Testimony of
Coalition for the Homeless
And
The Legal Aid Society

On

Oversight – Part 2: Mental Health Services in the DHS Shelter System

Presented before

The New York City Council
Committee on General Welfare
Committee on Health

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Coalition for the Homeless and The Legal Aid Society welcome this opportunity to testify before the Committees on General Welfare and Health regarding mental health services in the DHS shelter system.

**Background: Homelessness in NYC**

New York City remains in the midst of the worst homelessness crisis since the Great Depression. In September 2016, an all-time record 61,931 men, women, and children slept in shelters each night on average. Over the past decade, homelessness among single adults has nearly doubled and family homelessness has increased by more than 80 percent.

Homeless individuals experience increased rates of severe mental illness compared with rates within the general population. A quarter of all homeless individuals suffer from severe mental illness, and rates are significantly higher for those that are chronically homeless. Among families, mothers experience extraordinarily high rates of depression and posttraumatic stress disorder. Homeless children also experience higher rates of emotional and behavioral problems than low-income children living in permanent housing. There are more individuals in homeless shelters with severe mental health needs than available placements in shelters augmented with onsite mental health services designed to assist them. The City and State must work together to correct this disparity.

![Number of Homeless People Each Night in the NYC Shelter System, 1983-2016](image-url)

*Source: NYC Department of Homeless Services and Human Resources Administration and NYCStat, shelter census reports*
The Legal Aid Society, on behalf of Coalition for the Homeless and the Center For Independence of the Disabled, New York (CIDNY), brought Butler v. City, a class action lawsuit on behalf of all disabled shelter residents, and they are in negotiations with the City to address these issues.

**Mental Health Services in DHS Shelter System and the Critical Need for Supportive Housing**

Most shelters are not equipped to handle the needs of individuals with severe mental illness. Without proper training and support shelter staff are often unaware of how to identify or respond to clients with psychiatric disabilities. Increasing security at mental health sites has been a common response to clients whose behavior may reflect symptoms and conflicts that arise between residents. This can create distance between residents and staff and may reduce the willingness of clients to stay at the shelter they require in order to remain stable and improve their well-being. Improved staff development and instruction could help staff use interventions to de-escalate or otherwise avoid conflict and engage clients in necessary services.

Accessing emergency psychiatric help, even for those that willingly request it, has also become more difficult recently as a result of the gatekeeping inherent in Medicaid redesign. Notable changes include more limited access to inpatient psychiatric care, shorter hospitalizations, and reduced access to preventative services such as well-trained intensive case management and ACT (Assertive Community Treatment) teams. For instance, we have seen clients wait for ACT team services as long as a year or more even for severely disabled individuals living in shelters or on the streets.

In addition, social and psychiatric respite services are not available to individuals who are not stably and permanently housed, leaving no avenue for emergency intervention for psychiatrically disabled homeless men and women. Expanding the availability of these services making them immediately available for those in crisis would better help people live in the least restrictive setting possible and ensure that they do not end up in temporary housing without access to the care they need.

Moreover, individuals are routinely discharged from hospitals to shelters without proper vetting for the appropriateness of the placement, placing them at risk for preventable re-hospitalization. Clients who have just been discharged from a hospital typically wait well into the night to find out if a bed will be available at their assigned shelter. Ultimately many are transferred to an entirely new facility – resulting in additional emotional trauma and disruption in the continuity of services. Premature discharges can lead to clients being denied shelter and turned away to the streets. As we have seen in some well-publicized incidents, improper or premature discharges can jeopardize the safety of the client and others within the shelter system, including other shelter residents and staff.

Improving critical access to community-based and inpatient mental health care will require the assistance of the State, which licenses both psychiatric facilities and Medicaid managed care plans, and is the architect of Medicaid redesign. The recent carve-in of behavioral health services into Medicaid managed care and the rollout of new Health and Recovery Plans (HARPs) provide
opportunities for better coordination of care but also create risk that vulnerable individuals will lose access to crucial services.

Of particular value for the long term is the proven solution of supportive housing, which provides stable, permanent housing with onsite support services for individuals and families in need of extra support such as those with serious mental illness and other disabilities. Supportive housing is the solution to the problem of chronic homelessness among those with mental illness. Those in supportive housing will be more likely to effectively navigate the changing Medicaid landscape.

Through the steadfast advocacy of hundreds of our partners in the Campaign 4 NY/NY Housing, including scores of elected officials and hundreds of faith leaders, we succeeded in winning promises from both Mayor de Blasio and Governor Cuomo to create a total of 35,000 units of supportive housing in the next fifteen years. The City is on track to open the first 500 units of supportive housing under the Mayor’s 15,000-unit commitment this year.

While the State has made some conditional awards for some of it units as well, there is a stalemate in Albany with respect to the release of the full $2 billion Governor Cuomo promised to fund the first 6,000 units of his commitment to build 20,000 units of supportive housing statewide. We continue to urge the Governor and legislative leaders to make good on this crucial promise.

We thank the Council for the opportunity to testify. We look forward to working together on our mutual goal of ending homelessness in New York City.
About Coalition for the Homeless and The Legal Aid Society

**Coalition for the Homeless:** Coalition for the Homeless, founded in 1981, is a not-for-profit advocacy and direct services organization that assists more than 3,500 homeless New Yorkers each day. The Coalition advocates for proven, cost-effective solutions to the crisis of modern homelessness, which is now in its fourth decade. The Coalition also protects the rights of homeless people through litigation involving the right to emergency shelter, the right to vote, and life-saving housing and services for homeless people living with mental illness and HIV/AIDS.

The Coalition operates 11 direct-services programs that offer vital services to homeless, at-risk, and low-income New Yorkers. These programs also demonstrate effective, long-term solutions and include: Supportive housing for families and individuals living with AIDS; job-training for homeless and formerly-homeless women; and permanent housing for formerly-homeless families and individuals. Our summer sleep-away camp and after-school program help hundreds of homeless children each year. The Coalition’s mobile soup kitchen distributes over 900 nutritious hot meals each night to homeless and hungry New Yorkers on the streets of Manhattan and the Bronx. Finally, our Crisis Intervention Department assists more than 1,000 homeless and at-risk households each month with eviction prevention, individual advocacy, referrals for shelter and emergency food programs, and assistance with public benefits as well as basic necessities such as diapers, formula, work uniforms, and money for medications and groceries.

The Coalition was founded in concert with landmark right to shelter litigation filed on behalf of homeless men and women (Callahan v. Carey and Eldredge v. Koch) and remains a plaintiff in these now consolidated cases. In 1981 the City and State entered into a consent decree in Callahan through which they agreed: “The City defendants shall provide shelter and board to each homeless man who applies for it provided that (a) the man meets the need standard to qualify for the home relief program established in New York State; or (b) the man by reason of physical, mental or social dysfunction is in need of temporary shelter.” The Eldredge case extended this legal requirement to homeless single women. The Callahan consent decree and the Eldredge case also guarantee basic standards for shelters for homeless men and women. Pursuant to the decree, the Coalition serves as court-appointed monitor of municipal shelters for homeless adults, and the City has also authorized the Coalition to monitor other facilities serving homeless families.

**The Legal Aid Society:** The Legal Aid Society, the nation’s oldest and largest not-for-profit legal services organization, is more than a law firm for clients who cannot afford to pay for counsel. It is an indispensable component of the legal, social, and economic fabric of New York City – passionately advocating for low-income individuals and families across a variety of civil, criminal and juvenile rights matters, while also fighting for legal reform.

The Legal Aid Society has performed this role in City, State and federal courts since 1876. It does so by capitalizing on the diverse expertise, experience, and capabilities of more than 1,100 lawyers, working with some 800 social workers, investigators, paralegals and support and administrative staff. Through a network of borough, neighborhood, and courthouse offices in 26
locations in New York City, the Society provides comprehensive legal services in all five boroughs of New York City for clients who cannot afford to pay for private counsel.

The Society’s legal program operates three major practices — Civil, Criminal and Juvenile Rights — and receives volunteer help from law firms, corporate law departments and expert consultants that is coordinated by the Society’s Pro Bono program. With its annual caseload of more than 300,000 legal matters, The Legal Aid Society takes on more cases for more clients than any other legal services organization in the United States. And it brings a depth and breadth of perspective that is unmatched in the legal profession.

The Legal Aid Society's unique value is an ability to go beyond any one case to create more equitable outcomes for individuals and broader, more powerful systemic change for society as a whole. In addition to the annual caseload of 300,000 individual cases and legal matters, the Society’s law reform representation for clients benefits more than 1.7 million low-income families and individuals in New York City and the landmark rulings in many of these cases have a State-wide and national impact.

The Legal Aid Society is counsel to the Coalition for the Homeless and for homeless women and men in the Callahan and Eldredge cases. The Legal Aid Society is also counsel in the McCain/Boston litigation in which a final judgment requires the provision of lawful shelter to homeless families.