

How Welfare Reform Affects People With Disabilities

by Linda Ostreicher

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He hears voices and has been diagnosed with depression, bipolar disorder, schizophrenia, and a learning disability. But these are not his only nightmares. There are also the ones he encounters in his dealings with the city's welfare agency. His welfare benefits, food stamps, and Medicaid coverage have been repeatedly cut off. Once he went to a Job Center and waited all day, four days in a row, because he couldn't find his way through the crowds and waiting lines to someone who would help him file an application.

Identified only as J.V., his story was included in a complaint filed with the federal Office for Civil Rights about the treatment by the New York City Human Resources Administration

The Americans with Disabilities Act requires state and local governments to make "reasonable modifications" of their programs to ensure that people with disabilities receive the same level of service and benefits as everybody else. This includes programs providing income support, food stamps, and Medicaid, which are disproportionately needed by disabled Americans. (Federal agencies, plus private agencies receiving federal funds, have their own law requiring similar modifications: Section 504 of the Rehabilitation Act.)

MANY LOW-INCOME PEOPLE HAVE DISABILITIES

Nationwide, people with disabilities are poorer and less likely to have jobs than other Americans. A survey by the National Organization on Disability found that 72 percent of people with disabilities wanted to work, but only 29 percent were doing so. According to the [Census Bureau](#)

, 46 percent of single-parent households getting public assistance in 1997 included a mother or child with a disability.

Poverty can combine with even minor disabilities to produce major barriers to employment. Employers are not required to provide personal equipment, such as artificial limbs or hearing aids; jobseekers on Medicaid may not be able to afford equipment that is good enough to enable them to work. When a mother herself has a disability, she may need extra time to get her children ready for day care and to drop them off by public transportation.

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"Most of the consumers I see have more than one disability," says Placida Wilson of Bronx Independent Living Services (where I work part-time). She often accompanies consumers to hearings about their eligibility for benefits. "Depression is the most common, plus a physical disability like arthritis, heart disease, or fibromyalgia. They're poor, can't work, feeling sick, and they may also have kids, can't get child care? A person without a disability would be depressed in that situation." She pointed to a box of tissues on her desk, and another on a shelf above it. "Some of them sit down here and before I can open my mouth, they start to cry."

WHO PAYS THE BILL FOR BENEFITS?

The responsibility for people with disabilities who live in poverty is split among the federal, state and city governments, who pass it around like a hot potato. For those who can meet the stringent requirements, Social Security Disability Insurance and Supplemental Security Income payments are slightly higher and more secure than welfare; the city and state are eager to shift their caseload into these entirely federally-funded programs. However, it can take years for applications to be processed; not all disabilities covered by the Americans with Disabilities Act meet the Social Security definition of disability. That definition requires that applicants prove they are completely incapable of working because of a disability that either is considered fatal, or has lasted (or is expected to last) for at least a year.

States always knew that many public assistance recipients had disabilities, but it took welfare reform to motivate them to hire private agencies to help people apply for Social Security. New York is particularly eager to reclassify families in its caseload before they reach their five-year lifetime limit for Temporary Assistance for Needy Families, so that the federal government will pick up the tab.

DETERMINING DISABILITY STATUS

Non-disabled welfare recipients were the first to be channeled back into the workforce by welfare reform, leaving a higher concentration of recipients with disabilities on the rolls. Yet in November 2002, the city classified only 30 percent of its public assistance caseload as ill, disabled, or caring for a family member. This figure is much lower than the Census Bureau's 46 percent of single-parent households found to have a member with a disability.

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The discrepancy suggests that the city may be either not identifying the disabilities of those on its welfare rolls, or failing to provide public assistance to eligible people with disabilities. Many common physical illnesses, like diabetes, asthma, and hypertension, become disabilities for people with severe cases, yet few welfare recipients or caseworkers know that such cases are covered under the Americans with Disabilities Act.

For the past twenty years, New York City has hired HS Systems, Inc. to examine welfare applicants and recipients and determine their level of disability. This contractor plays a leading role in the complaint filed last April by Brooklyn Legal Services, MFY Legal Services, the Urban Justice Center, and the Welfare Law Center. The complaint describes people whose psychiatric symptoms were treated by HS Systems staff as deliberate violations of program requirements, causing recipients to have their benefits cut off because of their disabilities. In an [article](#) in the Village Voice, ill and disabled applicants were discovered waiting outside HS Systems offices in the snow during the winter of 2000. Since then, HS Systems has followed a court order to open additional sites and provide more room for waiting indoors.

ACCESS TO EQUAL SERVICES REQUIRES ACCOMMODATIONS

Any welfare recipient with or without disabilities may be harmed when poorly trained, overworked, and unmotivated city employees give incorrect or incomplete information, record the wrong facts in case files, or make arbitrary decisions. The damage is compounded for those who have physical disabilities that make it hard to travel to and from multiple appointments, or mental or learning disabilities that turn complex requirements into insoluble riddles. Wilson of Bronx Independent Living Services recalls a consumer who knew he had to mail a form to Social Security, and did so on time. "What he didn't understand was that he needed to fill it out and put a stamp on the envelope."

When someone tells the Human Resources Administration that he or she has a psychiatric disability, according to the April complaint, the agency does not adequately assess the disability, does not accommodate the disability when assigning a work activity, and may sanction them for behavior caused by their disabilities.

One of Wilson's cases involved a mother with schizophrenia who was summoned to HS Systems for an assessment. Her husband went with her and refused to leave her alone with the doctors, because she was acutely ill and he feared she would act inappropriately if she were alone. "He didn't understand that that was exactly what she was supposed to do," Wilson said.

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The doctors would not examine the woman with her husband in the room. The family was sanctioned, losing Medicaid and food stamps as well as welfare. They turned to Bronx Independent Living Services when the mother was running out of medication, she could not see a doctor without Medicaid, there was no food in their home, and the rent was due. Wilson arranged to get their case re-opened the next day, but if they had not already been her consumers, they might not have found help before the wife required hospitalization, or they lost their home.

For people with AIDS/HIV infection, the city has a special division, the HIV/AIDS Services Administration, whose caseworkers coordinate emergency housing and other public benefits for this population. The division was found in violation of the Americans with Disabilities Act in 2000, when understaffing made clients wait too long for services. Thanks to the success of new treatments in prolonging life, the HIV/AIDS Services Administration's caseload continues to rise: in the two years leading up to November 2002, the number of HIV-positive clients rose by over ten percent. City law limits the average number of clients served by caseworkers or supervisors to 34, meaning that the division was required to hire nearly 100 new caseworkers to serve the 3,300 additional clients. Current government budget gaps jeopardize the division's ability to maintain an adequate staff-to-client ratio.

FUTURE EMPLOYMENT OPTIONS LIMITED

The city's public assistance recipients with disabilities may be getting less than their fair share of other services besides income support. Welfare-to-work programs provide employment-related services designed to help recipients move from public assistance to work. Employment-related services are rarely made available to people with disabilities. Vocational training and job placement are as useful to people with disabilities as to anyone else who is unemployed and has little work history. For high school dropouts with sensory or learning disabilities, high school equivalency "GED" classes accommodating their disabilities can be the key to lifetime employment.

The federal Office for Civil Rights is still investigating the April 2002 complaint against the Human Resources Administration, according to Cary LaCheen of the Welfare Law Center. Meanwhile, there will be more cases such as M.F.B. whose claustrophobia prevents him from using elevators. He missed one appointment at HS Systems because a security guard would not let him use the stairs. He only made it to a second appointment because a different guard helped him sneak into the stairway. HS Systems found M.F.B. to be employable with limitations. One of the jobs they indicated he could perform was that of elevator operator.

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