
SENATE COMMITTEE ON PUBLIC SAFETY

Senator Nancy Skinner, Chair

2019 - 2020 Regular

Bill No: SB 282 **Hearing Date:** April 23, 2019
Author: Beall
Version: February 13, 2019
Urgency: No **Fiscal:** Yes
Consultant: SJ

Subject: *Supportive Housing for Parolees*

HISTORY

Source: Corporation for Support Housing
Housing California
Policy Link

Prior Legislation: SB 1010 (Beall), held in Assembly Appropriations in 2018
SB 1013 (Beall), held in Senate Appropriations in 2016

Support: Alliance for Boys and Men of Color; American Civil Liberties Union of California; Anti-Recidivism Coalition; California Council of Community Behavioral Health Agencies; California Housing Partnership; California Public Defenders Association; California YIMBY; Disability Rights California; Initiate Justice; Kings/Tulare Homeless Alliance; Legal Services for Prisoners with Children; Los Angeles Black Worker Center; Los Angeles Homeless Services Authority; National Association of Social Workers, California Chapter; Non-Profit Housing Association of Northern California; PATH; Root & Rebound; Steinberg Institute; 2 individuals

Opposition: None known

PURPOSE

The purpose of this bill is to create the Supportive Housing Program for Persons on Parole to replace the Integrated Services for Mentally Ill Parolees (ISMIP) program contingent upon the Department of Finance notifying the Joint Legislative Budget Committee that sufficient funding has been appropriated by the Legislature for that purpose.

Existing law authorizes the Department of Corrections and Rehabilitation (CDCR) to obtain day treatment, and to contract for crisis care services, for parolees with mental health problems. States that day treatment and crisis care services should be designed to reduce parolee recidivism. Requires CDCR to work with counties to obtain day treatment and crisis care services for parolees with the goal of extending the services upon completion of the offender's period of parole, if needed. (Pen. Code § 3073.)

Existing law defines "serious mental disorder" as a mental disorder that is severe in degree and persistent in duration, which may cause behavioral functioning which interferes substantially

with the primary activities of daily living, and which may result in an inability to maintain stable adjustment and independent functioning without treatment, support, and rehabilitation for a long or indefinite period of time. Serious mental disorders include, but are not limited to, schizophrenia, bipolar disorder, post-traumatic stress disorder, as well as major affective disorders or other severely disabling mental disorders. (Welf. & Inst. Code § 5600.3, subd. (b)(1).)

Existing law declares that it is the intent of the Legislature to provide evidence-based, comprehensive mental health and supportive services, including housing subsidies, to parolees who suffer from mental illness and are at risk of homelessness, in order to successfully reintegrate the parolees into the community, increase public safety, and reduce state costs of recidivism. Establishes the supportive housing program for mentally ill parolees who are at risk of homelessness. (Pen. Code § 2985 et seq.)

Existing federal law defines “homeless” as follows:

- An individual or family who lacks a fixed, regular, and adequate nighttime residence;
- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements;
- An individual who resided in a shelter or place not meant for human habitation and who is exiting an institution where he or she temporarily resided;
- An individual or family who will imminently lose their primary nighttime residence, provided that:
 - The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
 - No subsequent residence has been identified; and,
 - The individual or family lacks the resources or support networks needed to obtain other permanent housing;
- Unaccompanied youth and homeless families with children and youth defined as homeless under other federal statutes who:
 - Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
 - Have experienced persistent instability as measured by frequent moves during the 60-day period immediately preceding the date of applying for homeless assistance; and,
 - Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse, the presence of a child or youth with a disability, or multiple barriers to employment.
- Any individual or family who:
 - Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in the individual’s or family’s current housing situation, including where the health and safety of children are jeopardized;

- Has no other residence; and,
- Lacks the resources or support networks to obtain other permanent housing.

(42 U.S.C. § 11302.)

This bill includes the following legislative findings and declarations:

- People on parole are seven times more likely to recidivate when homeless than when housed.
- Evidence shows that supportive housing, or housing that is affordable to people on parole living in extreme poverty that does not limit the length of stay and offers tenants services promoting housing stability, reduces recidivism and improves the tenant’s ability to recover from mental illness.
- The Legislature passed, and the Governor signed, Senate Bill 1021 in 2012, which included direction to CDCR to provide a supportive housing program for people on parole experiencing mental illness and homelessness. The program was intended to use funds budgeted for the Integrated Services for Mentally Ill Parolees (ISMIP) program to provide supportive housing, in accordance with Senate Bill 1021. Funds have not been used for their legislatively intended purposes to create supportive housing for people experiencing homelessness while on parole.
- In 2017, the University of California, Los Angeles, completed an evaluation of the ISMIP program and found that there were not significant reductions in recidivism among ISMIP participants, as compared to other persons who did not participate in the ISMIP program.
- It is the intent of the Legislature to strengthen programs for our most vulnerable people on parole to promote evidence-based, wraparound services, including rental subsidies, in an amount adequate to allow mentally ill parolees experiencing homelessness, or at risk of experiencing homelessness upon release from prison, to obtain and maintain housing stability during and after the term of parole, thereby reducing recidivism among those with a history of homelessness. The Department of Housing and Community Development, with its expertise in overseeing grant programs for housing and services, and counties with experience providing housing and services to people being released from incarceration, are appropriate entities to administer programs offering evidence-based housing and services interventions to people on parole experiencing homelessness.

This bill includes the following definitions:

- “Applicant” means a county that has applied to receive funds under the program.
- “Chronically homeless” has the same meaning as it does in federal regulations, and also includes people who were chronically homeless before entering an institution upon discharge from that institution, regardless of the length of institutional stay.
- “Continuum of care” has the same meaning as that term is defined in federal regulations.
- “County” includes a city and county or a city that is working with one or more counties to apply for grant funds.
- “Department” means the Department of Housing and Community Development (HCD), unless otherwise identified.
- “Fair market rent” means the rent, including the cost of utilities, other than the telephone, as established by the U.S. Department of Housing and Urban Development (HUD), for units of varying sizes, as determined by the number of bedrooms, that is paid in the

market area to rent privately owned, existing, decent, safe, and sanitary rental housing of a modest nature with suitable amenities.

- “Homeless” has the same meaning as in federal regulations. A person who is being released from prison who was homeless before their incarceration and who does not have an identified residence upon release is also “homeless.”
- “Homeless services provider” means an organization that qualifies as an exempt organization under Section 501(c)(3) of the Internal Revenue Code and that contracts with a participating county for the purpose of providing services to people experiencing homelessness.
- “Housing First” has the same meaning as in Welfare and Institutions Code Section 8255.
- “Housing navigation” means services provided prior to release or in the community that assist program participants with all of the following:
 - Locating permanent housing with private market landlords or property managers who are willing to accept rental assistance or operating subsidies for the program participants.
 - Assisting participants in obtaining local, state, or federal rental assistance or subsidies.
 - Completing housing applications for permanent housing and, when applicable, rental assistance or subsidies.
 - Move-in assistance.
 - Obtaining documentation needed to access permanent housing and rental assistance or subsidies.
- “Integrated Services for Mentally Ill Parolees program” or “ISMIP program” means the program of services provided in the Penal Code beginning with Section 2985.
- “Interim interventions” means housing that does not qualify as permanent housing, as defined, including, but not limited to, emergency shelters, motel vouchers, or navigation centers as defined under other federal, state, or local programs. All programs providing interim interventions funded pursuant to this chapter shall have partnerships or other links to homeless services to connect individuals and families to income, public benefits, health services, and permanent housing.
- “Likely to become homeless upon release” means the individual has a history of experiencing “homelessness” as that term is used in federal law and the individual satisfies either of the following criteria:
 - The person has not identified a fixed, regular, and adequate residence to occupy upon release.
 - The person’s only identified nighttime residence for release includes a supervised publicly or privately operated shelter designed to provide temporary living accommodations, or a public or private place not designed for, or is not ordinarily used as, a regular sleeping accommodation for human beings.
- “Likely to become homeless upon release” also includes a person who is being released from prison who was homeless prior to being incarcerated and who does not have an identified residence to occupy upon release.
- “Permanent housing” means a structure or set of structures with subsidized or unsubsidized rental housing units subject to applicable landlord-tenant law, without a limit on the length of stay and without a requirement to participate in supportive services as a condition of access to or continued occupancy of the housing. “Permanent housing” includes supportive housing.
- “Permanent supportive housing” means permanent housing without a limit on the length of stay that is linked to onsite or offsite services that assist the supportive housing

residents in retaining the housing, improving the participant's health status, and maximizing the participant's ability to live and, when possible, work in the community. "Permanent supportive housing" includes associated facilities if used to provide services to housing residents.

- "Program" means the Supportive Housing Program for Persons on Parole.
- "Rental assistance" means a rental subsidy provided to a housing provider, including a developer leasing affordable or supportive housing, to assist a tenant to pay the difference between 30 percent of the tenant's income and fair market rent or reasonable market rent as determined by the grant recipient and approved by the department.
- "Subrecipient" means a unit of local government or a private nonprofit or for-profit organization that the administrative entity determines is qualified to undertake the eligible activities for which the recipient seeks funds under the program, and that enters into a contract with the recipient to undertake those eligible activities in accordance with the requirements of the program.
- "Voluntary services" means services offered in conjunction with housing that is not contingent on participation in services, from which tenants are not evicted based on failure to participate in services, where the service provider engages the tenant to encourage the tenant to voluntarily participate in services using evidence-based engagement models, and services are flexible and tenant centered.

This bill establishes the Supportive Housing Program for Persons on Parole.

This bill requires that on or before January 1, 2021, both of the following occur:

- Requires CDCR to do both of the following:
 - Transfer to HCD all funds appropriated from the General Fund to the ISMIP program on an annual basis for purposes of funding the program.
 - Work with HCD to do both of the following:
 - Establish a process for referral of eligible participants into the program, including participants from the ISMIP program upon the repeal of the ISMIP program.
 - Collaborate to provide data regarding recidivism for evaluating the program that includes outcomes, costs, and recidivism among participants, pursuant to existing law.
- Requires HCD to do all of the following:
 - Create the program to provide grants to counties to fund permanent supportive housing and wraparound services to people on parole experiencing mental illness and homelessness or risk of homelessness upon release from prison, using funding currently used for the ISMIP program.
 - Issue guidelines establishing the grant program and a notice of funding availability or request for proposals for five-year renewable grants to counties. Applicants shall demonstrate all of the following:
 - A viable plan to provide permanent supportive housing with services based on evidence-based practices.
 - A viable plan to provide evidence-based mental health treatment and services to participants through the operating county Medi-Cal mental health program and, for participants ineligible for Medi-Cal, through another source of funding, so long as medically necessary.
 - A viable plan to meet reporting requirements, as described.

- Establish criteria to score counties applying for grant funds competitively. Scoring criteria shall include, but not be limited to, the following:
 - Need, which includes consideration of the number of individuals experiencing homelessness among people on parole, to the extent data is available.
 - The extent of coordination and collaboration between the applicant, the continuum of care covering the geographic area, and homeless service providers with a history of serving people reentering communities from incarceration, using Housing First core components.
 - The ability of the applicant or proposed subrecipient to administer or partner to administer funding.
 - The applicant's documented partnerships with affordable and supportive housing providers in the jurisdiction.
 - Demonstrated commitment to address the needs of people experiencing homelessness and recent incarceration through existing programs or programs planned to be implemented within 12 months.
 - Proposed use of funds, the extent to which those uses are evidence based, and the extent to which the proposed use will lead to overall reductions in homelessness and recidivism.
 - In counties overseeing housing authorities, the extent to which an applicant demonstrates housing authorities have eliminated or plan to eliminate restrictions against people with arrests or criminal convictions to access publicly funded housing subsidies, notwithstanding restrictions mandated by HUD.

This bill provides that a person on parole is eligible for participation in this program if all of the following are applicable:

- The person has a serious mental disorder, as defined.
- The individual voluntarily chooses to participate.
- Either of the following applies:
 - The individual has been assigned a date of release within 60 to 180 days and is likely to become homeless upon release.
 - The person is currently experiencing homelessness as a person on parole.

This bill provides that a participant shall continue to receive housing and services funded under the program after discharge from parole, so long as the participant needs this assistance.

This bill requires that an applicant use program funds for the following eligible activities:

- One or both of the following:
 - Rental assistance in an amount the applicant identifies, but no more than twice the fair market rent for the community in which the applicant is providing rental assistance.
 - Operating subsidies in new and existing affordable or supportive housing units, in an amount the applicant identifies, but no more than fair market rent for the community in which the project is located. Operating subsidies may include operating reserves.
- Incentives to landlords, including, but not limited to, security deposits and holding fees.

- Services to assist participants in accessing permanent supportive housing and to promote housing stability in supportive housing.
- If necessary, operating support for interim interventions.

This bill requires that homeless service providers offer voluntary services, in accordance with existing law, in conjunction with housing, to obtain and maintain health and housing stability while participants are on parole and after discharge from parole, so long as the participant needs the services or the grant period ends.

This bill requires that services be offered to participants in their home, or be made as easily accessible to participants as possible and shall include, but are not limited to, all of the following:

- Case management services.
- Parole discharge planning.
- Links to other services, such as vocational, educational, and employment services, as needed.
- Benefit entitlement application and appeal assistance, as needed.
- Transportation assistance to obtain services and health care needed.
- Assistance obtaining appropriate identification, as needed.
- Links to Medi-Cal-funded mental health treatment, substance use disorder treatment, and medical treatment, as medically necessary.

This bill provides that for participants identified prior to release from prison, upon the provider's receipt of referral and, in collaboration with the parole agent and, if appropriate, staff, the intake coordinator or case manager of the provider shall, when possible:

- Receive all prerelease assessments and discharge plans.
- Draft a plan for the participant's transition into supportive housing.
- Engage the participant to actively participate in services upon release on a voluntary basis.
- Assist in obtaining identification for the participant, if necessary.
- Assist in applying for any benefits for which the participant is eligible.

This bill requires that upon referral, the provider work to promote housing stability, using the core components of Housing First.

This bill requires providers to identify and locate supportive housing opportunities for participants prior to release from state prison or as quickly upon release from state prison as possible, or as quickly as possible when participants are identified during parole.

This bill requires that the housing identified satisfy all of the following:

- Tenants have rights and responsibilities of tenancy and are required to sign a lease with a landlord or property manager that complies with the core components of Housing First.
- The housing is located in an apartment building, townhouse, or single-family home, including rent-subsidized apartments leased in the open market or set aside within privately owned buildings, or affordable or supportive housing receiving a publicly funded subsidy.

- The housing is not subject to community care licensing requirements or is exempt from licensing.

This bill requires HCD to distribute funds by executing contracts with awarded entities that shall be for a term of five years, subject to renewal. Requires that any funds not expended for eligible activities after a contract has expired revert to HCD for use for the program.

This bill requires a recipient to submit to HCD an annual report on a form issued by the department, pertaining to the recipient's program or project selection process, contract expenditures, and progress toward meeting state and local goals, as demonstrated by the performance measures set forth in the application. Requires applicants to report the following data:

- The number of participants served.
- The types of services that were provided to program participants.
- The outcomes for participants, including the number who remain permanently housed, the number who ceased to participate in the program and the reason why, the number who returned to state prison or were incarcerated in county jails, the number of arrests among participants, and the number of days in jail or prison among participants, to the extent data are available.
- The number of participants who successfully completed parole.

This bill requires HCD to design an evaluation and hire an independent evaluator to assess outcomes from the program, which must include, but not be limited to, the following:

- The total number of parolees served and the type of interventions provided.
- The housing status of participants at 12, 24, and 36 months after entering the program, to the extent this data are available, including the number of participants remain in permanent housing.
- Recidivism among participants, including the number of arrests, days incarcerated, and incarceration in jail or prison.

This bill requires the recipient to report to HCD on the expenditures and activities of any subrecipients for each year of the term of the contract with the department until all funds awarded to a subrecipient have been expended as part of the annual report required.

This bill provides that HCD may monitor the expenditures and activities of the recipient, as the department deems necessary, to ensure compliance with program requirements.

This bill provides that HCD may, as it deems appropriate or necessary, request the repayment of funds from an administrative entity or pursue any other remedies available to it by law for failure to comply with program requirements.

This bill requires HCD to submit the evaluation, on or before February 1, 2024, to the chairs of the Joint Legislative Budget Committee, the Senate Committee on Budget and Fiscal Review, the Assembly Committee on Budget, the Senate and Assembly Committees on Public Safety, the Senate Committee on Transportation and Housing, and the Assembly Committee on Housing and Community Development.

This bill requires HCD to reimburse CDCR for the administrative costs of establishing and implementing a referral process for participants and for providing data needed to fulfill the requirements, as specified, of up to 2 percent of the total annual appropriation.

This bill provides that the language of this bill becomes operative upon a determination by the Department of Finance (DOF), in consultation with the Legislative Analyst's Office (LAO) that sufficient funding has been appropriated by the Legislature to HCD. Requires DOF to notify the Joint Legislative Budget Committee upon making a determination that sufficient funding has been appropriated.

This bill requires DOF, in consultation with the LAO, to conduct a study in order to make the determination that sufficient funding has been appropriated by the Legislature.

This bill provides that ISMIP is repealed once DOF has notified the Joint Legislative Budget Committee, as described.

COMMENTS

1. Need for This Bill

According to the author:

There is a strong link between incarceration and homelessness. People on parole who are homeless are seven times more likely to reoffend than those housed. This leads to a cycle of incarceration and homelessness. Stable housing reduces recidivism, strengthens our communities, and promotes equity.

Supportive housing is the combination of affordable housing that does not limit length of stay, and services that promote housing stability. It is an evidence-based intervention proven to reduce recidivism significantly.

The Legislature appropriated funding that led to the establishment of the Integrated Services for Mentally Ill Parolees (ISMIP) program in California's 2007-08 budget to address this pressing crisis. The program receives annual funding intended to provide supportive housing and intensive case management for homeless parolees with mental health needs, and the Governor's budget presents \$16 million in 2019-20 toward ISMIP.

As administered, the current program is not in line with the Legislature's intent. CDCR uses ISMIP funds to pay one-hundred percent of the cost of mental health treatment to a small number of parolees, instead of enrolling them into Medi-Cal where they can draw down a federal match of 50-90%. Additionally, only a small number of ISMIP participants are homeless, and the housing provided is temporary and not consistent with evidence-based housing practices.

A UCLA study found ISMIP fails to significantly reduce recidivism, and that participants receive only 10 months of mental health treatment on average, before dropping out of the program. SB 282 redirects ISMIP funding toward the Supportive Housing Program for Persons on Parole. It would do the following:

- Administer funds through the Department of Housing & Community Development (HCD) using evidence-based, culturally competent housing models;
- Require CDCR to refer parolees to the program created within HCD;
- Offer grants to counties working to break the cycle of incarceration and homelessness to fund supportive housing for people on parole with serious mental illness; and
- Require county grantees ensure participants can access mental health and substance use disorder treatment through Medi-Cal.

2. Integrated Services for Mentally Ill Parolees Program

AB 900 (Solorio), Chapter 7, Statutes of 2007, authorized CDCR to obtain day treatment and to contract for crisis care services for parolees with mental health problems in order to reduce recidivism. SB 1021 (Com. on Budget), Chapter 41, Statutes of 2012, expanded the ISMIP program. An analysis of SB 1021 described the program as “a supportive housing program that provides wraparound services to mentally ill parolees who are at risk of homelessness” and summarized the provisions of SB 1021 pertaining to the program as “improv[ing] the program by strengthening the housing component and prioritizing contracts with providers that can help provide a continuum of care after the offender is off of parole.” (Sen. Rules Com., Off. of Sen. Floor Analyses, Unfinished Business Analysis of Sen. Bill 1021 (2011-2012 Reg. Sess.), as amended Jun. 25, 2012, p. 4.) The Governor’s proposed 2019-2020 budget allocates \$16 million for day treatment and crisis care for the mentally ill. (Governor’s Budget 2019-2020, *Department of Corrections and Rehabilitation*, p. 21
<<http://www.ebudget.ca.gov/2019-20/pdf/GovernorsBudget/5210/5225.pdf>>

The proponents of this bill argue the ISMIP funds have not been used as the Legislature intended. Specifically, they assert that ISMIP funds have been used to serve a small number of parolees, and that the program is not focused on parolees who are homeless or at risk of homelessness.

This bill would redirect ISMIP funds to the Supportive Housing Program for Persons on Parole. CDCR would refer eligible parolees to the program, and the program’s funds would be administered by HCD as grants to the counties. The bill establishes the duties of HCD in creating and operationalizing the program, delineates eligibility criteria for participation in the program, specifies appropriate uses of program funds, and enumerates services that must be provided to program participants. The bill also includes various reporting requirements, evaluations, and monitoring of grant recipients for compliance with program requirements. Finally, the bill provides that its provisions are not operable until a determination by DOF, in consultation with the LAO, that sufficient funding has been appropriated by the Legislature to HCD, and upon making that determination, DOF is required to notify the Joint Legislative Budget Committee.

3. Research on the Importance of Stable Housing for Mentally Ill Parolees

A 2007 article in the *Journal of Contemporary Health Law and Policy* detailed the pervasive and difficult issues concerning mentally ill inmates and parolees in California:

Thousands of people with mental illness are currently serving terms in California prisons. These individuals receive inadequate medical and psychiatric care, serve longer terms than the average inmate, and are released without adequate preparation and support for their return to society. As a result, mentally ill offenders are more likely than general-population offenders to violate parole and return to prison.

(W. David Ball, *Mentally Ill Prisoners in the California Department of Corrections and Rehabilitation: Strategies for Improving Treatment and Reducing Recidivism*, p. 1 <<https://scholarship.law.edu/cgi/viewcontent.cgi?referer=&httpsredir=1&article=1106&context=jchlp>> [as of Apr. 17, 2019].) Since the article was published, the California Prison Healthcare Correctional Healthcare Services has overseen the expenditure of hundreds of millions of dollars to comply with federal court orders to reform the prison healthcare system, including serious problems with mental health treatment.

Although conditions in the state's prisons have improved since the article was published, the article's recommendations regarding wraparound services for mentally ill parolees upon release from prison continue to be relevant. The ISMIP and this bill appear to implement or require these recommendations:

If intake diagnoses prisoners' mental illnesses and the prison sentence treats them, release should prepare prisoners to treat their condition outside prison and, one hopes, avoid further incarceration. Recidivism can be reduced if re-entry is planned, if intervention is frontloaded, and if parole officers embrace the harm reduction principle (a public-health-oriented rather than criminal-justice-oriented approach to dealing with parole infractions). Investments in release programs should ultimately generate a virtuous cycle; when prisoner recidivism decreases, more resources are freed for treatment within the prison system and within non-penal mental health institutions.

The most effective post-release programs follow the integrated services model, concentrating on the period immediately following release and coordinating multiple services such as mental health, parole, therapeutic treatment for drug and alcohol addiction, housing, and employment. For example, prisoners about to be released should have an adequate supply of medication (at least seventy-two hours' worth), some form of housing, and contacts with a coordinated team of correctional and social services staff.

Such efforts will aid the recently-released prisoners as they enter parole, seek permanent housing, pursue job training and employment, enroll in drug and alcohol abuse counseling, and receive restored government benefits such as Temporary Aid to Needy Families, Medi-Cal, Medicaid, Social Security, and State and Social Security Disability Insurance.

(*Id.* at p. 22.)

The article additionally addressed positive outcomes that resulted from providing the mentally ill, including former inmates, with stable housing. Specifically, the article described the programs implemented through AB 2034 (Steinberg), Chapter 518, Statutes of 2000—a continuation of an earlier pilot project to provide grants to counties and cities for mental health

treatment of the homeless and those at risk of becoming homeless or incarcerated. Stable housing was shown to substantially reduce recidivism:

Over three years, participants in AB 2034 pilot programs reduced days spent in incarceration by 72.1% and the number of incarcerations by 45.9%. Participants' ability to secure housing was a foundation for successful treatment. What has become apparent to most providers and stakeholders is the therapeutic significance of having a stable place to live, and the foundation this provides for individuals' ability and desire to make progress in other aspects of their lives. (Internal quotation marks and citations have been omitted in the material quoted from the article.)

(Id. at 29-30.)

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