state and Searcy Hospital in the south. Three facilities provide specialized services: Mary Starke Harper Center (geriatric psychiatry) and Taylor Hardin Secure Medical Facility (forensic evaluation and treatment) in Tuscaloosa and the Thomasville Mental Health Rehabilitation Center (psychiatric rehabilitation). Residential psychiatric services for adolescents are available at Bryce Hospital.

The Alabama Department of Mental Health and Mental Retardation, Mental Retardation Services provides a comprehensive service system across the state. The delivery of services is managed through four geographic regions. The division works closely with community providers to coordinate the flow of services between and among the community and the developmental centers. Developmental centers provide residential services to those people who continue to need institutional care in small, modern, regional centers. These centers include the William D. Partlow Developmental Center in Tuscaloosa, Lurleen B. Wallace Developmental Center in Decatur, Albert P. Brewer Developmental Center in Mobile and J.S. Tarwater Developmental Center in Wetumpka. Each of these facilities provides comprehensive services-including specialized medical, behavioral and programmatic services – that are developed based on individual need. These centers are certified as intermediate care facilities by complying with applicable Medicaid standards and requirements.

The Jefferson-Blount-St. Clair County Mental Health/Mental Retardation Authority (JBS MH/MR) currently operates housing units for mentally ill clients in the form of group homes, foster homes, and supervised apartments. A summary of these facilities are shown below:

a) The Group Home Project is a residential program for adults and male

adolescents with mental retardation. It is funded by the State Department of Mental Health and Mental Retardation. JBS receives local funds, room and board fees charged to residents and special funds made available through a construction grant to a subsidiary of the Jefferson County Association of Retarded Citizens from the Department of Housing and Urban Development. There are five homes which provide training within a homelike atmosphere with supervision and guidance provided by a trained staff. The homes are located in the City of Birmingham. The maximum total residential population for the five group homes is 45.

- b) In addition to the group home project, JBS operated 4 specialized 3 bedroom homes for individuals dually diagnosed with mental retardation and mental illness. The purpose of these homes, which are all located in Jefferson County, is to help previously institutionalized "Wyatt-Stickney" individuals make a successful return to the community, providing whatever supports are necessary.
- c) JBS further operates 2 apartments in the Birmingham area for individuals diagnosed with mental retardation. One apartment is home to one individual and two individuals share the second apartment. The purpose of these apartments is to allow individuals previously living in a group home setting to return to the community with as much independence as possible while providing a necessary support system.
- d) The Horizon Apartments, operated by JBS is a 19 bed apartment complex, with a resident manager available on a 24-hour basis. The Greenwood Apartments also operated by JBS is an 11 bed apartment complex with a resident manager available on a 24 hour basis. These complexes are part of the JBS Independent Living Facilities Program and offer individuals with serious mental illness an opportunity to live independently with support during emergencies. Case management support is also provided to those residents in need of these services. Referrals are received from local community agencies and the community at large.
- e) JBS also owns and operates four, two-bed Townhouses for independent living. Although no resident manager is located on the premises, case management services are provided to all residents. Referrals for the Townhouses are received from local community agencies and the community at large.
- f) In addition JBS operates 20 scattered site apartments for homeless mentally ill individuals. Case management support is provided as well as Day Treatment activities.
- g) JBS operates a residential program for adults with mental illness, which provides treatment and housing for 90 individuals. This program is comprised of four transitional homes, four Group homes, and a Brief Intensive Treatment Home providing services to ten people each.

The residential programs are staffed and operated by JBS. Individuals in the residential programs participate in Day Treatment activities that emphasize an education and rehabilitative approach. As individuals leave the residential program, efforts are made to place them in supported housing arrangements, and referrals are made to local mental health centers to ensure continued support and treatment.

h) The St. Andrews Episcopal Foundation sponsors three group homes and Two apartment buildings, and apartment units housing a total of 30 mentally retarded adults. Support services are provided at these units.

Sources: JBS Mental Health Authority,

http://www.jbsmha.com/page01.html St. Andrew Episcopal Foundation

City of Birmingham Strategic Plan for 2005 & 2010

2) DEVELOPMENTALLY DISABLED

Housing for the disabled must include a variety of options to meet the unique needs of persons with diverse types of disabilities. Services must be provided by area programs or contracted privately, including group home placements, intermediate care facilities, supported living programs, supported employment, sheltered workshops, home ownership and rental subsidy.

The Alabama Association of Mental Retardation and Developmental Disabilities (AAMRDD) is a statewide association of local public agencies responsible for planning, needs assessment and services for individuals with mental retardation. Many of these agencies also serve children with developmental disabilities. Through these agencies, mental health services are provided on a local level, rather than sending individuals away to state hospitals and schools. These agencies were formed because concerned families and citizens wanted agencies that focused their efforts on individuals with mental retardation rather than being a part of a system which also served individuals with mental illness and substance abuse. The local agency serving Birmingham is the Mental Retardation and Developmental Disabilities Health Care Authority of Jefferson County. The agency provides information and referral services, case management, assessment, day services, employment and supported employment, residential services, in-home services and early intervention. Its residential services include making living arrangements for individuals in six- to ten-person group type homes, supervised two-to sixperson homes, individual foster type homes and in apartments with supervision or supports, which are based upon individual needs and preferences.

Sources: City of Birmingham Strategic Plan for 2005 and 2010

3) ALCOHOL AND SUBSTANCE ABUSERS

The majority of people that suffer from any form of alcohol or substance abuse maintain jobs and homes at the beginning stages of their problem. However, as the problem progresses, the ability to maintain a well functioning lifestyle diminishes. This problem touches every income and racial group, but is found to be most prevalent among the lowest income groups. Preventive programs incorporated into housing services provided to low-income persons are necessary to address this problem.

Substance abuse treatment facilities in Birmingham that provide treatment and/or residential services include the following:

- Alcohol and Drug Abuse Treatment Centers
- Aletheia House
- Birmingham Healthcare
- Birmingham Metro Treatment Center
- Bradford Health Services, Birmingham Regional Office
- Department of Veterans Affairs, Medical Center
- Fellowship House
- Jefferson County Committee for Economic Opportunity, Community Substance Abuse Program
- Oakmont Center
- Tri-County Treatment Center
- University of Alabama at Birmingham, Center for Psychiatric Medicine
- University of Alabama in Birmingham, Substance Abuse Programs

Sources: City of Birmingham Strategic Plan for 2005 and 2010

4) Housing Stock Available to serve Persons with HIV/AIDS and their Families:

AIDS Alabama, a nonprofit organization, offers services to persons living with HIV disease and to those concerned about HIV transmission. Through a network of HIV/AIDS service organizations, AIDS Alabama devotes its energy and resources statewide to help people with AIDS live healthy, independent lives and to help prevent the spread of HIV. Through AIDS Alabama, persons living with HIV can access housing, rental assistance, financial assistance, and a variety of other supportive services. Housing opportunities available to people with HIV/AIDS includes the following:

Housing assistance available through these programs includes:

- Short-Term Utility, Rental and Mortgage Assistance (STRMU) Emergency financial assistance for people with HIV that are experiencing a temporary problem paying their rent, utilities, or mortgages that will enable individuals to keep their current housing.
- Tenant-Based Rental Assistance (TBRA) For persons with chronic health issues that have some income, long-term rental assistance pays the difference between 30% of monthly income and fair market rent.
- Project-Based Rental Assistance (PBRA) For persons living in a structured housing program, project-based rental assistance pays the difference between 30% of monthly income and fair market rent.
- Agape House -18 one-bedroom, subsidized apartments for people with HIV.
- Agape II -12 subsidized apartments for individuals and families with HIV.

- Living in Balance Chemical Addiction Program (LIBCAP) A residential substance abuse program for adults who are homeless and living with HIV/AIDS. LIBCAP is certified by the Alabama Department of Mental Health's Substance Abuse Division, and the funding is made possible by a grant from Substance Abuse and Mental Health Services Administration (SAMHSA)/Center for Substance Abuse Treatment (CSAT). Three components of the program, all of which are transitional housing programs, include:
 - ✓ The Rectory 12 beds available for entry level into the LIBCAP program in this communal living facility that includes a comprehensive curriculum five days a week. All meals are provided. Participants may stay up to one month.
 - ✓ NextStep Housing 21 beds in leased units for Rectory LIBCAP graduates with comprehensive case management services and continuing substance abuse treatment groups with focus on assisting consumers to attain income through jobs or benefits, acquiring GEDs or entry to college, settling legal and credit issues, and making a plan for re-entry. All meals are provided. Participants may stay up to two months.
 - √ Re-entry 18 beds in six leased two-bedroom apartments for NextStep graduates needing additional time to make the transition to independent community living. NextStep programming continues with more focus on discharge. Participants may stay up to four months.
- Transitional Housing Twelve beds in four leased apartments (located in same complex with Re-Entry) for homeless individuals and families. These residents have case management and assistance to help them move to permanent housing with average stays of up to seven months. Participants may stay up to two years.
- Family Places Four single-family homes and two apartments, all with multiple bedrooms, of permanent housing for homeless families in scattered sites in Birmingham.
- JASPER House 14-unit residential care facility designed for individuals who are living with HIV/AIDS and who also have a diagnosis for a serious mental illness. JASPER House is certified by the Alabama Department of Mental Health as an Adult Day Rehabilitation and Residential Group Home. All meals are provided.
- Mustard Seed A permanent housing facility consisting of three onebedroom apartments that have recently been completed in a partnership between AIDS Alabama and the City of Birmingham's HOME program. These units are available to low-income individuals living with HIV/AIDS, and supportive services are provided to tenants.
- Woodlawn Four two-bedroom apartments provide permanent housing for low-income, HIV-positive individuals.

- Alabama Rural AIDS Project (ARAP)—Nine three-bedroom homes in rural areas across the state provide permanent supportive housing for families that wish to remain in rural settings near their families and community support. Local AIDS Service Organizations contract with AIDS Alabama to provide case management and linkage to medical and social services for tenants.
- Rural Studio Project—Two facilities developed in collaboration with Auburn
 University provide three one-bedroom and two two-bedroom permanent
 supportive housing units in Lee County for clients utilizing case
 management and other services to gain skills to live independently. Unity
 Wellness Center, the local AIDS Service Organization, partners with AIDS
 Alabama to provide case management and linkage to medical and social
 services for tenants.
- Magnolia Place—15-unit apartment complex in Mobile provides permanent, supportive housing for low-income individuals and families living with HIV/AIDS. South Alabama CARES, the local AIDS Service Organization, partners with AIDS Alabama by providing case management and linkage to medical and social services for tenants.

Sources: AIDS Alabama, http://www.aidsalabama.org/index.php City of Birmingham Strategic Plan for 2005 and 2010

F. Supportive Housing for the Physically Handicapped:

The inventory of facilities which provide supportive services for persons with physical disabilities, is shown below and are frequently funded through HUD Section 811 Program.

G. Elderly/Frail Elderly:

Programs designed to provide supportive housing for the elderly/frail elderly are primarily funded by the Section 202 Program. Private nursing homes are considered medical facilities and are not included in this discussion. These facilities provide a wide range of supportive services. Below is a list of 202 and non-202 facilities within Jefferson County (See prior section for greater details).

Project Name	# of Section 8 Units	Total Units
Princeton Towers	146	146
New Pilgrim Towers	123	123
Episcopal Place	100	141
W. Clyde Williams		
Terrace	100	100
Faush Metro Manor	50	50
Presbyterian Apartments	60	60
Princeton Towers II	94	94
East Lake Home	66	66
Villa Marie Manor	64	64
Teamster Retiree House	30	30
Building Trade Towers	Unk	243
Spring Gardens	Unk	220
Serene Grove	Unk	30
Artesian Springs	Unk	30
Rosedale Gardens	Unk	8
Oak Park Villas	Unk	40
Total:	833+	1,370

County: JEFFERSON State: ALABAMA

Contact	Property	Туре	Number of bedrooms 1 2 3 4 5+
BESSEMER HOUSING AUTHORITY Phone: (205)481-4438	JESS LANIER MANOR 1500 EXETER AV S BESSEMER, AL 35020-6592 Phone: (205) 481-4438	Elderly	x x
Arlington Properties, Inc. Phone: (205)425-0486 barthur@arlingtonproperties.net	PEPPERTREE APARTMENTS 28 Division St Bessemer, AL 35020-7813 Phone: (205) 425-0486	Family	x x
SPM, LLC Phone: 205-425-8472 maryr@spm.net	PINES APTS. 600 CRUMPTON DR SW BESSEMER, AL 35023-4630 Phone: 205-425-8472	Family	x x
Arlington Properties, Inc. Phone: (205)425-8339 barthur@arlingtonproperties.net	ROOSEVELT MANOR 5812 Ellington Street Bessemer, AL 35020 Phone: 205-425-8339	Elderly	х
JEFFERSON-BLOUNT-ST. CLAIR MENTAL HEALTH Phone: (205)426-6505	VERA HOUSE 1618 8TH AVE N BESSEMER, AL 35020-5743 Phone: (205) 426-6505	Disabled	X
AIDS Alabama, Inc. Phone: 205 781-3006 finney@aidsalabama.org	AGAPE HOUSE 2100 Avenue H Ensley BIRMINGHAM, AL 35218 Phone: 205 224 2345	Disabled	×
AIDS Alabama, Inc. Phone: 205 781-2016 finney@aidsalabama.org	AGAPE II 2117 AVENUE H BIRMINGHAM, AL 35218-1769 Phone: 205-781-2016	Disabled	X X X
AHEPA Affordable Housing Management Company, Inc. Phone: 205-824-8185 phulse@ahepamgmt.org	AHEPA PENELOPE DISTRICT ONE 3308 Oakhill Drive Birmingham, AL 35216 Phone: 205-824-8185		×
Arlington Properties, Inc. Phone: 205-925-6000 barthur@arlingtonproperties.net	ALAMEDA TERRACE APTS 1750 Alameda Ct Birmingham, AL 35211-3373 Phone: 205-923-6352	Family	×
LAWLER-WOOD, LLC Phone: (205)252-1900 pcarbaugh@lawlerwood.com	BANKHEAD TOWERS 2300 5th Avenue North BIRMINGHAM, AL 35203-3444 Phone: (205) 252-1900	Elderly	x 'x
ALCO MANAGEMENT, INC Phone: 205-322-0728 mjohnson@alcomgt.com	BIRMINGHAM TOWERS 2712 31ST AVENUE NORTH BIRMINGHAM, AL 35207-4595 Phone: 205-322-0728	Elderly	x x
JEFFERSON-BLOUNT-ST. CLAIR MENTAL HEALTH Phone: (205)595-4555	CARSON PLACE 1725 Carson Road BIRMINGHAM, AL 35215-5200 Phone: 205-595-4555	Disabled	x
Arlington Properties, Inc. Phone: (205)853-8096	CHALKVILLE MANOR 101 CHALKVILLE MANOR DR	Family	X X

<u>barthur@arlingtonproperties.net</u>	BIRMINGHAM, AL 35215-3965 Phone: 205-853-8096			
ASSOC FOR RETARDED CITIZENS, INC OF JEFF CO Phone: (205) 323-6383x101 Hunter2549@aol.com	COMMUNITY OPTIONS HOUSING 8400 DIVISION AVENUE BIRMINGHAM, AL 35206-2752 Phone: 205-251-0165	Disabled	×	
JEFFERSON-BLOUNT-ST, CLAIR MENTAL HEALTH Phone: (205)595-4555	CRESTLINE HOMES 2724 34TH AVE N BIRMINGHAM, AL 35207-4526 Phone: (205) 595-4555	Disabled	X	
Arlington Properties, Inc. Phone: (205)925-6000 <u>barthur@arlingtonproperties.net</u>	DEER PARK APARTMENTS 304 16TH PL SW BIRMINGHAM, AL 35211-2137 Phone: 205-923-6352	Family	х	X
JEFFERSON-BLOUNT-ST. CLAIR MENTAL HEALTH Phone: 205-836-6538	DEVILLE PLACE 7744 1ST AVE S BIRMINGHAM, AL 35206-4311 Phone: 205-836-6538	Disabled	×	
Retiree Housing Mangement Phone: (205)591-8039	DON L. WEST TEAMSTER MANOR 204 59TH ST S BIRMINGHAM, AL 35212-2584 Phone: (205)591-8039	Disabled	x x	×
SPM, LLC Phone: (205) 833-1798 maryr@spm.net	EAST LAKE HOUSE 7901 FIRST AVE S BIRMINGHAM, AL 35206-3863 Phone: (205) 833-1798	Elderly	X	
SPM, LLC Phone: (205) 939-0085 maryr@spm.net	EPISCOPAL PLACE 1112 26TH ST S BIRMINGHAM, AL 35205-2461 Phone: (205) 939-0085	Elderly		

County: JEFFERSON State: ALABAMA

		stekusenskommer (militarione	ngaga walangan katanga manakan katangan
Contact	Property	Type .	Number of bedrooms 1 2 3 4 5+
SPM, LLC Phone: (205) 939-0085 maryr@spm.net	EPISCOPAL PLACE II 1100 S 26TH ST BIRMINGHAM, AL 35205-2461 Phone: (205) 939-0085	Elderly	X
Arlington Properties, Inc. Phone: 205-925-6000 <u>barthur@arlingtonproperties.net</u>	FAIR PARK APARTMENTS 4800 COURT V BIRMINGHAM, AL 35208-4728 Phone: 205-252-0460	Family	X
Arlington Properties, Inc. Phone: (205)853-7427 barthur@arlingtonproperties.net	FARRINGTON APARTMENTS 2935 CREEK LN BIRMINGHAM, AL 35215-2162 Phone: 205-853-7427	Family	x x x
SPM, LLC Phone: (205) 591-1149 maryr@spm.net	FAUSH METROPOLITAN MANOR 5701 1ST AVE S BIRMINGHAM, AL 35212-2531 Phone: (205)591-1149	Disabled	x
MARCRUM MANAGEMENT COMPANY Phone: 205-925-5308 gmarcrum@marcrum.com	FOREST HILLS VILLAGE APARTMENTS 2615 TEMPEST DR BIRMINGHAM, AL 35211-5391 Phone: (205)925-5308	Family	x x x x
YW Four Winds East, L.L.C. Phone: 205-322-9922x206	FOUR WINDS EAST 617 39TH ST S BIRMINGHAM, AL 35222-3330 Phone: (205)322-9922	Elderly	x
Mar Mangement, Inc Phone: (205)787-7883 Joaquin@miamimar.com	FOUR WINDS WEST 1301 MONROE AVE SW BIRMINGHAM, AL 35211-6003 Phone: 205-787-7883	Elderly	*
JEFFERSON-BLOUNT-ST, CLAIR MENTAL HEALTH Phone: (205) 443-2208	FRANK SALERNO GROUP HOME 4545 11th Avenue North Birmingham, AL 35212 Phone: 205-380-0748		X
SPM, LLC Phone: 205-925-6515 maryr@spm.net	GARDEN OF HOPE 2017 Jefferson Avenue BIRMINGHAM, AL 35211-4139 Phone: (205) 925-6515		
ASSOC FOR RETARDED CITIZENS, INC OF JEFF CO Phone: (205) 592-0221 Hunter2549@aol.com	GERRY FULLAN HOUSE 5224 GEORGIA RD BIRMINGHAM, AL 35212-2426 Phone: 205-944-3917	Disabled	X
JEFFERSON-BLOUNT-ST. CLAIR MENTAL HEALTH Phone: (205)595-4555	HARC 1217 MONROE AVE SW BIRMINGHAM, AL 35211-1261 Phone: 205-595-4555	Disabled	
ASSOC FOR RETARDED CITIZENS, INC OF JEFF CO Phone: (205) 323-6383x101 Hunter2549@aol.com	HARC IV 1238 BLUE RIDGE BLVD BIRMINGHAM, AL 35216-3032	Disabled .	x
SPM, LLC Phone: 205-933-7543 maryr@spm.net	HIGHLAND MANOR 2040 S HIGHLAND AVE BIRMINGHAM, AL 35205-3832 Phone: 205-933-7543	Elderly	X X

JEFFERSON-BLOUNT-ST. CLAIR MENTAL HEALTH Phone: (205)595-4555	HORIZON HOMES 4201 5TH AVE S BIRMINGHAM, AL 35222-2603	Disabled	· X	×		
Arlington Properties, Inc. Phone: (205)925-6000 barthur@arlingtonproperties.net	JANMAR APTS 1501 2nd Court West BIRMINGHAM, AL 35204-5415 Phone: 205-923-6352	Family		X		
Management Enterprises Development & Services, Inc Phone: 205-923-3940	JEFFERSON AVE APT 2727-E JEFFERSON AVE, SW BIRMINGHAM, AL 35211-4018 Phone: (205)923-3940	Family		x :	X	
GLENWOOD MENTAL HEALTH Phone: 205-795-3224	JERNIGAN HOUSE 224 GLENWOOD LANE BIRMINGHAM, AL 35242-5702 Phone: 205-969-2880	Disabled	×			
Southeastern Property Management, LLC Phone: 205-923-3738 billw@spminc.cc	MCMILLON ADVENTIST ESTATES 1001 57th St W Birmingham, AL 35228-1100 Phone: 205-923-3738	Elderly	x			
SPM, LLC Phone: (205)923-3738 maryr@spm.net	MCMILLON ADVENTIST ESTATES 1001 57th St. Ensley BIRMINGHAM, AL 35228-1100 Phone: 205-923-3738	Elderly	×			
TESCO Properties, Inc. Phone: (205) 781-1715 LSission@Tescoproperties.com	MONROE AVENUE APARTMENTS 1400 Monroe Avenue S.W. BIRMINGHAM, AL 35211-1842 Phone: 205-781-1715	Family		x		

County: JEFFERSON State: ALABAMA

Contact	Property	Туре	Number of bedrooms 1 2 3 4 5+
SPM, LLC Phone: (205)323-3940 maryr@spm.net	NEW PILGRIM HOMES 3416 7TH AVE S BIRMINGHAM, AL 35222-3243 Phone: (205) 323-3940	Elderly	x x
GLENWOOD MENTAL HEALTH	PARKLAND PLACE 2535 HIGHLAND AVE BIRMINGHAM, AL 35205-2464 Phone: 205-969-2880	Disabled	X .
Accessible Space, Inc.	PATTON RIDGE APTS. 2122 Rocky Ridge Rd Birmingham, AL 35216-5138 Phone: (205)824-0899		X X
BAPTIST HEALTH SYSTEM INC Phone: (205)783-3293 Dan.McClusky@bhsala.com	PRINCETON TOWERS I 909 PRINCETON AVE SW BIRMINGHAM, AL 35211-1305 Phone: 205-783-3291	Elderly	x
BAPTIST HEALTH SYSTEM INC Phone: (205)783-3293 Dan,McClusky@bhsala.com	PRINCETON TOWERS II 908 TUSCALOOSA AVE BIRMINGHAM, AL 35211-1617 Phone: 205-783-3291	Elderly	X
Arlington Properties, Inc. Phone: (256)925-6000 barthur@arlingtonproperties.net	RICKWOOD APTS. 1132 2ND CT W BIRMINGHAM, AL 35208 Phone: (256)923-6604	Family	· x
Arlington Properties, Inc. Phone: (205)798-5814 barthur@arlingtonproperties.net	SOUTHAMPTON APTS 100 Dugan Avenue BIRMINGHAM, AL 35214-5149 Phone: (205)798-5814	Family	X X X
JEFFERSON COUNTY HOUSING AUTHORITY Phone: (205)841-5032	SPRING GARDENS 201 Spring Gardens Rd. BIRMINGHAM, AL 35217 Phone: (205) 841-5032	Elderly	x x
SPM, LLC Phone: (205)798-9359 maryr@spm.net	ST CHARLES VILLAS 100 PRATT HIGHWAY BIRMINGHAM, AL 35214-4560 Phone: (205) 798-9359	Family	X X
PK Management LLC Phone: 818-808-0600 x450 robert@ghcapital.com	SUMMIT RIDGE APARTMENTS 149 Haversham Drive BIRMINGHAM, AL 35215-1190 Phone: 205-854-5331	Family	X X X
Summit Housing Partners Management, LLC Phone: 205-798-9198 scrossfield@summitamerica.com	TIMBER RIDGE APARTMENTS 825 CHERRY AVE BIRMINGHAM, AL 35214-4728 Phone: 205-798-9198	Family	X X X
PK Management LLC	VALLEY BROOK APARTMENTS 2969 -4 GALLANT DR BIRMINGHAM, AL 35215-1700 Phone: (205)854-0398	Family	x x x
SPM, LLC Phone: (205) 833-0532 maryr@spm.net	VILLA MARIA II SW Corner of 82nd St and 6th Ave S Birmingham, AL 35206 Phone: (205) 833-0532		×

SPM, LLC Phone: (205)836-7839 maryr@spm.net	VILLA MARIA MANOR 500 82ND ST S BIRMINGHAM, AL 35206-3970 Phone: (205)836-7839	Elderly	×
Management Enterprises Development & Services, Inc Phone: 205-925-2153	W. CLYDE WILLIAMS TERRACE 6301 MYRON MASSEY BLVD FAIRFIELD, AL 35064-2592 Phone: (205) 925-2153	Elderly	x x
UNITED CEREBRAL PALSY OF GREATER BIRMINGHAM Phone: 205-944-3917	COMMUNITY CONCEPTS SANDER COURT HOMEWOOD, AL 35209 Phone: (205) 944-3918	Disabled	x x
ASSOC FOR RETARDED CITIZENS, INC OF JEFF CO Phone: 205-503-4036 Hunter2549@aol.com	HARC III 3012 FIREFIGHTER LN HOMEWOOD, AL 35209-4152 Phone: 205-879-5148	Disabled	×
AHEPA Affordable Housing Management Company, Inc. Phone: 205 978-2157 phulse@ahepamgmt.org	AHEPA 3 APARTMENTS 3320 Old Columbiana Road HOOVER, AL 35226-3385 Phone: (205) 978-2157	Elderly	x
Southeastern Property Management, LLC Phone: (205)841-0682 billw@spminc.cc	PRESBYTERIAN MANOR APARTMENTS 926 OVERTON AVE TARRANT CITY, AL 35217-2962 Phone: 205-841-0682	Elderly	

2. The number and targeting of units currently assisted by local, state, or federal funded programs are described in the above list and in the table shown below.

Federal budget cuts will have a negative impact on the number of Section 8 units which are available through local PHA's.

Another factor to consider is the potential loss of subsidized units as Section 8 agreements with HUD expire. The properties shown below indicate those that could be lost thru 2014.

Forest Hills Village Apartments 2615 Tempest Drive Birmingham, AL 35211 # of Units: 152

Jefferson Avenue Apartments 2727-E Jefferson Avenue SW Birmingham, Al. 35211

Valley Brook Apartments 2969-4 Gallant Drive Birmingham, AL 35215 # of Units: 213

3. The characteristics of the housing market will have little influence on the use of funds made available for rental assistance, production of new units, rehabilitation of old units, or acquisition of existing units. Cost, economic conditions and the efficiency of operations are the three primary factors that will influence these areas whether or not federal, state, local or private funds are involved.

Response: Jefferson County will continue to concentrate its CDBG housing funds on the rehabilitation of existing owner occupied housing stock because that is where the greatest need can be found. Jefferson County will continue to use its HOME funds for homeownership and special needs housing because that is where the greatest need rests.

13. Provide an estimate; to the extent information is available, of the number of vacant or abandoned buildings and whether units in these buildings are suitable for rehabilitation.

Response: Data on vacancy rates is very limited and is not currently attainable at the Census Place level. The vacancy rates shown in the tables below are not in a detailed form that would aid in the development of the Strategic Plan.

Alabama Rental Vacancy Rates					
Quarter	2006	2007	2008	2009	2010
1 st Quarter	10.6	13.2	15.5	11.5	12.6
2 nd Quarter	13.8	15.6	15.8	13.6	
3 rd Quarter	15.4	17.2	14.0	14.1	
4 th Quarter	13.9	15.3	15.9	18.6	

Alabama Homeownership Vacancy Rates					
Quarter	2006	2007	2008	2009	2010
1 st Quarter	2.2	3.2	2.8	2.8	3.1
2 nd Quarter	2.3	3.8	3.8	3.1	
3 rd Quarter	3.7	2.4	3.6	3.0	
4 th Quarter	2.8	2.3	3.1	3.1	

Birmingham-Hoover MSA Rental Vacancy Rates					
Quarter	2006	2007	2008	2009	2010
1 st Quarter	12.4				
2 nd Quarter	16.0				
3 rd Quarter	18.4				
4 th Quarter	21.9				

Birmingham-Hoover MSA Homveownership Vacancy Rates						
Quarter	2006	2007	2008	2009	2010	
1 st Quarter	1.7	3.2	3.8	3.3		
2 nd Quarter	1.5	2.4	4.4	2.8		
3 rd Quarter	5.2	1.7	3.9	3.4		
4 th Quarter	3.2	2.7	1.3	3.3		

Source: Data drawn from the Census Bureau on May 22, 2010

Public and Assisted Housing 91.210 (b)

- 14. In cooperation with the public housing agency or agencies located within its boundaries, describe the needs of public housing, including
 - the number of public housing units in the jurisdiction,
 - · the physical condition of such units,
 - the restoration and revitalization needs of public housing projects within the jurisdiction,
 - the number of families on public housing and tenant-based waiting lists and
 - results from the Section 504 needs assessment of public housing projects located within its boundaries (i.e. assessment of needs of tenants and applicants on waiting list for accessible units as required by 24 CFR 8.25).

The jurisdiction can use the optional Priority Public Housing Needs Table of the Consolidated Plan to identify priority public housing needs to assist in this process.

Response:

Jefferson County has four Public Housing Authorities as described below:

Jefferson County Housing Authority Fairfield Housing Authority Leeds Housing Authority Tarrant Housing Authority 15. Describe the number and targeting (income level and type of household served) of units currently assisted by local, state, or federally funded programs, and an assessment of whether any such units are expected to be lost from the assisted housing inventory for any reason, (i.e. expiration of Section 8 contracts).

Response: See above list. No loss of units is anticipated.

Homeless Inventory 91.210 (c)

16. The jurisdiction shall provide a concise summary of the existing facilities and services (including a brief inventory) that assist homeless persons and families with children and subpopulations identified in Table 1A or in the CPMP Tool Needs Table. These include outreach and assessment, emergency shelters and services, transitional housing, permanent supportive housing, access to permanent housing, and activities to prevent low-income individuals and families with children (especially extremely low-income) from becoming homeless. This inventory of facilities should include (to the extent it is available to the jurisdiction) an estimate of the percentage or number of beds and supportive services programs that are serving people that are chronically homeless.

The jurisdiction can use the optional Continuum of Care Housing Activity Chart and Service Activity Chart to meet this requirement.

Response:

Table 1A Homeless and Special Needs Populations

Continuum of Care: Housing Gap Analysis Chart

		Current Inventory	Under Development	Unmet Need/ Gap
	Indivi	duals		
Example	Emergency Shelter	100	40	26
	Emergency Shelter	245		250
Beds	Transitional Housing	391		80
	Permanent Supportive Housing	541		950
	Total	1177		1280
	Person	ns in Families With C	hildren	
	Emergency Shelter	67		50
Beds	Transitional Housing	397		100
	Permanent Supportive Housing	664		350
	Total	1128		500

Continuum of Care: Homeless Population and Subpopulations Chart

Part 1: Homeless Population	Sheltered		Unsheltered	Total	
-	Emergency	Transitional			
Number of Families with Children					
(Family Households):	31	86	118	235	
Number of Persons in Families with Children	85	228	315	628	
Number of Single Individuals and Persons in Households without children	287	469	889	1645	
(Add Lines Numbered 1 & 2 Total Persons)	372	697	1204	2273	
Part 2: Homeless Subpopulations	She	ltered	Unsheltered	Total	
a. Chronically Homeless	285		326	611	
b. Seriously Mentally Ill	385				
c. Chronic Substance Abuse	826				
d. Veterans	400				
e. Persons with HIV/AIDS	141				
f. Victims of Domestic Violence	141				
g. Unaccompanied Youth (Under 18)	20				

Special Need Facilities and Services 91.210 (d)

17. Describe, to the extent information is available, the facilities and services that assist persons who are not homeless but require supportive housing, and programs for ensuring persons returning from mental and physical health institutions receive appropriate supportive housing.

Response: See pages 73-80.

Barriers to Affordable Housing 91.210 (e)

18. Explain whether the cost of housing or the incentives to develop, maintain, or improve affordable housing are affected by public policies, particularly those of the local jurisdiction. Such policies include tax policy affecting land and other property, land use controls, zoning ordinances, building codes, fees and charges, growth limits, and policies that affect the return on residential investment.

Response:



Alabama - 2010

In Alabama, the Fair Market Rent (FMR) for a two-bedroom apartment is \$655. In order to afford this level of rent and utilities, without paying more than 30% of income on housing, a household must earn \$2,182 monthly or \$26,187 annually. Assuming a 40-hour work week, 52 weeks per year, this level of income translates into a Housing Wage of \$12.59.

In Alabama, a minimum wage worker earns an hourly wage of \$7.25. In order to afford the FMR for a two-bedroom apartment, a minimum wage earner must work 69 hours per week, 52 weeks per year. Or, a household must include 1.7 minimum wage earner(s) working 40 hours per week year-round in order to make the two bedroom FMR affordable.

In Alabama, the estimated mean (average) wage for a renter is \$10.68 an hour. In order to afford the FMR for a two-bedroom apartment at this wage, a renter must work 47 hours per week, 52 weeks per year. Or, working 40 hours per week year-round, a household must include 1.2 worker(s) earning the mean renter wage in order to make the two-bedroom FMR affordable.

Monthly Supplemental Security Income (SSI) payments for an individual are \$674 in Alabama. If SSI represents an individual's sole source of income, \$202 in monthly rent is affordable, while the FMR for a one-bedroom is \$564.

A unit is considered affordable if it costs no more than 30% of the renter's income.

For an explanation of these data, see <u>How to Use the Numbers / Where the Numbers Come</u> From.

If necessary, use the scroll bar at the bottom of the table to view additional jurisdictions.

	Alabama Jefferson County
Number of Households (2000)	
Total	1,737,080 263,265
Renter	478,394 88,283
% Renter	28% 34%

2010	Ectimate	d Ares	Median	Income ¹
ZU.U	rsulliale	u Alea	Mediali	THEOME

Annual	\$55,338 \$62,800
Monthly	\$4,612 \$5,233
30% of AMI ²	\$16,602 \$18,840

Maximum Affordable Monthly Housing Cost by % of Estimated AMI

30%	\$415 \$471
50%	\$692 \$785
80%	\$1,107 \$1,256
100%	\$1,383 \$1,570

2010 Fair Market Rent (FMR)⁴

Zero-Bedroom	\$505 \$593
One-Bedroom	\$564 \$659
Two-Bedroom	\$655 \$735
Three-Bedroom	\$854 \$933
Four-Bedroom	\$959 \$960

Zero-Bedroom	43% 45%
One-Bedroom	43% 45%
Two-Bedroom	43% 45%
Three-Bedroom	43% 45%
Four-Bedroom	43% 45%

Annual Income Needed to Afford FMR

Zero-Bedroom	\$20,198 \$23,720
One-Bedroom	\$22,544 \$26,360
Two-Bedroom	\$26,187 \$29,400
Three-Bedroom	\$34,141 \$37,320
Four-Bedroom	\$38,359 \$38,400

Percent of Estimated AMI Needed to Afford FMR

Zero-Bedroom	36%	38%
One-Bedroom	41%	42%
Two-Bedroom	47%	47%
Three-Bedroom	62%	59%
Four-Bedroom	69%	61%

Renter Household Income

	Estimated Median Renter Household Income ⁵	\$25,559	\$30,067
١	Percent Needed to Afford 2 BR FMR	102%	98%
ĺ	Rent Affordable at Median	\$639	\$752
	% Renters Unable to Afford 2 BR FMR ⁶	50%	48%

Estimated Mean Renter Wage ⁷	\$10.68	\$14.02
Rent Affordable at Mean Wage	\$555	\$729
Rent Anordable at Heart Wage		4/23
10 Minimum Wage		E AND MARKET WHEN THE TOTAL OF THE CONTROL OF THE C
Minimum Wage	\$7.25	\$7.25
Rent Affordable at Minimum Wage	\$377	\$377
10 Supplemental Security Income		
Monthly SSI Payment	\$674	\$674
Rent Affordable at SSI	\$202	\$202
ousing Wage		
Zero-Bedroom	\$9.71	\$11.40
One-Bedroom	\$10.84	\$12.67
Two-Bedroom	\$12.59	\$14.13
Three-Bedroom	\$16.41	\$17.94
Four-Bedroom	\$18.44	\$18.46
using Wage as % of Minimum Wage	 	Karagan sa a con a
Zero-Bedroom	134%	157%
One-Bedroom	149%	175%
Two-Bedroom	174%	195%
Three-Bedroom	226%	247%
Four-Bedroom	254%	255%
ousing Wage as % of Mean Renter Wa	ge	
Zero-Bedroom	91%	81%
One-Bedroom	101%	90%
Two-Bedroom	118%	101%
Three-Bedroom	154%	128%
Four-Bedroom	173%	132%
ork Hours/Week at Minimum Wage Ne	eeded to Affo	rd FMR
Zero-Bedroom	54	63
One-Bedroom	60	70
Two-Bedroom	69	78
Three-Bedroom	91	99
Four-Bedroom	102	102
	<u> </u>	
ork Hours/Week at Mean Renter Wago Zero-Bedroom	e Needed to A	Afford FMR
One-Bedroom	41	36
Two-Bedroom	47	40
INO DEGLOCITI	7/	- ERMSRESSON ITU EMPS N

		15,304,000 (45,77), 53,730 (100,5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Four-Bedroom	69	53
full-time Jobs at Minimum Wage Nee	ded to Afford FM	R
Zero-Bedroom	1.3	1.6
One-Bedroom	1.5	1.7
Two-Bedroom	1.7	1.9
Three-Bedroom	2.3	2.5
Four-Bedroom	2.5	2.5
Full-time Jobs at Mean Renter Wage N	leeded to Afford	FMR
Zero-Bedroom	0.9	0.8
One-Bedroom	1.0	0.9
Two-Bedroom	1.2	1.0
Three-Bedroom	1.5	1.3
Four-Bedroom	1.7	1.3
		Jefferson Count
	 	Jefferson Count
dumbar of Hansahalda (2000)		
Number of Households (2000)	1 727 000	DC2 26F
Total	1,737,080	Construction of the Constr
Renter	478,394	88,283
% Renter	28%	34%
2010 Estimated Area Median Income ¹		_
Annual	\$55,338	\$62,800
Monthly	\$4,612	\$5,233
30% of AMI ²	\$16,602	\$18,840
Maximum Affordable ³ Monthly Housin	a Cost by % of E	stimated AMI
30%	\$415	\$471
50%	\$692	\$785
80%	\$1,107	\$1,256
100%	\$1,383	\$1,570
2010 Fair Market Rent (FMR) ⁴		Land and the state of the state
Zero-Bedroom	\$505	\$593
One-Bedroom	\$564	\$659
Two-Bedroom	\$655	\$735
Three-Bedroom	\$854	\$933
Four-Bedroom	\$959	\$960
i oui-bearoom	55.55	Ψου
% Change from 2000 Base Rent to 20		
Zero-Bedroom	43%	45%
One-Bedroom	43%	45%
Two-Bedroom	43%	45%
Three-Bedroom	43%	45%

Four-Bedroom	43%	45%
nnual Income Needed to Afford FMR		
Zero-Bedroom	\$20,198	\$23,720
One-Bedroom	\$22,544	\$26,360
Two-Bedroom	\$26,187	\$29,400
Three-Bedroom	\$34,141	\$37,320
Four-Bedroom	\$38,359	\$38,400
		γου, του
ercent of Estimated AMI Needed to Afford F		Torbin Assessed No. 10.000 Fig. 100 May for Feel Williams Consider
Zero-Bedroom	36%	38%
One-Bedroom	41%	42%
Two-Bedroom	47%	47%
Three-Bedroom	62%	59%
Four-Bedroom	69%	61%
enter Household Income		
Estimated Median Renter Household Income ⁵	\$25,559	\$30,067
Percent Needed to Afford 2 BR FMR	102%	98%
Rent Affordable at Median	\$639	\$752
% Renters Unable to Afford 2 BR FMR ⁶	50%	48%
10 Renter Wage		
Estimated Mean Renter Wage ⁷	\$10.68	\$14.02
Rent Affordable at Mean Wage	\$555	\$729
10 Minimum Wage		
Minimum Wage	\$7.25	\$7.25
Rent Affordable at Minimum Wage	\$377	\$377
	L	Techniques and all was a see a second control of the second contro
10 Supplemental Security Income		
Monthly SSI Payment	\$674	\$674
Rent Affordable at SSI	\$202	\$202
ousing Wage		
Zero-Bedroom	\$9.71	\$11.40
One-Bedroom	\$10.84	\$12.67
Two-Bedroom	\$12.59	\$14.13
Three-Bedroom	\$16.41	\$17.94
Four-Bedroom	\$18.44	\$18.46
	1	personal of the Carl 120 Carl 120 Carl 120 Carl
Dusing Wage as % of Minimum Wage Zero-Bedroom	134%	157%
	149%	175%
One-Bedroom		1
Two-Bedroom	174%	195%
Three-Bedroom	226%	247%

Four-Bedroom	254%	255%
lousing Wage as % of Mean Rei	nter Wage	
Zero-Bedroom	91%	81%
One-Bedroom	101%	90%
Two-Bedroom	118%	101%
Three-Bedroom	154%	128%
Four-Bedroom	173%	132%
Vork Hours/Week at Minimum \		TORRORDER AND RESIDENCE OF STORY OF STORY OF STORY
Zero-Bedroom	54	63
One-Bedroom	60	70
Two-Bedroom	69	78

| | Work Hours/Week at Mean Renter Wage Needed to Afford FMR

	Alloid Fills
36	33
41	36
47	40
61	51
69	53

99

102

91

102

Full-time Jobs at Minimum Wage Needed to Afford FMR

Three-Bedroom

Four-Bedroom

Tan chine bobb at thinniant trage freeze to three a true		
Zero-Bedroom	1.3	1.6
One-Bedroom	1.5	1.7
Two-Bedroom	1.7	1.9
Three-Bedroom	2.3	2.5
Four-Bedroom	2.5	2.5

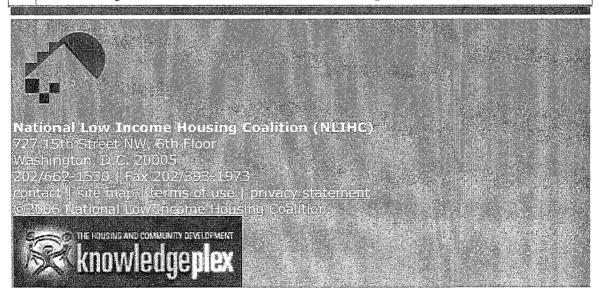
Full-time Jobs at Mean Renter Wage Needed to Afford FMR

an time sobs at mean menter wage	10000 to /111010 1 1 1111	
Zero-Bedroom	0.9 0.8	
One-Bedroom	1.0 0.9	
Two-Bedroom	1.2 1.0	
Three-Bedroom	1.5 1.3	
Four-Bedroom	1.7	
	Alabama Jefferson Co	unty

If necessary, use the scroll bar to view additional jurisdictions.

	CHART FOOTNOTES
1.	NLIHC Estimated 2010 AMI (See <u>Appendix A</u>).
2.	Annual income of 30% of AMI or less is the federal standard for Extremely Low

	Income households. Does not include HUD-specific adjustments.
3.	"Affordable" rents represent the generally accepted standard of spending not more than 30% of gross income on gross housing costs.
4.	Fiscal Year 2010 Fair Market Rent (HUD, 2010; revised as of March 11).
5.	Census 2000 median renter household income, projected to 2009 using HUD's income adjustment factor.
6	Estimated by comparing the percent of renter median household income required to afford the two-bedroom FMR to the percent distribution of renter household income as a percent of the median within the state, as measured using 2008 American Community Survey Public Use Microdata Sample housing file.
7.	Based on 2008 BLS data, adjusted using the ratio of renter to overall household income reported in Census 2000, and projected to April 1, 2010.
*	50th percentile FMR (See <u>Appendix A</u>).
+	Wage data not available (See <u>Appendix A</u>).
	For a listing of towns within FMR areas in New England States, click here.



Regulatory reform is key to the development of affordable housing that is challenged by overly restrictive regulations, zoning laws, and NIMBY sentiments all of which drive up the cost of development. HUD recognizes that public regulatory policies such as zoning ordinances and subdivision regulations can directly or indirectly affect affordability by controlling supplies of residential land, the intensity and character of its use, and many of the costs in developing, owning, and renting housing. In response to these obstacles to development, HUD's Office of Policy Development and Research created the Regulatory Barriers Clearinghouse (RBC) to help the County and other areas across the country identify and overcome barriers to affordable housing development.¹

Regulations that create barriers to the affordability of housing include the following:

- Administrative processes and streamlining Allow developers to receive approval to develop affordable housing. It includes the process for obtaining zoning changes, building permits, and occupancy permits. Approvals are required for the development process, as well as required public hearings or citizen meetings.
- Fees and Dedications State and local requirements for the payment of fees, dedication of property, or installation of infrastructure to meet the increased demand on public services that result from a particular development.
- Planning and Growth Restrictions Barriers and solutions in this category, relate to the process of developing a comprehensive land use plan and the restrictions placed on future development based on a map of the community. Smart growth programs, sewer and building permit moratoriums, or requirements for fiscal impact studies are also included.
- Redevelopment/Infill Refers to the rules under which abandoned or underused property is redeveloped. Inner city redevelopment, single lot infill, and Brownfield redevelopment are included as well as the process of obtaining state and local government authorization to proceed with development.
- Rent controls State and local government action that restrict rent increases or service fee charges to tenants.
- State and Local Environmental and Historic Preservation
 Regulations/Enforcement Process Refers to state and local enforcement of
 environmental and historic preservations laws. State and local governments
 sometimes require additional regulations that exceed federal requirements.
- Tax policies Any barriers or solutions that impact housing affordability, and include laws related to property taxes, tax assessments, transfer taxes, and sales taxes on building materials. It also refers to tax abatements or concessions and homestead exemptions.
- Zoning, Land Development, Construction, and Sub-division regulations Includes any rules and regulations that affect the use of land. Also contained are rules and regulations that permit an owner to divide his land into smaller tracts. Activities include barriers, such as exclusionary zoning, as well as solutions, such as bonus density zoning and deed restrictions.²

² http://www.huduser.org/rbc/search/Terminology.html

http://www.huduser.org/rbcdocs/rbc.brochure