

Hon. Bill de Blasio, Mayor  
City of New York  
City Hall New York, NY 10007

April 27, 2020

Hon. Andrew M. Cuomo, Governor  
State of New York  
NYS State Capitol  
Albany, NY 12224

**Re: Urgent need for COVID-19 tests for homeless New Yorkers and those serving them**

Dear Mayor de Blasio and Governor Cuomo:

We write to urge you to immediately offer free tests for COVID-19 to all homeless New Yorkers and those serving them. The speed with which this virus has spread within shelters is staggering. For the health and safety of all homeless people and all staff and volunteers on the front lines serving them, as well as all New Yorkers, testing is urgently needed for this most vulnerable group of individuals and families. Along with their service providers, they must receive top priority for free, voluntary testing services within reasonable proximity to each New York City shelter location.

We last wrote to you about the need to move homeless people out of congregate shelters and off the streets into hotels, because of their inability to achieve social distancing while homeless:

*As of April 1st, there were 136 cases of COVID-19 reported in 74 DHS shelters, in addition to seven homeless New Yorkers testing positive while living on the streets. On April 1st, 35 homeless people were hospitalized and five deaths had been reported. Because testing and access to treatment for people with mild illness is limited, the extent of illness and death among homeless New Yorkers is likely already far more extensive than what is officially reported – and similar to the experience of other vulnerable populations living in nursing homes and jails, it is growing daily.*

Just weeks later, as of April 26<sup>th</sup> the number homeless people infected and hospitalized has more than tripled: There were 649 cases of COVID-19 reported in 165 DHS shelters (twice as many sites) in addition to 34 homeless New Yorkers testing positive while living on the streets. On April 26<sup>th</sup> 154 homeless people were hospitalized and 55 deaths had been reported, a tragic ten-fold increase in the number losing their lives, not including the rising number of deaths yet to be classified as stemming from COVID-19. Notably, the virus is present in both congregate shelters and shelters in which family members live in very close proximity to one another, without access to private bathrooms or isolation spaces within the units for any infected adults or children.

In consultation with Charles Cleland, PhD, a biostatistician at NYU, Coalition for the Homeless calculated the age-adjusted mortality rates among sheltered homeless New Yorkers to date. As of April 26, the overall New York City mortality rate due to COVID-19 was 139 deaths per 100,000 people. For sheltered homeless New Yorkers, it was 210 deaths per 100,000 people – or 51 percent higher than the New York City rate.<sup>1</sup>

---

<sup>1</sup> Simone, J. Coalition Testifies on Requiring Private Rooms for Homeless Single Adults During the COVID-19 Pandemic. Coalition for the Homeless: April 24, 2020. <https://www.coalitionforthehomeless.org/coalition-testifies-on-requiring-private-rooms-for-homeless-single-adults-during-the-covid-19-pandemic/>

On April 22, 2020, the United States Centers for Disease Control published *Assessment of SARS-CoV-2 Infection Prevalence in Homeless Shelters — Four U.S. Cities, March 27–April 15, 2020*, reporting:

*Overall, 1,192 residents and 313 staff members were tested in 19 homeless shelters ([Table](#)). When testing followed identification of a cluster, high proportions of residents and staff members had positive test results for SARS-CoV-2 in Seattle (17% of residents; 17% of staff members), Boston (36%; 30%), and San Francisco (66%; 16%).<sup>2</sup>*

These alarming results prompted the following three critical conclusions:

*Given the high proportion of positive tests in the shelters with identified clusters and evidence for presymptomatic and asymptomatic transmission of SARS-CoV-2 (5), testing of all residents and staff members regardless of symptoms at shelters where clusters have been detected should be considered. If testing is easily accessible, regular testing in shelters before identifying clusters should also be considered. Testing all persons can facilitate isolation of those who are infected to minimize ongoing transmission in these settings.*

We cannot overstate the urgency of the need to immediately initiate universally available free, voluntary testing for all homeless New Yorkers as well as those serving them, given what we already know about how readily COVID-19 spreads within shelters and other crowded settings. We look forward to your immediate action to offer these tests to homeless individuals and families, as well as those serving them, and we will help inform those whom we serve about testing locations as soon as you can make that information available.

Sincerely,



Shelly Nortz, Coalition for the Homeless

Coalition for Homeless Youth  
Coalition for the Homeless  
Health People: Community Preventive Health Institute  
Housing Works  
Human.nyc  
ICAP at Columbia University  
New York Legal Assistance Group  
NYC Relief  
The Legal Aid Society  
Treatment Action Group  
Urban Outreach Center of NYC  
cc: Commissioner Oxiris Barbot, DOHMH  
Commissioner Steven Banks, DSS  
Speaker Corey Johnson, NYC Council (continued)

---

<sup>2</sup> Mosites E, Parker EM, Clarke KE, et al. Assessment of SARS-CoV-2 Infection Prevalence in Homeless Shelters — Four U.S. Cities, March 27–April 15, 2020. MMWR Morb Mortal Wkly Rep. ePub: 22 April 2020. DOI: <http://dx.doi.org/10.15585/mmwr.mm6917e1external icon>.

Council Member Mark Levine  
Council Member Stephen Levin  
Commissioner Howard Zucker  
Commissioner Michael Hein  
Senate Majority Leader Andrea Stewart Cousins  
Senator Gustavo Rivera  
Senator Roxanne Persaud  
Speaker Carl Heastie  
Assembly Member Gottfried  
Assembly Member Hevesi

###