



**TESTIMONY OF COALITION FOR THE HOMELESS
BEFORE THE NEW YORK STATE ASSEMBLY**

COMMITTEE ON SOCIAL SERVICES

Public Hearing, September 19, 2008

Submitted by
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Coalition for the Homeless

We present this testimony on behalf of Coalition for the Homeless, a not-for-profit organization that provides advocacy and services for over 3,000 homeless New Yorkers each day. Since its founding in 1981, the Coalition has advocated for proven, cost-effective solutions to the crisis of modern mass homelessness, which now continues into its third decade. The Coalition has also struggled for more than two decades to protect the rights of homeless people through litigation around the right to shelter, the right to vote, and appropriate housing and services for homeless people living with mental illness and HIV/AIDS.

The Coalition operates eleven direct-services programs that both offer vital services to homeless and formerly-homeless New Yorkers, and demonstrate effective long-term solutions. These programs include supportive housing for families and individuals living with AIDS, a job-training program for homeless and formerly-homeless women, a Rental Assistance Program which provides rent subsidies and support services to help homeless families and individuals rent private-market apartments, and two buildings in Manhattan which provide permanent housing for formerly-homeless families and individuals. In addition, the Coalition's food program provides more than 1,000 nutritious meals to street homeless New Yorkers each night, and our Crisis Intervention Program assists homeless and at-risk households with eviction prevention assistance, client advocacy, referrals for shelter and social services, and assistance with public benefits.

The Coalition also represents homeless men as plaintiffs in *Callahan v. Carey*. In 1981 the City and State entered into a consent decree in *Callahan* in which it was agreed that, "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 to physical, mental or social dysfunction is in need of temporary shelter." The *Callahan* consent decree also guarantees 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.

The City's Misguided Plan to Move the Homeless Men's Intake Center Out of Manhattan to Brooklyn

Since modern homelessness began in the late 1970s, the City of New York has always maintained an intake center for homeless men in Manhattan. The reason for this is simple: Manhattan has the highest concentration of street homelessness of the five boroughs, particularly in the midtown business district. And the large majority of street homeless New Yorkers are single men.

However, the Bloomberg administration has announced a misguided plan to move the homeless men's intake center outside of Manhattan to an armory located in the Crown Heights neighborhood of Brooklyn. This dangerous plan will inevitably lead to more street homelessness and may lead to more death and injury among street homeless New Yorkers.

Coalition for the Homeless urges Mayor Bloomberg and City officials to withdraw this misguided plan, and to commit to locating a homeless men's intake shelter in or near midtown Manhattan. We also urge the Mayor to revive his 2004 pledge – which he abandoned late last year – to enhance access to shelter by creating multiple intake sites for homeless men in Manhattan, Brooklyn, and the Bronx.

The Coalition also urges Governor Paterson and the New York State Office of Temporary and Disability Assistance to halt the City of New York's misguided plan to move the sole homeless men's intake center out of Manhattan.

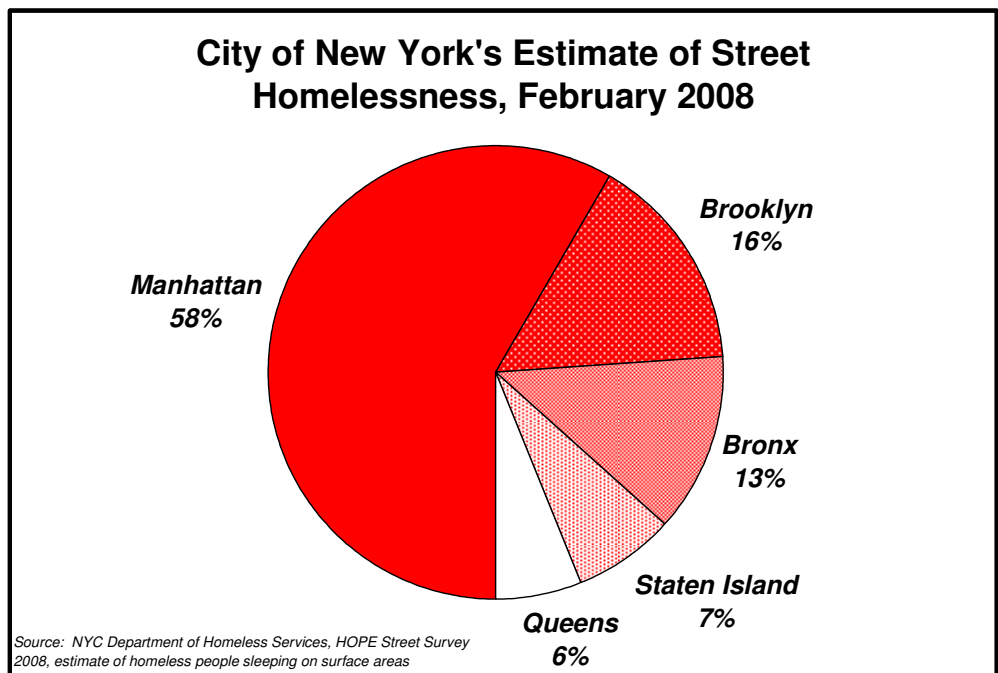
The City's dangerous plan will significantly reduce access to emergency shelter for vulnerable homeless men sleeping on our streets, and will inevitably lead to worsening street homelessness in Manhattan and other boroughs. We urge the State to halt the City's plan and to ensure that the "front door" of the adult shelter system is located in or near midtown Manhattan, where most street homelessness is concentrated.

Historical Background: The Front Door of the Shelter System

Since modern homelessness began in the late 1970s, the City of New York has always maintained an intake center for homeless men in Manhattan – first on East 3rd Street and the Bowery, and since 1984 at the Bellevue men's shelter on East 30th Street at First Avenue.

For the past decade, the men's intake center at the Bellevue shelter has been the only intake point for the municipal shelter system – it is, literally, the "front door" to the shelter system for homeless single men seeking shelter.

In FY 2007, 18,737 different homeless single men sought shelter, including 7,164 homeless single men who were new to the shelter system. Currently nearly 7,000 homeless single adults sleep each night in the municipal shelter system, including more than 5,000 homeless single men. According to Mayor Bloomberg's 2004 homeless plan, around one of every three homeless single adults in municipal shelters was street homeless immediately before seeking shelter.



On March 31, 2008, the New York City Economic Development Corporation announced plans to convert the Bellevue men's shelter into a luxury hotel and conference center; the City is currently seeking bids from developers. On April 25th, the Bloomberg administration told news reporters and some Brooklyn elected officials that it plans to move the men's intake center to the Bedford-Atlantic armory, a 350-bed shelter located in the Crown Heights neighborhood of Brooklyn, as soon as September of this year.

City officials told news reporters that there was no longer a need for a Manhattan intake center, and that street homeless people in Manhattan would be assisted by outreach teams or could call 311, the City's general service line. City officials also claimed that the current residents of the Bellevue shelter – around 600 men per night in April – would be relocated to housing, but offered no details about this plan.

The City's Misguided Plan: Concerns and Questions

The Bloomberg administration's plan is misguided and dangerous for numerous reasons. Most alarming, it threatens to move the "front door" of the shelter system to a location far from where most street homeless people reside, effectively reducing access to emergency shelter for some of the most vulnerable New Yorkers.

Following are some of the major concerns and questions surrounding the City's plan:

- Each night thousands of New Yorkers sleep rough on our streets, in our subway system, and in other public spaces. Research shows that the large majority of street homeless New Yorkers are individuals living with mental illness or other severe health problems. Four out of five street homeless New Yorkers are men.
- Homeless service providers, researchers, outreach teams, and advocates have long known that, like in other American cities, street homelessness is concentrated in the central business district of New York City – that is, midtown Manhattan. Even the City's controversial annual survey of street homeless people confirms this:
 - The New York City Department of Homeless Services' 2008 HOPE survey of street homelessness estimated that 58 percent of homeless people found on the streets were located in Manhattan.
 - The 2008 HOPE survey also estimated that the number of homeless people sleeping on Manhattan streets increased by 21 percent from 2007.
 - In contrast, the 2008 HOPE survey estimated that the street homeless found in Brooklyn made up 16 percent of all street homeless people.
- The Bellevue shelter's homeless men's intake center currently serves an average of 93 homeless men who are seeking shelter each day. In the winter months, the intake center typically serves over 100 homeless men seeking shelter each day. On January 3, 2008, the coldest night of this calendar year, 241 homeless men sought shelter at the Bellevue intake center.
- According to Mayor Bloomberg's 2004 homeless plan, "Uniting for Solutions Beyond Shelter," nearly one of every three homeless single adults seeking shelter in the municipal shelter system had last stayed on the streets, in a park, or in some other public space.
- The Bedford-Atlantic armory – which is located nearly nine miles from the current intake center – is a uniquely poor choice to become the new homeless men's intake center. The armory currently has a 350-bed men's shelter, directly operated by the Department of Homeless Services, which has perhaps the worst reputation of any men's shelter in the city. Many homeless men avoid the Bedford-Atlantic shelter because of its forbidding reputation and poor services.
- Mayor Bloomberg's 2004 homeless plan, "Uniting for Solutions Beyond Shelter," included a commitment to "decentralize men's intake" by creating "three smaller intake centers...throughout the city to ease entry into the shelter system for single adult men." The plan stated that one of the drawbacks of having only one intake center located at the Bellevue shelter was that "its inaccessibility to men living on the streets in other boroughs discourages some homeless men from seeking shelter."
- However, in late 2007 the Bloomberg administration abandoned plans to decentralize homeless men's intake, and cancelled agreements with service providers to create intake sites in the Bronx, Brooklyn, and Manhattan.
- The City also currently operates 11 drop-in centers for street homeless people. These centers offer social services and limited access to overnight shelter in churches and synagogues.

- Nevertheless, Mayor Bloomberg's FY 2009 executive budget includes a cut of \$16.9 million in funding for drop-in centers. The Department of Homeless Services has closed two of the 11 drop-in centers this year, one on the upper east side of Manhattan and one in downtown Brooklyn. And City officials have discussed plans eventually to close all of the drop-in centers.
- City officials have told service providers that "safe haven" shelters – which are low-demand shelters targeted to chronically street homeless adults living with mental illness – will take the place of drop-in centers. However, while drop-in centers and church and synagogues served an average of 1,316 people each night in FY 2007, the Department of Homeless Services plans to have only 500 "safe haven" beds by the end of this year, and not all street homeless people will be able to access those beds.
- All in all, the Bloomberg administration's current plans threaten to severely diminish access to emergency shelter for homeless New Yorkers. And the Mayor's FY 2009 budget does not include resources to significantly expand permanent supportive housing resources for street homeless adults (i.e., so-called "housing first" units) nor to expand outreach services.
- In addition, the City has not offered details about what will happen to the current residents of the Bellevue shelter. The shelter, which is the largest in Manhattan, has 850 beds with more than 130 beds designated for homeless men living with special needs (including mental illness or tuberculosis). Most of the residents are older men, and currently around 600 men reside in the shelter each night. The shelter system does not currently have excess capacity to serve these men.
- Finally, the Bellevue shelter is also the site of the Adult Family Intake Center, the sole intake facility for homeless couples and other homeless families without minor children. To date the City has offered no plans for re-locating this intake facility.

Fact-checking Bloomberg Administration Claims about its Misguided Homeless Intake Plan

Since the Bloomberg administration unveiled its misguided plan to move New York City's only intake center for homeless men out of midtown Manhattan (where most street homelessness is concentrated) to the Crown Heights neighborhood of Brooklyn, administration officials have made a series of inaccurate and misleading claims about the plan and about the City's approach to street homelessness.

Here we address the administration's inaccurate statements to the news media and to City and State officials, and cite City data and policies to contradict those claims.

1. Homeless intake centers are "outmoded" and unnecessary?

THE ADMINISTRATION'S CLAIMS: On May 8th, New York City Department of Homeless Services Commissioner Robert Hess told columnist Errol Louis of the *New York Daily News*, "We don't need the big, centralized intake centers of the past." City officials also told local elected officials that the intake center was "outmoded" and no longer necessary.

THE FACTS: City data absolutely contradicts these assertions.

As the attached spreadsheet shows, each night dozens of homeless men seek shelter at the current intake center, which is located at the Bellevue shelter in midtown Manhattan. Each month this year, there were more than 2,400 walk-ins by homeless men at the Bellevue intake center.

Here are some highlights from the City's homeless intake data for 2008:

- In the first four months of this year, there have been more than 11,000 walk-ins by homeless men at the Bellevue intake center, including nearly 3,000 homeless men who were new to the municipal shelter system.

- In the first four months of this year, an average of 93 homeless men sought shelter at the Bellevue intake center each night.
- In January, an average of 106 homeless men sought shelter each night at the Bellevue intake center, while there were a total of 2,873 walk-ins during the month.
- On the frigid night of January 3rd, 241 homeless men sought shelter at the Bellevue intake center, the highest number recorded this year. On that same night, according to the National Weather Service, the temperature in NYC dropped to 12 degrees Fahrenheit, the coldest night of this calendar year. Thus, on a night when temperatures were below freezing, the intake center was a vital lifeline to emergency shelter for more than 200 homeless men.

In addition, according to data included in Mayor Bloomberg's 2004 homeless plan, "Uniting for Solutions Beyond Shelter" (available on the Department of Homeless Services website), nearly one of every three homeless single adults in the municipal shelter system entered shelter directly from the streets – clearly contradicting Bloomberg administration officials' claims that street homeless people do not use the intake center.

The City's data clearly demonstrates that the intake center serves thousands of homeless men each year, and that many of them seek shelter directly from the streets. The intake center plays an especially vital role in the cold winter months by providing ready access to emergency shelter.

The City's data also proves what service providers and advocates have long known: A fundamental principle of assisting street homeless people is to make shelter accessible and readily available. The Bellevue intake center fulfills this purpose due to its central location in Manhattan where, City data show, 58 percent of street homeless people are located. The Bedford-Atlantic armory in Crown Heights, where the Bloomberg administration plans to move the intake center, is nearly nine miles away, is far less accessible, and has a well-deserved reputation for being unsafe and poorly managed.

2. "Safe havens" and outreach make homeless intake centers and drop-in centers obsolete?

THE ADMINISTRATION'S CLAIMS: On May 8th, Department of Homeless Services Commissioner Hess told NY1 news, "We've really transformed all of our outreach efforts. So that people living on the streets would not have to come into a central point, but would get access to housing directly from the street in safe havens and stabilization beds, without having to go through a lot of bureaucracy or having to go through a big central intake facility." On April 26th, the *New York Daily News* reported, "Homeless Commissioner Rob Hess said the Bellevue closing would be good news, made possible because outreach teams have moved 500 people off the streets since September..."

City officials also told elected officials and community groups that there was no need for an intake center in Manhattan because outreach teams and "safe havens" would address street homelessness in that borough. City officials also used that rationale to defend the planned closing this June of the Neighborhood Coalition for Shelter's acclaimed drop-in center on East 77th Street in Manhattan.

THE FACTS: The City's claims are entirely contradicted by the numbers and by its own policies.

With regards to "safe havens": "Safe havens" are shelter beds targeted to assist the hard-to-serve street homeless population. While they are certainly a positive addition to the City's homeless services system, they are in no way a substitute for intake centers and other accessible entry points to shelter – it is like saying a neighborhood health clinic is a substitute for a 24-hour hospital emergency room.

Currently there are approximately 200 "safe haven" shelter beds citywide, with an additional 300 more planned by the end of this calendar year. Given that "safe haven" beds have no limit on length of stay (meaning limited turnover), only a few hundred homeless adults (both men and women) will be served by "safe havens" each year.

As noted above, the Bellevue intake center serves thousands of homeless men each year, with more than 11,000 walk-ins by homeless men in the first four months of this year alone.

Homeless people cannot walk in to “safe havens” to access shelter – they must be placed there by City-contracted outreach teams and must meet certain eligibility criteria. Therefore, “safe havens” serve a completely different function than intake centers, which are like emergency rooms open to all people in need.

In addition, “safe havens” are restricted by the Department of Homeless Services to serving only “chronically” homeless street adults – that is, adults who have spent more than a year sleeping on the streets. According to the Department of Homeless Services’ request for proposals for “safe havens” (available on the City’s website), fewer than 50 percent of all street homeless adults are “chronically” homeless, meaning that “safe havens” cannot assist more than half of the street homeless population. In contrast, intake centers are open to all homeless individuals.

With regards to drop-in centers: Drop-in centers are social-service centers assisting street homeless people. Drop-in centers work closely with local churches and synagogues to provide overnight shelter beds (sometimes called “stabilization beds”) to street homeless adults. There are currently 11 drop-in centers citywide – seven in Manhattan, two in Brooklyn, one in Staten Island, and one in the Bronx.

Mayor Bloomberg’s FY 2009 executive budget proposal included a \$16.9 million cut in funding for drop-in centers. In June the City closed two of the 11 drop-in centers: the Neighborhood Coalition for Shelter’s drop-in center on East 77th Street in Manhattan, and the center in downtown Brooklyn. This will further diminish access to emergency shelter by reducing the number of entry points.

City officials have also informed service providers that they plan eventually to close all of the drop-in centers. However, once again, the numbers don’t add up. According to the Department of Homeless Services’ “Critical Activities Reports,” in FY 2007 the average daily census of drop-in centers was 1,316 homeless adults. During that same period, there were an average of 648 homeless adults sleeping each night in drop-in centers and 292 adults sleeping each night in church and synagogue shelter beds. (Those numbers were higher in the winter months when there is more demand for emergency shelter. In February 2007 there were an average of 676 homeless adults sleeping each night in drop-in centers, and 367 adults sleeping each night in church and synagogue beds.)

Thus, to close all drop-in centers, the City would have to address the nightly shelter needs of well over 1,000 homeless adults each night, far more than the number of “safe haven” beds planned. Moreover, the turnover in the population served by drop-in centers is much higher than that served by “safe havens.” For instance, in FY 2007 the Neighborhood Coalition for Shelter drop-in center served more than 800 different homeless people. In contrast, the Department of Homeless Services’ request for proposals for “safe havens” states that it expects a turnover goal of 40 percent of capacity for “safe haven” shelter beds – meaning that the planned 500 “safe haven” beds might serve a total of no more than 700 different homeless faults each year.

Finally, as noted above, “safe havens” are restricted to serving only “chronically” street homeless adults – drop-in centers, like intake centers, serve all street homeless adults.

With regards to outreach: A fundamental principle of homeless outreach is that it is only effective if outreach teams can place their homeless clients in accessible, safe shelter or other appropriate settings. Furthermore, particularly on cold winter nights, outreach teams are only effective if they can use their limited resources to find as many street homeless people as possible, and not waste time and effort trying to locate available beds or on long transports to distant intake centers and shelters. On winter nights, especially when temperatures are below freezing, this can be a matter of life and death for vulnerable homeless people on the streets.

There is simply no way that the City’s limited outreach resources can replace the need for a centrally located homeless men’s intake center. If (as the April 26th *Daily News* account above reports) the City moved 500 homeless people off the streets from September through April, this number is dwarfed by the thousands of

homeless men who sought shelter at the Bellevue intake center. As noted above, in the first four months of 2008 alone more there were more than 11,000 walk-ins by homeless men at the Bellevue intake center.

And despite the City's recent re-organization of homeless outreach, Mayor Bloomberg's FY 2009 executive budget proposal includes no new resources for the contracted outreach teams. Therefore, these contracted outreach service providers will have essentially the same resources they had in recent years.

In FY 2007, according to the Department of Homeless Services' "Critical Activities Reports," each month City-contracted outreach teams placed an average of 384 homeless adults in shelters, drop-in centers, or treatment programs. In contrast, as noted above, each month this year the Bellevue intake center has had more than 2,400 walk-ins by homeless men. It is therefore impossible to see how outreach teams, with limited resources, can serve as a substitute for a centrally-located, accessible intake center.

Moreover, if the Bloomberg administration is successful in moving the homeless men's intake center out of midtown Manhattan to the Bedford-Atlantic armory in Crown Heights, nearly nine miles away, outreach teams will be forced to waste extra time and effort transporting or assisting street homeless men from Manhattan or other boroughs. And many homeless men, particularly in Manhattan where street homelessness is concentrated, will refuse to be transported to Brooklyn and will remain on the streets.

Finally, like the "safe havens," the City-contracted outreach teams are restricted in which homeless people they can serve. Service providers report that Department of Homeless Services contracts with outreach service providers force them primarily serve the "chronically" street homeless population – and, as noted above, City data shows that the "chronically" homeless make up less than half of the street homeless population.

3. Is the City of New York genuinely adopting the acclaimed "housing first" approach?

THE ADMINISTRATION'S CLAIMS: On May 8th, WNYC radio reported, "The Department of Homeless Services says moving homeless men directly into apartments will cut out the need for intake." Bloomberg administration officials have told the news media and local elected officials that the City is adopting the acclaimed "housing first" approach to street homelessness.

THE FACTS: Once again, City data contradicts the claims of administration officials.

The acclaimed "housing first" approach to addressing street homelessness means moving street homeless individuals, primarily those living with mental illness and other health problems, into permanent supportive housing. The model, which was pioneered by local service providers, has a very high success rate and has been supported by homeless advocates nationwide.

However, while the City of New York has used the "housing first" approach in a limited way for many years, there is still no evidence that the City has significantly expanded permanent supportive housing resources beyond current commitments. Most of all, there is absolutely no evidence that there are sufficient "housing first" permanent supportive housing units to replace a centrally-located homeless intake center and/or drop-in centers.

The "New York/New York III Agreement," which the City and State entered into in 2005, commits to providing 9,000 supportive housing units over 10 years, or an average of 900 units each year. But many of those "New York/New York III" units are targeted for needy populations other than street homeless adults – for instance, homeless families and youth aging out of foster care. And nearly 2,000 of the 9,000 units are targeted to people who are not currently homeless – for instance, people exiting State psychiatric hospitals. Finally, fewer than half of all "New York/New York III" units are set aside for homeless individuals living with serious and persistent mental illness, which comprises the large majority of the street homeless population.

Furthermore, like the "safe havens" and outreach efforts, all "New York/New York" supportive housing units are now restricted to the "chronically" homeless – meaning, again, that more than half of the street homeless population is ineligible for this vital housing assistance.

Finally, the City's existing supply of permanent supportive housing is not allocated exclusively to street homeless people. Each year more than 20,000 different homeless single adults utilize the municipal shelter system, and many of them are in need of permanent supportive housing. Indeed, according to the Department of Homeless Services' "Critical Activities Reports," in FY 2007 the City placed 1,659 homeless single adults from the shelter system into permanent supportive housing.

To date City officials have failed to identify the number of "housing first" placements made in recent years or the number planned for the coming fiscal year. However, City officials have frequently confused the issue by referring to "safe haven" shelter beds as "housing first" placements. This is misleading, because the "housing first" approach specifically refers to permanent supportive housing, not to "safe haven" shelters which are temporary.

How Best to Serve Street Homeless New Yorkers

It is a fundamental principle of assisting street homeless people that shelter and services must be easily accessible and have few barriers to entry. Most important, on cold winter nights, when securing shelter is literally a matter of life and death, emergency shelter must be located near to street homeless people.

The Bloomberg administration's plan to move the "front door" of the men's shelter system far away from the area of the city with the highest concentration of street homelessness flies in the face of decades of experience and research about homelessness.

Coalition for the Homeless urges Mayor Bloomberg and City officials to withdraw this misguided plan, and to commit to locating the homeless men's intake center in or near midtown Manhattan. We urge the Mayor return to the commitment in his 2004 homeless plan to create multiple intake shelters for homeless men, including intake shelters in Manhattan, Brooklyn, and the Bronx. Finally, we urge the Mayor to dramatically expand investments in proven approaches to reducing street homelessness, including permanent supportive housing targeted to the street homeless population (i.e., "housing first" units).

The Coalition also urges Governor Paterson and the New York State Office of Temporary and Disability Assistance to halt the City of New York's misguided plan to move the sole homeless men's intake center out of Manhattan. State regulations require the operator of a shelter facing closure – in this case, the City of New York as the operator of the Bellevue shelter – to provide a plan to the State and to obtain State approval before taking any action to close the facility. In this instance it is not clear that the City has undertaken that obligation, and in any event we urge the State to withhold approval of the closure of the Bellevue shelter until the City commits to locate an intake shelter for homeless men in Manhattan.

The City's plan to move the "front door" of the men's shelter system far away from the area of the city with the highest concentration of street homelessness flies in the face of decades of experience and research about homelessness. We urge the State to put a halt to that plan and to work with City officials to ensure that there is an intake shelter for homeless men located in or near midtown Manhattan.

NYC Department of Homeless Services
Bellevue Homeless Men's Intake Center Activity, Jan-May 2008

(Source: NYC Department of Homeless Services, Intake and Vacancy Control Nightly Statistics)
 Prepared by Patrick Markee, Coalition for the Homeless, Tel 212-776-2004

CALENDAR YEAR 2008

	Total number of men seeking shelter and services	Number of homeless men new to shelter system	Number of homeless men out of system one year or more	Number of homeless men out of system less than one year
TOTAL (YTD)	11,575	2,909	2,634	6,032
JAN (TOTAL)	2,873	644	592	1,637
FEB (TOTAL)	2,845	684	632	1,529
MAR (TOTAL)	2,842	707	630	1,505
APR (TOTAL)	2,427	739	610	1,078
NIGHTLY AVERAGE (YTD)	93	23	21	49
JAN (AVG)	106	24	22	61
FEB (AVG)	98	24	22	53
MAR (AVG)	92	23	20	49
APR (AVG)	81	25	20	36
1-Jan	81	20	22	39
2-Jan	118	42	18	58
3-Jan	241	32	28	181
4-Jan	146	22	32	92
5-Jan	68	16	11	41
6-Jan	79	18	13	48
7-Jan	119	34	25	60
8-Jan	104	27	28	49
9-Jan	113	33	27	53
10-Jan	101	26	29	46
11-Jan	97	24	20	53
12-Jan	69	19	20	30
13-Jan	68	12	17	39
14-Jan	104	40	27	37
15-Jan	126	26	21	79
16-Jan	131	27	24	80
17-Jan	94	25	28	41
18-Jan	115	22	25	68
19-Jan	73	16	15	42
20-Jan	119	11	8	100
21-Jan	106	22	21	63

	Total number of men seeking shelter and services	Number of homeless men new to shelter system	Number of homeless men out of system one year or more	Number of homeless men out of system less than one year
22-Jan	130	30	32	68
23-Jan	116	32	20	64
24-Jan	93	24	29	40
25-Jan	119	24	23	72
26-Jan	81	13	17	51
27-Jan	62	7	12	43
28-Jan	n/a	n/a	n/a	n/a
29-Jan	n/a	n/a	n/a	n/a
30-Jan	n/a	n/a	n/a	n/a
31-Jan	n/a	n/a	n/a	n/a
1-Feb	92	24	22	46
2-Feb	93	20	16	57
3-Feb	61	13	13	35
4-Feb	124	34	27	63
5-Feb	105	29	16	60
6-Feb	101	23	28	50
7-Feb	100	31	25	44
8-Feb	109	34	20	55
9-Feb	61	15	22	24
10-Feb	71	15	11	45
11-Feb	107	29	22	56
12-Feb	106	29	33	44
13-Feb	107	20	25	62
14-Feb	70	20	21	29
15-Feb	117	17	27	73
16-Feb	61	23	19	19
17-Feb	60	15	8	37
18-Feb	73	19	14	40
19-Feb	118	29	25	64
20-Feb	90	29	32	29
21-Feb	144	26	33	85
22-Feb	124	25	18	81
23-Feb	65	12	12	41
24-Feb	86	13	10	63
25-Feb	102	29	24	49
26-Feb	123	34	30	59
27-Feb	122	28	23	71
28-Feb	138	13	33	92
29-Feb	115	36	23	56
1-Mar	56	10	18	28
2-Mar	76	15	9	52
3-Mar	93	25	30	38
4-Mar	121	27	26	68
5-Mar	112	26	31	55
6-Mar	176	23	25	128
7-Mar	103	17	30	56
8-Mar	68	23	12	33

	Total number of men seeking shelter and services	Number of homeless men new to shelter system	Number of homeless men out of system one year or more	Number of homeless men out of system less than one year
9-Mar	57	11	19	27
10-Mar	129	40	26	63
11-Mar	136	30	33	73
12-Mar	105	31	25	49
13-Mar	113	30	21	62
14-Mar	74	20	23	31
15-Mar	55	15	13	27
16-Mar	70	20	17	33
17-Mar	100	32	19	49
18-Mar	95	25	21	49
19-Mar	95	26	18	51
20-Mar	90	24	18	48
21-Mar	102	29	19	54
22-Mar	66	10	14	42
23-Mar	68	12	12	44
24-Mar	88	26	19	43
25-Mar	94	26	26	42
26-Mar	85	19	22	44
27-Mar	125	36	21	68
28-Mar	102	26	17	59
29-Mar	44	10	18	16
30-Mar	62	18	9	35
31-Mar	82	25	19	38
1-Apr	104	28	34	42
2-Apr	112	38	25	49
3-Apr	64	19	20	25
4-Apr	91	30	18	43
5-Apr	69	22	17	30
6-Apr	71	18	19	34
7-Apr	99	31	23	45
8-Apr	86	24	20	42
9-Apr	74	26	17	31
10-Apr	72	24	19	29
11-Apr	84	33	25	26
12-Apr	50	16	16	18
13-Apr	36	10	6	20
14-Apr	118	40	31	47
15-Apr	86	26	29	31
16-Apr	84	34	14	36
17-Apr	93	24	19	50
18-Apr	76	20	22	34
19-Apr	64	30	10	24
20-Apr	65	25	9	31
21-Apr	88	26	18	44
22-Apr	96	24	23	49
23-Apr	63	18	20	25
24-Apr	75	16	23	36

	Total number of men seeking shelter and services	Number of homeless men new to shelter system	Number of homeless men out of system one year or more	Number of homeless men out of system less than one year
25-Apr	93	36	24	33
26-Apr	45	17	16	12
27-Apr	55	13	16	26
28-Apr	118	29	25	64
29-Apr	112	23	32	57
30-Apr	84	19	20	45
1-May	84	22	28	34
2-May	89	17	22	50
3-May	74	13	22	39
4-May	59	12	21	26
5-May	89	21	26	42
6-May	91	22	27	42
7-May	102	28	24	50