

# CRS Report for Congress

## Housing Opportunities for Persons with AIDS (HOPWA)

January 14, 2008

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Prepared for Members and  
Committees of Congress

# Housing Opportunities for Persons with AIDS (HOPWA)

## Summary

The Department of Housing and Urban Development administers the only federal housing program created specifically for persons with acquired immunodeficiency syndrome (AIDS) or related diseases. The National Affordable Housing Act of 1990 (P.L. 101-625) established the Housing Opportunities for Persons with AIDS program (HOPWA). HOPWA is designed to address the housing and service needs of individuals with HIV/AIDS and their families.

In FY2008, Congress appropriated \$300 million for HOPWA in the Consolidated Appropriations Act (P.L. 110-161). This is the most funding ever appropriated for the program, exceeding the FY2004 appropriation by approximately \$6 million. HOPWA funds are distributed to states and localities through both formula and competitive grants. HUD awards 90% of appropriated funds by formula to states and eligible metropolitan statistical areas (MSAs) based on population, reported cases of AIDS, and incidence of AIDS. The remaining 10% is distributed through a competitive grant competition. Funds are used primarily for housing activities, although grant recipients must provide supportive services to those persons residing in HOPWA-funded housing.

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# Housing Opportunities for Persons with AIDS (HOPWA)

## The Need for Affordable Housing for Persons with HIV/AIDS

The availability of adequate, affordable housing for persons living with HIV/AIDS has been an issue since AIDS was first identified in U.S. patients in the early 1980s. The inability to afford housing and the threat of homelessness confront many individuals living with HIV/AIDS. From the early years of the epidemic, those who have been infected with HIV/AIDS face impoverishment as they become unable to work, experience high medical costs, or lose private health insurance coverage. In recent years, the incidence of HIV/AIDS has grown among vulnerable groups, including minorities, women, and those living in poverty.<sup>1</sup>

Not surprisingly, researchers have found a co-occurrence between HIV/AIDS and homelessness: homeless persons have a higher incidence of HIV/AIDS infection than the general population, while many individuals with HIV/AIDS are at risk of becoming homeless.<sup>2</sup> Further, another study found that those who are HIV positive and homeless are more likely than those who are HIV positive and housed to engage in behaviors associated with the spread of HIV/AIDS: using injectable drugs, sharing needles, and exchanging sex for drugs or money.<sup>3</sup> When housing improved for individuals in the study, their odds of engaging in these behaviors were reduced.

Congress established the Housing Opportunities for Persons with AIDS (HOPWA) program as part of the National Affordable Housing Act (P.L. 101-625)

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<sup>1</sup> John M. Karon, Patricia L. Fleming, Richard W. Steketee, and Kevin M. DeCock, "HIV in the United States at the Turn of the Century: An Epidemic in Transition," *American Journal of Public Health* 91, no. 7 (July 2001): 1060-1068.

<sup>2</sup> See, for example, D.P. Culhane, E. Gollub, R. Kuhn, and M. Shpaner, "The Co-Occurrence of AIDS and Homelessness: Results from the Integration of Administrative Databases for AIDS Surveillance, and Public Shelter Utilization in Philadelphia," *Journal of Epidemiology and Community Health* 55, no. 7 (2001): 515-520. Marjorie Robertson, et al., "HIV Seroprevalence Among Homeless and Marginally Housed Adults in San Francisco," *American Journal of Public Health* 94, no. 7 (2004): 1207-1217. Angela A. Aidala and Gunjeong Lee, *Housing Services and Housing Stability Among Persons Living with HIV/AIDS*, Joseph L. Mailman School of Public Health, May 30, 2000, available online at [<http://www.nyhiv.org/pdfs/chain/CHAIN%20Housing%20Stability%2032.pdf>].

<sup>3</sup> Angela Aidala, Jay E. Cross, Ron Stall, David Harre, and Esther Sumartojo, "Housing Status and HIV Risk Behaviors: Implications for Prevention and Policy," *AIDS and Behavior* 9, no. 3 (2005): 251-265.

in 1990.<sup>4</sup> Members recognized that persons living with AIDS faced impoverishment and discrimination<sup>5</sup> that could prevent them from finding adequate housing.<sup>6</sup> The HOPWA program, administered by the Department of Housing and Urban Development (HUD), remains the only federal program solely dedicated to providing housing assistance to persons living with HIV/AIDS and their families.<sup>7</sup> The program addresses the need for reasonably priced housing for thousands of low-income individuals (those earning less than 80% of the area median income), and thereby prevents homelessness and reduces the risk of homelessness. HOPWA was reauthorized by the Housing and Community Development Act of 1992 (P.L. 102-550). Although authorization for HOPWA expired after FY1994, Congress continues to fund the program through annual appropriations.

## Distribution and Use of HOPWA Funds

### Formula Grants

HOPWA program funding is distributed both by formula allocations and competitive grants. HUD awards 90% of appropriated funds by formula to states and eligible metropolitan statistical areas (MSAs) that meet the minimum requirements according to data reported to the Centers for Disease Control and Prevention (CDC) in the previous year. (For the amounts distributed to eligible states and MSAs, see **Appendix A.**) HOPWA formula funds are available through HUD's Consolidated Plan initiative. Jurisdictions applying for funds from four HUD formula grant programs, including HOPWA,<sup>8</sup> submit a single consolidated plan to HUD. The plan includes an assessment of community needs and a proposal that addresses those

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<sup>4</sup> The 101<sup>st</sup> Congress, in separate legislation, also enacted in 1990 the Ryan White Comprehensive AIDS Resources Emergency Act (CARE Act). Most of the funds in the CARE Act, administered through the Department of Health and Human Services, are used for medical treatment and medications, though funds are also used for support services. For more information on the CARE Act, see CRS Report RL33279, *AIDS: The Ryan White CARE Act*, by Judith A. Johnson and Paulette C. Morgan.

<sup>5</sup> Individuals living with HIV/AIDS have experienced housing discrimination even though they are protected as disabled persons under the Fair Housing Act (FHA), 42 U.S.C. §§ 3601-3631. A number of court cases have established that the definition of "handicap" protects persons who are HIV positive and persons with AIDS. See, for example, *Baxter v. City of Belleville, Ill.*, 720 F.Supp. 720, 729-730 (S.D.Ill.1989), and *Support Ministries for Persons With AIDS, Inc. v. Village of Waterford, N.Y.*, 808 F.Supp. 120, 129-133 (N.D.N.Y. 1992).

<sup>6</sup> Hearing before the House Committee on Banking, Finance, and Urban Affairs, Subcommittee on Housing and Community Development, "Housing Needs of Persons with Acquired Immune Deficiency Syndrome," March 21, 1990, pp. 38, 73, 195, 348. See also, Statement of Representative James A. McDermott, 135 Cong. Rec. 23641, October 5, 1989.

<sup>7</sup> The law is codified at 42 U.S.C. §§ 12901-12912, with regulations at 24 CFR. Parts 574.3-574.655.

<sup>8</sup> The others are the Community Development Block Grant, the Emergency Shelter Grants, and HOME.

needs, using both federal funds and community resources. Communities that participate in the Consolidated Plan may receive HOPWA funds if they meet formula requirements. Formula funds are allocated in two ways:

- First, 75% of the total available formula funds, sometimes referred to by HUD as “base funding,” is distributed to
  - the largest cities within metropolitan statistical areas (MSAs)<sup>9</sup> with populations of at least 500,000 and with 1,500 or more cumulative reported cases of AIDS (which includes those who have died); and
  - to states with at least 1,500 cases of AIDS in the areas outside of that state’s eligible MSAs.<sup>10</sup>
- Second, 25% of total available formula funds — sometimes referred to by HUD as “bonus funding” — is distributed on the basis of AIDS incidence during the past three years.<sup>11</sup> Only the largest cities within MSAs that have populations of at least 500,000, with at least 1,500 reported cases of AIDS *and* that have a higher than average per capita incidence of AIDS are eligible.<sup>12</sup> States are not eligible for bonus funding.

Although HOPWA funds are allocated to the largest city within an MSA, these recipient cities are required to allocate funds “in a manner that addresses the needs within the metropolitan statistical area in which the city is located.”<sup>13</sup> States that receive funds are to use them to benefit areas outside of eligible MSAs. In FY2007, 84 MSAs received funds, while 38 states and Puerto Rico received funds for use in the areas outside of recipient MSAs.<sup>14</sup> Jurisdictions that receive HOPWA funds may administer housing and services programs themselves or may allocate all or a portion of the funds to subgrantee private nonprofit organizations. HOPWA formula funds remain available for obligation for two years.

As a result of language included in every HUD appropriations law since FY1999 (P.L. 105-276), states do not lose formula funds if their reported AIDS cases drop below 1,500, as long as they received funding in the previous fiscal year. These states are allocated a grant on the basis of the cumulative number of AIDS cases outside of

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<sup>9</sup> MSAs are defined by the Census Bureau as having at least one defined urban area of 50,000 or more and adjacent territory with social and economic integration. See Office of Management and the Budget Bulletin 07-01 Attachment, “Update of Statistical Area Definitions and Guidance on Their Use,” December 18, 2006, p. 2, available at [<http://www.whitehouse.gov/omb/bulletins/fy2007/b07-01.pdf>].

<sup>10</sup> 42 U.S.C. §12903(c)(1)(A).

<sup>11</sup> AIDS incidence is measured as the number of new AIDS cases during a given time period.

<sup>12</sup> 42 U.S.C. §12903(c)(1)(B).

<sup>13</sup> 42 U.S.C. §12903(f).

<sup>14</sup> U.S. Department of Housing and Urban Development, Office of Community Planning and Development, Office of HIV/AIDS Housing, list of FY2007 grantees, available at [<http://www.hud.gov/offices/cpd/aidshousing/programs/formula/grants/fy07/2007.pdf>].

their MSAs.<sup>15</sup> States generally drop below 1,500 AIDS cases when a large metropolitan area becomes separately eligible for formula funds.

## Competitive Grants

The remaining 10% of HOPWA funding is available through competitive grants. Funds are distributed through a national competition to two groups of grantees: (1) states and local governments that propose to provide short-term, transitional, or permanent supportive housing in areas that are not eligible for formula allocations, and (2) government agencies or nonprofit entities that propose “special projects of national significance.”<sup>16</sup> A project of national significance is one that uses an innovative service delivery model. In determining proposals that qualify, HUD must consider the innovativeness of the proposal and its potential replicability in other communities.<sup>17</sup> Competitive grants may not be used to provide supportive services alone; instead, services can only be provided in conjunction with housing activities, and funds for services cannot exceed 35% of a project’s budget.<sup>18</sup>

The competitive grants are awarded through HUD’s annual SuperNOFA (Notice of Funding Availability), which is generally published in the *Federal Register* in the early spring. Since FY2000 (P.L. 106-377), Congress has required HUD to renew expiring contracts for permanent supportive housing prior to awarding funds to new projects. Beginning in FY2006, competitive funds remain available for obligation for three years (from FY2002 through FY2005, competitive funds had been available only for two years). The extension makes the rules for HOPWA’s competitive program consistent with those of other competitive programs advertised in HUD’s SuperNOFA.

## Eligible Uses of HOPWA Funds

HOPWA grantees may use funds for a wide range of housing, social services, program planning, and development costs. Housing and some supportive services are available for family members of persons living with AIDS. When a person living in HOPWA-supported housing dies, his or her family members are given a grace period during which they may remain in the housing.<sup>19</sup> This period may not exceed one year, however. Supportive services must be provided together with housing. Formula grantees may also choose to provide supportive services not in conjunction with housing, although the focus of the HOPWA program is housing activities. Allowable activities include the following.

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<sup>15</sup> States that have retained funding under this provision are Arizona, Delaware, Hawaii, Minnesota, Nevada, and Utah.

<sup>16</sup> 42 U.S.C. §12903(c)(3).

<sup>17</sup> Ibid.

<sup>18</sup> See, for example, U.S. Department of Housing and Urban Development, “FY2007 Notice of Funding Availability Housing Opportunities for Persons With AIDS,” 72 Federal Register p. 11665, March 13, 2007.

<sup>19</sup> 24C.F.R. §574.310(e).

- *The Development and Operation of Multi-Unit Community Residences, Including the Provision of Supportive Services for Persons Who Live in the Residences.*<sup>20</sup> Funds may be used for the construction, rehabilitation, and acquisition of facilities, for payment of operating costs, and for technical assistance in developing the community residence.
- *Short-Term Rental, Mortgage, and Utility Assistance to Persons Living with AIDS Who Are Homeless or at Risk of Homelessness.*<sup>21</sup> Funds may be used to acquire and/or rehabilitate facilities that will be used to provide short-term housing, as well as to make payments on behalf of tenants or homeowners, and to provide supportive services. Funds may not be used to construct short-term housing facilities.<sup>22</sup> Residents may not stay in short-term housing facilities more than 60 days in any 6-month period, and may not receive short-term rental, mortgage and utility assistance for more than 21 weeks in any 52 week period. These limits are subject to waiver by HUD, however, if a project sponsor is making an attempt to provide permanent supportive housing for residents and has been unable to do so. Funds may also be used to pay operating and administrative expenses.
- *Project-Based or Tenant-Based Rental Assistance for Permanent Supportive Housing, Including Shared Housing Arrangements.*<sup>23</sup> In general, tenants must pay approximately 30% of their income toward rent.<sup>24</sup> Grant recipients must ensure that residents receive supportive services, and funds may also be used for administrative costs in providing rental assistance.
- *The New Construction or Acquisition and Rehabilitation of Property for Single-Room Occupancy Dwellings.*<sup>25</sup>
- *Supportive Services, Which Include Health Assessments, Counseling for Those with Addictions to Drugs and Alcohol, Nutritional Assistance, Assistance with Daily Living, Day Care, and Assistance in Applying for Other Government Benefits.*<sup>26</sup>

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<sup>20</sup> 42 U.S.C. §12910.

<sup>21</sup> 42 U.S.C. §12907.

<sup>22</sup> HOWPA funds may only be used for construction of community residences and single-room occupancy dwellings. See 24 C.F.R. §574.300(b)(4).

<sup>23</sup> 42 U.S.C. §12908.

<sup>24</sup> See 24 C.F.R. §574.310(d).

<sup>25</sup> 42 U.S.C. §12909.

<sup>26</sup> 24 C.F.R. §574.300(b)(7).

- *Housing Information Such as Counseling and Referral Services.*<sup>27</sup> Assistance may include fair housing counseling for those experiencing discrimination.<sup>28</sup>

The majority of HOPWA funds are used to provide housing. According to recent HUD data, 66% of HOPWA funds support housing activities.<sup>29</sup> Grantee performance reports indicate that clients who receive housing assistance through HOPWA are often at the lowest income levels; in its FY2008 Annual Performance Plan, HUD estimated that 81% of households served have either extremely-low incomes (at or below 30% of area median income) or very-low incomes (at or below 50% of area median income).<sup>30</sup>

## HOPWA Program Formula and Funding

### The HOPWA Formula

The HOPWA method for allocating formula funds has been an ongoing issue because the cumulative number of AIDS cases — including those who have died — is used to distribute funds. A 2006 Government Accountability Office (GAO) report found that the cumulative measure resulted in disproportionate funding per living AIDS case, depending on the jurisdiction. In 2004, the amount of money grantees received per living AIDS case ranged from \$387 per person to \$1,290.<sup>31</sup> If only living AIDS cases were counted, 92 of 117 grantees would have received more formula funding, while 25 would have received less.<sup>32</sup>

In FY2008 and FY2007, the President's budget stated that the Administration would submit a legislative proposal to Congress to change the way in which HOPWA funds are distributed. The FY2008 budget stated that "[w]hereas the current formula distributes formula grant resources by the cumulative number of AIDS cases, the revised formula will account for the present number of people living with AIDS as well as the housing costs in each jurisdiction." The President's FY2007 budget contained identical language. HUD's budget justifications for FY2008 elaborated somewhat on the Administration's proposal to change the HOPWA distribution

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<sup>27</sup> 42 U.S.C. §12906.

<sup>28</sup> 24 C.F.R. §574.300(b)(1).

<sup>29</sup> U.S. Department of Housing and Urban Development, *Housing Opportunities for Persons with AIDS Fact Sheet*, November 2006, p. 2, available at [<http://www.hud.gov/offices/cpd/aidshousing/library/factsheet2006.pdf>].

<sup>30</sup> U.S. Department of Housing and Urban Development, *Annual Performance Plan FY2008*, September 2007, p. 48, available at [<http://www.hud.gov/offices/cfo/reports/pdfs/app2008.pdf>].

<sup>31</sup> U.S. Government Accountability Office, *Changes Needed to Improve the Distribution of Ryan White CARE Act and Housing Funds*, GAO-06-332, February 2006, p. 23, available at [<http://www.gao.gov/new.items/d06332.pdf>].

<sup>32</sup> *Ibid.*, p. 24.

formula. HUD's explanation indicated that a new formula would use the number of persons living with AIDS, and that eventually, when consistent data on the number of persons living with HIV become available, that measure might also be used in determining the distribution of HOPWA funding.<sup>33</sup>

Discussions regarding the HOPWA formula and its use of cumulative AIDS cases to distribute funds are not new. In 1997, GAO released a report regarding the performance of the HOPWA program in which it recommended that HUD look at recent changes to the Ryan White CARE Act formula to "determine what legislative revisions are needed to make the HOPWA formula more reflective of current AIDS cases...."<sup>34</sup> (At the time of the GAO report, Congress had recently changed the CARE Act formula to use estimates of persons living with AIDS instead of cumulative AIDS cases.<sup>35</sup>) In response to the GAO report, the House Appropriations Committee included the GAO language in its report accompanying the FY1998 HUD Appropriations Act (P.L. 105-65) and directed HUD to make recommendations to Congress about its findings regarding an update to the formula.<sup>36</sup>

In response to the FY1998 Appropriations Act, HUD then issued a report to Congress in 1999 that proposed changes that could be made to the HOPWA formula.<sup>37</sup> The proposed formula in HUD's 1999 report would have used an estimate of persons living with AIDS (instead of all cumulative AIDS cases), together with housing costs, to distribute formula funds. It also would have included a protection for existing grantees. Those recommendations were not adopted by Congress.

No legislation to change the HOPWA formula has been introduced in the 110<sup>th</sup> Congress. In the 109<sup>th</sup> Congress, two bills (S. 2339 and H.R. 5009) would have changed the way that HOPWA formula funds are allocated by counting the number of "reported living cases of HIV disease" instead of cumulative AIDS cases. This change would have been phased in during FY2007 and FY2008 and fully implemented in FY2009. The two bills also provided that not less than 75% of formula funds would be used for housing assistance. Neither bill was enacted.

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<sup>33</sup> U.S. Department of Housing and Urban Development FY2008 Congressional Budget Justifications, Housing Opportunities for Persons with AIDS, p. S-2, available at [<http://www.hud.gov/offices/cfo/reports/2008/cjs/part1/cpd/hopwa.pdf>].

<sup>34</sup> U.S. Government Accountability Office, *HUD's Program for Persons with AIDS*, GAO/RCED-97-62, March 1997, p. 27, available at [<http://www.gao.gov/archive/1997/rc97062.pdf>].

<sup>35</sup> Ryan White CARE Act Amendments of 1996, P.L. 104-146.

<sup>36</sup> See H.Rept. 105-175 to accompany H.R. 2158 (P.L. 105-65).

<sup>37</sup> U.S. Department of Housing and Urban Development, *1999 Report on the Performance of the Housing Opportunities for Persons with AIDS Program*, October 6, 1999 (hereafter *1999 HUD Report*).

## HOPWA Funding

As a result of advances in medical science and in the care and treatment of persons living with HIV and AIDS, persons are living longer with the diseases.<sup>38</sup> Program proponents point out that stable housing is critical to the success of the drug regimen necessary to control the illness. The medications, which are usually very expensive, must often be refrigerated and taken on a rigid time schedule. These factors have increased the demand for adequate housing and supportive services, especially for low-income individuals and their families.

As the number of those with AIDS grows, so do the jurisdictions that qualify for formula-based HOPWA funds. Since 1999, there has been a steady increase in the number of jurisdictions that meet the eligibility test to receive formula-based HOPWA funds. Funding for the HOPWA program has increased in almost every year since the program was created, eventually reaching \$295 million in FY2004, before declining to \$282 million in FY2005. (See **Table 1.**) In FY2006 and FY2007, funding increased by 1.52% over FY2005, to \$286 million, but still remained below the FY2004 funding level. In FY2008, Congress appropriated \$300 million for HOPWA in the Consolidated Appropriations Act (P.L. 110-161), an increase of almost 5% more than the FY2007 funding level, and the most ever appropriated for the program.

The number of households receiving HOPWA housing assistance (including short term housing assistance, housing provided through community residences, or rental assistance in permanent housing) declined from FY2003 through FY2006. (See **Table 1.**) In FY2003, 78,467 households were served; in FY2004, this number dropped to 70,779. The number of households served continued to fall in FY2005 (67,012 households), and in FY2006 (67,000 households).<sup>39</sup> Although the number increased in FY2007 to 67,850,<sup>40</sup> the number of households assisted still remained below earlier levels in FY2001 through FY2004. These general reductions in households served could be due to a number of factors, including the growth in jurisdictions eligible for HOPWA grants, the amount of available funds, and housing costs.

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<sup>38</sup> CDC data indicate a steady rate of growth in the number of people living with AIDS. For example, in 1993 there were 173,772 people reportedly living with AIDS; in 2005 there were 433,760 people reportedly living with AIDS. See Centers for Disease Control and Prevention, *HIV/AIDS Surveillance Report*, Revised June 2007, p. 21, Table 10, available at [<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2005report/pdf/2005SurveillanceReport.pdf>].

<sup>39</sup> U.S. Department of Housing and Urban Development, *FY2006 Performance and Accountability Report*, November 15, 2006, p. 136, available at [<http://www.hud.gov/offices/cfo/reports/2006/2006par.pdf>].

<sup>40</sup> U.S. Department of Housing and Urban Development, *FY2007 Performance and Accountability Report*, November 15, 2007, pp. 167-168, available at [<http://www.hud.gov/offices/cfo/reports/2007/2007par.pdf>].

**Table 1. HOPWA Funding and Eligible Jurisdictions,  
FY2001-FY2008**

<b>Fiscal Year</b>	<b>Number of Qualifying Jurisdictions</b>	<b>Households Receiving Housing Assistance<sup>a</sup></b>	<b>Funding (thousands of dollars)</b>
2001	105	72,117	257,432
2002	108	74,964	277,423
2003	111	78,467	290,102
2004	117	70,779	294,751
2005	121	67,012	281,728
2006	122	67,000	286,110
2007	122	67,850	286,110
2008	—	—	300,100

**Source:** Table prepared by the Congressional Research Service based on data from the Department of Housing and Urban Development budget justifications (number of qualifying jurisdictions and funding levels), FY2004, FY2006, and FY2007 Performance and Accountability Reports (number of households assisted), and appropriations legislation (FY2008 funding). For a breakdown of formula funding by jurisdiction, see **Appendix A**.

- a. Housing assistance includes short-term assistance with rent, mortgage or utilities, residence in short-term housing facilities, housing provided through community residences and single room occupancy dwellings, and rental assistance for permanent supportive housing.

## Appendix A. HOPWA Formula Allocations, FY2004-FY2007

**Table A-1. HOPWA Formula Allocations, FY2004-FY2007**

MSA, State, or Territory	FY2004	FY2005	FY2006	FY2007
Alabama State Program	1,139,000	1,117,000	1,145,000	1,163,000
Birmingham	520,000	497,000	511,000	516,000
Arkansas State Program	752,000	723,000	707,000	720,000
Arizona State Program	164,000	164,000	173,000	180,000
Phoenix	1,434,000	1,391,000	1,433,000	1,456,000
Tucson	402,000	390,000	389,000	390,000
California State Program	3,042,000	2,869,000	2,929,000	2,926,000
Los Angeles	10,476,000	11,848,000	10,310,000	10,393,000
Oakland	2,006,000	1,879,000	1,905,000	1,896,000
Riverside	1,772,000	1,683,000	1,684,000	1,689,000
Sacramento	844,000	795,000	786,000	784,000
San Diego	2,683,000	2,527,000	2,549,000	2,551,000
San Francisco	8,562,000	8,466,000	8,070,000	8,189,000
San Jose	792,000	736,000	738,000	739,000
Santa Anna	1,436,000	1,342,000	1,359,000	1,345,000
Colorado State Program	366,000	354,000	364,000	363,000
Denver	1,424,000	1,342,000	1,359,000	1,361,000
Connecticut State Program	251,000	242,000	253,000	252,000
Bridgeport	779,000	717,000	737,000	739,000
Hartford	1,023,000	1,285,000	1,108,000	1,098,000
New Haven	1,232,000	1,624,000	1,178,000	1,075,000
Washington, DC	11,802,000	10,535,000	11,370,000	11,118,000
Delaware State Program	164,000	162,000	166,000	167,000
Wilmington <sup>a</sup>	798,000	703,000	679,000	552,000
Florida State Program	4,063,000	3,581,000	3,312,000	3,316,000
Cape Coral <sup>b</sup>	—	—	336,000	332,000
Fort Lauderdale	6,240,000	6,106,000	6,637,000	6,878,000
Jacksonville	1,564,000	1,624,000	1,587,000	1,630,000
Lakeland <sup>b</sup>	—	378,000	445,000	418,000
Miami	10,715,000	10,351,000	11,189,000	11,689,000
Orlando	3,189,000	2,871,000	2,906,000	2,895,000
Sarasota	397,000	548,000	390,000	391,000
Tampa	2,389,000	3,049,000	2,542,000	2,772,000
West Palm Beach	3,836,000	3,426,000	3,595,000	3,235,000
Georgia State Program	1,515,000	1,527,000	1,576,000	1,621,000
Atlanta	4,899,000	6,592,000	5,290,000	6,801,000
Augusta	373,000	418,000	376,000	394,000
Hawaii State Program	181,000	169,000	162,000	160,000
Honolulu	452,000	428,000	429,000	419,000
Iowa State Program	347,000	329,000	330,000	336,000
Illinois State Program	864,000	827,000	875,000	875,000
Chicago	8,338,000	5,379,000	5,561,000	5,572,000
Indiana State Program	836,000	806,000	818,000	822,000
Indianapolis	759,000	738,000	751,000	752,000
Kansas State Program	363,000	349,000	331,000	332,000
Kentucky State Program	423,000	407,000	410,000	408,000
Louisville	462,000	443,000	447,000	453,000

MSA, State, or Territory	FY2004	FY2005	FY2006	FY2007
Louisiana State Program	940,000	932,000	951,000	975,000
Baton Rouge	1,813,000	1,659,000	1,572,000	1,409,000
New Orleans	2,992,000	3,398,000	2,997,000	2,914,000
Massachusetts State Program	525,000	178,000	168,000	166,000
Boston	1,829,000	1,721,000	1,719,000	1,690,000
Lowell	659,000	623,000	627,000	622,000
Lynn	—	316,000	317,000	312,000
Springfield	461,000	433,000	424,000	418,000
Worcester	369,000	348,000	354,000	349,000
Maryland State Program	345,000	335,000	348,000	345,000
Baltimore	7,936,000	7,754,000	7,649,000	8,038,000
Frederick <sup>c</sup>	535,000	518,000	524,000	539,000
Michigan State Program	911,000	862,000	877,000	893,000
Detroit	1,979,000	1,554,000	1,597,000	1,640,000
Warren	405,000	392,000	397,000	409,000
Minnesota State Program	110,000	105,000	112,000	114,000
Minneapolis	839,000	797,000	829,000	833,000
Missouri State Program	496,000	475,000	455,000	450,000
Kansas City	978,000	924,000	918,000	918,000
St. Louis	1,217,000	1,158,000	1,150,000	1,140,000
Mississippi State Program	756,000	749,000	778,000	783,000
Jackson	724,000	998,000	868,000	899,000
North Carolina Program	2,082,000	2,010,000	2,097,000	2,154,000
Charlotte	571,000	565,000	597,000	626,000
Wake County	352,000	337,000	366,000	382,000
New Jersey State Program <sup>a</sup>	1,106,000	1,050,000	1,064,000	1,056,000
Camden	657,000	628,000	620,000	610,000
Jersey City	—	2,240,000	2,545,000	2,443,000
Newark	5,182,000	5,014,000	5,246,000	4,924,000
Paterson	—	1,265,000	1,282,000	1,250,000
Woodbridge	1,462,000	1,366,000	1,375,000	1,351,000
New Mexico State Program	533,000	503,000	514,000	514,000
Nevada State Program	238,000	219,000	219,000	219,000
Las Vegas	916,000	886,000	882,000	897,000
New York State Program	1,776,000	1,702,000	1,797,000	1,809,000
Albany	429,000	415,000	436,000	439,000
Buffalo	472,000	456,000	480,000	480,000
Islip	1,660,000	1,565,000	1,617,000	1,608,000
New York City	60,355,000	47,056,000	56,610,000	54,723,000
Poughkeepsie	604,000	577,000	679,000	812,000
Rochester	597,000	575,000	599,000	605,000
Ohio State Program	1,041,000	1,024,000	1,037,000	1,051,000
Cincinnati	550,000	517,000	518,000	530,000
Cleveland	854,000	822,000	826,000	840,000
Columbus	584,000	584,000	596,000	608,000
Oklahoma State Program	518,000	494,000	498,000	506,000
Oklahoma City	466,000	441,000	435,000	437,000
Oregon State Program	—	321,000	319,000	317,000
Portland	1,006,000	949,000	947,000	943,000
Pennsylvania State Program	1,540,000	1,511,000	1,548,000	1,527,000
Philadelphia	7,632,000	7,336,000	7,083,000	6,650,000
Pittsburgh	626,000	620,000	623,000	619,000
Puerto Rico State Program	1,748,000	1,636,000	1,633,000	1,616,000

MSA, State, or Territory	FY2004	FY2005	FY2006	FY2007
San Juan	7,140,000	5,324,000	5,874,000	5,632,000
Providence	807,000	764,000	776,000	773,000
South Carolina State Program	1,387,000	1,356,000	1,387,000	1,403,000
Charleston	418,000	390,000	397,000	401,000
Columbia	1,270,000	1,160,000	1,041,000	1,034,000
Tennessee State Program	739,000	718,000	747,000	756,000
Memphis	2,134,000	1,462,000	1,882,000	1,879,000
Nashville	737,000	840,000	737,000	757,000
Texas State Program	2,736,000	2,634,000	2,691,000	2,733,000
Austin	988,000	931,000	940,000	947,000
Dallas	3,192,000	3,867,000	3,141,000	3,134,000
Fort Worth	835,000	805,000	813,000	819,000
Houston	5,068,000	9,669,000	6,039,000	6,579,000
San Antonio	1,027,000	960,000	971,000	972,000
Utah State Program	120,000	111,000	112,000	111,000
Salt Lake City	386,000	354,000	353,000	346,000
Virginia State Program	640,000	612,000	618,000	615,000
Richmond	692,000	658,000	665,000	660,000
Virginia Beach	1,022,000	958,000	941,000	937,000
Washington State Program	652,000	619,000	620,000	622,000
Seattle	1,688,000	1,611,000	1,615,000	1,604,000
Wisconsin State Program	405,000	383,000	389,000	391,000
Milwaukee	512,000	487,000	497,000	492,000
— Subtotal formula grants	263,039,000	251,323,000	256,162,000	256,162,000
— Subtotal competitive grants	29,227,000	27,925,000	28,463,000	—
— Subtotal technical asst.	2,485,000	2,480,000	1,485,000	—
<b>Total HOPWA</b>	<b>294,751,000</b>	<b>281,728,000</b>	<b>286,110,000</b>	<b>286,110,000</b>

**Source:** U.S. Department of Housing and Urban Development, Office of Community Planning and Development, available at [<http://www.hud.gov/offices/cpd/about/budget/budget07/>].

- a. According to directions in the HUD Appropriations Act, funds awarded to the Wilmington MSA are transferred to the State of New Jersey to administer the HOPWA program for the one New Jersey county that is in the Wilmington MSA (Salem county).
- b. The State of Florida administers the grants for the Cape Coral and Lakeland MSAs.
- c. The State of Maryland administers the grant for the Bethesda-Frederick-Gaithersburg MSA.

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