STATE OF THE HOMELESS 2021

Housing is Health Care, A Lesson for the Ages
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Housing is Health Care, A Lesson for the Ages

**Image Description:** Five adults in winter clothing stand on the street at the back of a van with its doors open. The sidewalk and street are wet. Snow is falling. An adult wearing a face mask stands at the van with their head turned toward a second adult who is holding a plastic bag open in the direction of the van.

**Image Description:** A young child wears a face mask and warm weather clothing. The child sits on the sidewalk in front of a staircase into a building. To the child’s right, on the sidewalk, the words “Everyone Deserves a Home” have been written in chalk.

**Image Description:** An adult wearing a face mask and winter coat stands in front of a van parked in the street. A white van with its backdoor open is parked in the street. The door displays the logo of the Coalition for the Homeless.

Photo by Coalition for the Homeless
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## State of the Homeless 2021

*Housing is Health Care, A Lesson for the Ages*

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EXECUTIVE SUMMARY

This State of the Homeless report is being released 40 years after the right to shelter was first established in New York City with the signing of the Callahan Consent Decree in August 1981. Since then, the municipal shelter system has grown from 3,600 beds to today’s vast network that, at its height in January 2019, accommodated nearly 64,000 people each night.

The root of this problem is, and has always been, the Federal government’s abdication of its responsibility to provide housing for low-income renters, and the subsequent failure of the City and State to view the need as a housing crisis and not a homelessness crisis. This mindset has fueled decades of shortsighted policies and a reflexive retreat into simplistic, often ideological attempts to manage the problem, rather than solve it. The cost of this failure has been massive in both its human and monetary quotients.

While the right to shelter in NYC does create a critical baseline of decency in our city – and has, over the past four decades, saved countless lives by providing those who’ve lost their homes with an alternative to bedding down on the streets – shelters do not solve homelessness. Housing does. The moral imperative of providing all with the dignity and safety of a home has never been more strikingly obvious than it has over the past year.

Indeed, it has been one year since COVID-19 first hit New York City – another crisis that has forever changed the landscape of our city. The pandemic has been physically, economically, and mentally devastating for all New Yorkers, as it has been for people around the country and the world. The crisis has laid bare egregious health and economic disparities in New York City, and has taken a tremendous toll on people of color and those who lack stable housing. Homeless individuals and families have been particularly at risk, as they lack a safe and private place in which to practice preventive measures like social distancing and frequent handwashing while a deadly, airborne virus continues to spread across the city.

The city was already experiencing record homelessness among single adults and near-record homelessness among families when the pandemic began. In February 2020, more than 19,000 single adults were sleeping in shelters each night – more than at any time since the City started keeping count in 1983. Tens of thousands of homeless New Yorkers cycled between shelters, the streets, hospitals, nursing homes, unstable housing, and jails and prisons each year, exposing the feeble – often nonexistent – safety net for low-income people, particularly those living with disabilities. Meanwhile, the number of homeless families sleeping in shelters each night exceeded 14,000 in February 2020, including more than 21,000 children.

When the pandemic hit New York City in March 2020 with tremendous speed and lethality, the health and wellbeing of the 61,000 New Yorkers sleeping in Department of Homeless Services (DHS) shelters, in addition to the thousands more staying on the streets and in shelters run by other agencies, were profoundly vulnerable to the harms it would bring. Most homeless single adults were sheltered in congregate settings, with shared dorms, dining areas, and bathrooms, along with continually rotating staff – conditions poorly suited to containing the spread of a highly contagious virus.

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1 The right to shelter was subsequently extended to include homeless adult women and then, through separate litigation brought by The Legal Aid Society, to include homeless families with children.
Homeless families with school-age children did not have access to the resources needed to switch to remote learning. Unsheltered individuals – who rely on a patchwork system of public spaces, private businesses, and nonprofit services to meet their basic human needs – found themselves scrambling to find food, clothing, open bathrooms, cover from the elements, and other necessities.

The City and State were fully unprepared to deal with the devastating scope of the deadly pandemic and resulting economic crisis, and were slow to respond. Both Mayor de Blasio and Governor Cuomo made critical errors in their responses to the pandemic that placed homeless New Yorkers at grave risk. This State of the Homeless report thus emphasizes the devastating impact of the coronavirus pandemic on homeless New Yorkers over the past year, and grades the City and State on their responses to both the housing crisis and public health crisis – each of which has contributed to the severity of the other.

The obstacles that homeless individuals and families must overcome to find a way into permanent housing are considerable: the scarcity of Section 8 vouchers and NYCHA apartments; a shortage of affordable housing compounded by poorly targeted City-subsidized housing construction; City and State rent vouchers that don’t come close to covering fair market rents in NYC; and rampant discrimination in many forms, which continues to freeze New Yorkers of color out of the housing market.

The recommendations in this report draw on proven solutions that match the scale and urgency of the crisis. They underscore the need to keep people safe, to emphasize the role of housing in health care, to address systemic racism in the persistence of mass homelessness, and to prevent a new wave of New Yorkers from losing their homes and entering shelters or turning to the streets. As the pandemic has made crystal clear, our elected leaders must act with speed and purpose to promote and actualize the idea that housing is a human right – a right that requires smart and substantial investments in our future by every level of government.
Recommendations

HOUSING

Governor Cuomo must:

• Implement the Home Stability Support (HSS) program to create a State-funded, long-term rent subsidy for households receiving public assistance who are homeless or at risk of losing their housing due to eviction, domestic violence, or hazardous housing conditions.

• Implement the Housing Access Voucher Program (HAVP) to create a State-funded, long-term rent subsidy for homeless and very low-income households.

• Accelerate the pace of production of the 20,000 units of supportive housing pledged by the Governor in 2016 by completing them by 2026 instead of 2031, and fully fund the construction and operation of the remaining 14,000 units.

• Ensure effective reentry planning for individuals being released from State prisons in order to identify viable housing options prior to each individual’s scheduled release date.

  - Fund the creation of supportive housing specifically for individuals reentering the community from State prisons.

  - Reform punitive parole practices that allow parole officers to exercise wide discretion and deny placement at potentially viable addresses for individuals leaving State prisons.

Mayor de Blasio must:

• Implement the Fair Chance for Housing Act (Intro. 2047) to prohibit housing discrimination on the basis of an arrest or conviction record in New York City.

• Raise the rent levels for CityFHEPS rent vouchers to Section 8 payment standards and eliminate the benefits cliff (Intro. 146).

• Help families move out of shelters with long-term rent subsidies, including Section 8 vouchers.

• Allocate at least three-quarters of tenant-based Section 8 vouchers made available each year to homeless households so they can exit shelters.

• Accelerate the timeline for the creation of 15,000 City-funded supportive housing units by scheduling their completion by 2025 rather than 2030.

  - Create an impartial appeals process through the Human Resources Administration (HRA) for individuals applying for supportive housing who are denied.

  - Eliminate bureaucratic barriers to placement in supportive housing, with a true Housing First model, including relaxing the standard for documenting unsheltered homelessness for the purpose of establishing eligibility for supportive housing.

  - Implement a system of notifying supportive housing residents of their rights as tenants and clients of service providers (Intro. 2176).

  • Legalize accessory dwelling units with adequate safety standards and appropriate tenant protections.

  • Extend the right to counsel to all income-eligible tenants regardless of zip code and ensure that funding of legal services providers enables them to meet the demand.

Mayor de Blasio and Governor Cuomo should together:

• Call on the Federal government to fund Section 8 vouchers as an entitlement for all households who meet the eligibility standards.

• Fund the production of more housing specifically for homeless single adults, separate and apart from their respective existing supportive housing commitments.

• Expand access to supportive housing for adult families – a population with disproportionately high levels of disability and complex needs.

• Ensure that undocumented New Yorkers have equal access to affordable and supportive housing and eviction prevention assistance.
SHELTERS AND UNSHELTERED HOMELESSNESS

Mayor de Blasio must:

- Provide single-occupancy hotel rooms for all homeless individuals living in congregate shelters and those living on the streets or sleeping in the subway system for the duration of the COVID-19 pandemic.

- Initiate the redesign of emergency shelter facilities, with the expectation that the risk of exposure in future pandemics will require the provision of private rooms including bathrooms for each individual or household, and with attention to the principles of safety, public health, accessibility, and individual autonomy.

- Provide reliable internet access to all families and individuals sleeping in shelters.

- Reform the process of providing outreach to unsheltered homeless individuals to a client-centered, harm reduction approach. This reform should include expanding the number of providers that conduct outreach in the subways. The following reforms should also be included:
  - Equip outreach teams with essential items such as socks, hand sanitizer, backpacks, clothing, and coats.
  - Expand access to low-barrier medical and mental health care, including virtual care and street medicine.
  - Prohibit the use of CCTV to monitor unsheltered New Yorkers in the transit system and public spaces.
  - Implement the CCIT-NYC campaign’s proposal for non-police responses to mental health crises.
  - Cease encampment-clearing operations and street sweeps, focusing instead on connecting people to resources they want.
  - Open a network of public restrooms and showers across the city that are staffed and cleaned consistent with COVID-19 precautions. Public restrooms should be available 24 hours a day.
  - Open a sufficient network of 24-hour warming and cooling centers throughout the city with proper air filtration and ventilation, appropriate safety protocols, and adequate personal protective equipment.
  - Administratively clear all summonses that have been issued under the Subway Diversion Program.

- Open at least 3,000 new Safe Haven and stabilization beds in single-occupancy rooms and offer them to all unsheltered homeless individuals.

- Expand the number of Safe Haven and stabilization beds for women.

- Prohibit NYPD from responding to 311 calls requesting assistance for homeless individuals and remove NYPD from all homeless outreach functions. Calls to 311 should only result in the deployment of contracted DHS outreach workers.

- Allow individuals with multiple disabling conditions, intellectual or developmental disabilities, or chronic/severe medical issues to enter Safe Havens without first proving they have been on the streets for nine months and/or out of the DHS municipal shelter system for six months.

- Create a role for peers in outreach and ensure that unsheltered New Yorkers have a voice in policymaking.
Governor Cuomo must:

• Ensure that homeless individuals are not taken against their will to new crisis centers, which must by law only serve voluntary patients.

• Immediately halt the deployment of additional MTA police in response to homeless people located in transit facilities and trains.

• Reverse harmful cuts to New York City’s emergency shelter system that have resulted in the State short-changing the City by hundreds of millions of dollars over the past decade, and share equally with the City in the non-Federal cost of sheltering homeless families and individuals.

• Replace the grossly inadequate $45 per month personal needs allowance for those living in shelters with the standard basic needs allowance provided to public assistance recipients.

• Permanently eliminate the statewide requirement that shelter residents pay rent for shelter or enroll in a savings program as a condition of receiving shelter.

• Promptly implement regulations and funding for medical respite programs included in the State budget.

Mayor de Blasio and Governor Cuomo should together:

• Publish detailed COVID-19 statistics on infection, hospitalization, and mortality among homeless New Yorkers, including family composition, age, shelter status and type of shelter, race, and other relevant demographics, including risk factors.

• Ensure that shelter residents, unsheltered New Yorkers, and staff who serve people who are homeless are offered immediate and low-barrier access to available vaccines, including informed consent and clear, consistent, culturally competent, and accessible information.

• Implement a less onerous shelter intake process for homeless families in which 1) applicants are assisted in obtaining necessary documents, 2) housing history documentation is limited to the prior six months, and 3) DHS-identified housing alternatives are investigated to confirm their availability, safety, and lack of risk to the potential host household’s tenancy. For adult families, the City must accept verification of time spent on the streets from the widest possible array of sources, including outreach teams, soup kitchen volunteers, social workers, health care providers, and neighbors.

• Fund additional services for individuals living with severe and persistent mental illnesses, such as expanding access to inpatient and outpatient psychiatric care, providing mental health services in more single adult shelters, and adding more Assertive Community Treatment (ACT) teams for homeless people.

• Reinstate 24-hour subway service, and cease police profiling of homeless individuals in the transit system.

• Open and staff overdose prevention sites as a harm reduction model.
Image Description: An adult and child sit in front of a playground set. The adult is wearing a cardigan and the child is wearing a hooded sweatshirt. They are embracing and smiling.

Image Description: A van with its backdoors open is parked in the street. A side of the van displays the Coalition for the Homeless logo. Four adults wearing warm weather clothing stand in a single file line and face a table placed at the back of the van. Four other adults in warm weather clothing stand between the van and the table, which is used to distribute items from the van.

Image Description: A child in warm weather clothing wears a face mask beneath their chin, and crouches in a field of grass next to a sign in the shape of a star with the word “hope” painted on it. The child is smiling with their mouth opened wide.

Image Description: An adult and child sit in front of a playground set. The adult is wearing a cardigan and the child is wearing a hooded sweatshirt. They are embracing and smiling.
THE STATE OF HOMELESSNESS

THE IMPACT OF COVID-19 ON SHELTERED AND UNSHELTERED HOMELESS NEW YORKERS

COVID-19 Cases

Between March and December 2020, the Department of Homeless Services reported to the State that there were 1,919 confirmed cases of COVID-19 among homeless individuals and families staying in DHS shelters and on the streets. An additional 608 cases of “COVID-like illness” (CLI) were also reported during this time, mostly at the beginning of the pandemic when widespread testing was unavailable to confirm presumed cases. When compared with citywide infection rates, the rate of infection among homeless New Yorkers was similar in the early months of the pandemic, higher in the summer, and lower for the latter part of 2020 as the overall infection rate in New York City surged. However, since September 2020, the rate of infection among homeless New Yorkers has been on the rise, increasing from 50 to 570 infections per 100,000 people from September to December 2020 – an increase of more than 1,000 percent. Between December 29, 2020, and March 2, 2021, DHS reported approximately 1,280 additional positive cases of COVID-19.

Note on COVID-19 analyses: DHS data on COVID-19 cases and deaths are not consistently reported across public and internal documents. As a result, some discrepancies in the data may be evident. The following analyses are our best estimates of changes over time and the impact of COVID-19 on homeless New Yorkers based on public DHS reports, reports to the State, and reports provided to the Coalition for the Homeless.
Virus Transmission and the Use of Hotels

The Centers for Disease Control and Prevention (CDC) acknowledged in October that SARS-CoV-2, the virus that causes COVID-19, is spread through small droplets and aerosols suspended in the air for prolonged periods – also known as airborne transmission.\(^3\) Conditions under which airborne transmission of the virus is most likely include crowded indoor spaces, prolonged exposure, and inadequate ventilation. These conditions are ubiquitous in congregate shelters, where the majority of homeless single adults resided at the onset of the pandemic. Sharing sleeping rooms, dining areas, bathrooms, and other common spaces among dozens of strangers each day characterizes typical congregate shelters. Inadequate ventilation (including inoperable windows) is a common problem found in such shelters. The prevention of airborne spread of the coronavirus in other institutional settings has been linked with proper ventilation and functioning windows,\(^4\) and yet this principal means of infection remains a significant risk in too many shelter settings.

Critical to keeping homeless New Yorkers protected from the virus is providing them with safe, private spaces in which to practice social distancing. In March 2020, there were more than 15,000 homeless single adults sleeping in congregate DHS shelters. Another 3,886 single adults were staying in commercial hotel rooms (mostly double-occupancy) and stabilization beds (a mix of private and minimally shared settings). Homeless New Yorkers, advocates, and some elected officials quickly recognized the risk of virus transmission in congregate shelters and urged DHS to move people to hotels where they could be better protected. Unfortunately, the City delayed taking action and actively fought City Council legislation mandating the provision of single-occupancy hotel rooms for all homeless single adults sleeping in congregate settings or on the streets. Not until May did DHS start moving large numbers of single adults to hotel rooms – more than two months into the crisis, and too long after the most severe surge in infections.

By the end of April, 53 homeless single adults had died from COVID-19. Not until July did DHS complete their effort to transfer the majority of single adults – about 65 percent – into hotel rooms.

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Unfortunately, DHS still has not provided private settings to all homeless single adults. The agency continues to shelter nearly 7,000 single adults in reduced-capacity (“de-densified”) congregate settings with shared dormitories, dining areas, and bathrooms. DHS often explains their rationale for retaining about 33 percent of single adults in congregate shelters as a need among some individuals for additional mental health services in those settings, despite reports from shelter providers and residents that homeless individuals have experienced improved mental health and wellbeing since moving into hotels (which provide more privacy, safety, and dignity). Indeed, data from one shelter provider who moved their residents into a hotel showed a 73-percent reduction in the number of overdose incidents occurring between the first quarter of 2020 and the first quarter of 2021. Furthermore, contrary to the claims of some local opponents challenging the placement of homeless people in nearby hotels, social services staff moved with shelter residents from congregate facilities to the hotels, to ensure that shelter residents continue to receive supports in a demonstrably safer setting.

In October 2020, The Legal Aid Society and Jenner & Block LLP filed *Fisher v. City of New York*, Index No. 452069/2020 (Supreme Court, NY County), on behalf of the Coalition for the Homeless and homeless single adults in New York City. The lawsuit, also filed against the Department of Social Services (DSS) and DHS, seeks to compel the City to offer single-occupancy hotel rooms to all homeless single adults in the city for the duration of the COVID-19 pandemic, among other forms of relief. In December 2020, in response to the lawsuit, DHS released “Interim Guidelines for placing clients in single or double rooms during the COVID-19 emergency,” which the parties continue to negotiate as public health officials release more information about how COVID-19 impacts people with certain medical conditions and disabilities and places them at heightened risk for serious illness or death. The case remains active as of April 27, 2021.


Presentation by Project Renewal at the Conference on Preventing Deaths Among Individuals Experiencing Homelessness in New York City, April 8, 2021. [https://healthandhousingconsortium.org/covid19/](https://healthandhousingconsortium.org/covid19/)
In addition to failing to act quickly to protect the wellbeing of the most vulnerable New Yorkers, Mayor de Blasio exhibited an alarming lack of leadership and moral grounding by capitulating to NIMBY-fueled antagonism toward the use of hotels as shelters in certain neighborhoods – to the clear detriment of the health and safety of homeless individuals and families. When some residents of the Upper West Side complained about the use of hotels to shelter homeless single men in their neighborhood, the Mayor declared the situation “not acceptable” (without evidence or explanation) and ordered that the men be moved into other facilities already occupied by homeless adult families or families with children – setting up a cascade of disruption, confusion, and upheaval amidst the deadly pandemic. Only after hundreds of community members, service providers, advocates, faith leaders, elected officials, and homeless individuals themselves expressed outrage over the proposed relocation – and a lawsuit was filed by the homeless men staying in the hotel – was the City forced to retreat from immediately implementing this plan.\(^8\) But the Mayor’s decision to side with well-connected (and often explicitly racist) partisans added to the stress and uncertainty felt by the most vulnerable New Yorkers during an already tumultuous and dangerous time.

\(^8\) In October 2020, the New York State Supreme Court granted an application filed by three Lucerne Hotel residents for a Temporary Restraining Order (TRO) that immediately stopped the City from implementing any forced moves at the Lucerne. On November 25, 2020, the Supreme Court vacated the TRO and dismissed the three Lucerne residents’ lawsuit, permitting the City to move forward with its plan. However, the residents appealed and, in January 2021, the Appellate Division ruled that the City could not force the men at the Lucerne to move downtown before a hearing was held and the appeal decided.
Since July 2020, when DHS stopped moving single adult shelter residents en masse to hotels as part of the “de-densification” process, numerous instances of community spread of the virus within the congregate facilities that continue to shelter homeless New Yorkers have been documented. In December 2020, 18 adult families were sent to quarantine after one person tested positive at an adult family shelter with shared bathrooms. At the end of January 2021, nine residents and at least one staff person tested positive at a men’s shelter in the Bronx, and multiple clients were exposed. Over the course of several days at the end of January and beginning of February 2021, six residents tested positive and six more were exposed at a men’s shelter in Brooklyn.

At the time the first confirmed case of COVID-19 in NYC was announced on March 1, 2020, DHS was already using commercial hotels to provide shelter for approximately 3,500 homeless single adults. As part of his Turning the Tide on Homelessness in New York City plan, Mayor de Blasio expressed his resolve to stop using commercial hotels as shelters by the end of 2023 and ensure that the city would, by then, have an adequate number of beds in purpose-built shelters. However, the sudden availability of tens of thousands of vacant hotel rooms in NYC that resulted from the steep decline in tourism during the pandemic presented an opportunity that was integral to DHS’ response. Three new categories of hotels were added to the DHS portfolio as pandemic-related resources:

**TYPES OF HOTELS**

**ISOLATION HOTELS**
are designed to provide light-touch nursing services to DHS clients who have COVID-19 or exhibit “COVID-like illness” (CLI) and do not require hospitalization. Isolation hotels allow DHS clients to recuperate in a more private setting to reduce the risk of exposing others and permit regular wellness checks.

**QUARANTINE HOTELS**
provide DHS clients who traveled out of state or who have been exposed to people with COVID-19 or CLI a bed in a private setting for about 14 days. Nursing staff perform regular wellness checks in order to connect clients with medical services if they become sick. In addition, homeless individuals who refuse voluntary testing at intake are transferred to quarantine hotels so they can complete a quarantine period before entering assessment shelters.

**DE-DENSIFICATION HOTELS**
enable dorm-style congregate shelters to reduce their populations and provide clients with less dense spaces in which to sleep, bathe, and eat. Some congregate shelter providers elected to move their entire shelter populations into de-densification hotels, while others split their operations between a de-densification hotel and the “parent” congregate shelter. De-densification hotels provide the same services to clients as are offered at the associated “parent” shelters.
Mortality

Through the end of February 2021, the age-adjusted mortality rate due to COVID-19 for sheltered homeless New Yorkers was 436 deaths per 100,000 people—49 percent higher than the citywide rate of 292 deaths per 100,000 people. However, the rates varied dramatically by household type. The age-adjusted mortality rates due to COVID-19 for members of homeless adult families and homeless single adults—who are more likely to reside in shelters with shared sleeping, dining, or bathing facilities—were 363 and 450 per 100,000, respectively, during this period. The age-adjusted mortality rate for homeless families with children—who typically have self-contained shelter units that include kitchens and bathrooms—was slightly lower than the citywide rate at 270 per 100,000.

This disparity in mortality rates among homeless New Yorkers was therefore fueled by the number of deaths occurring among single adults and members of adult families, particularly between March and July of 2020. During this time, the majority of single adults remained in congregate, dorm-style shelters, and the City had not yet reduced the density of these facilities by moving people into hotels. Moreover, homeless single adults and homeless adult families are, as a group, older and more likely to be living with a disability than homeless families with children, placing them at higher risk of poor outcomes and death if they contract the virus that causes COVID-19.

To calculate the age-adjusted mortality rate for homeless New Yorkers in shelters, we used the indirect methodology outlined in a paper written by Buescher, 2010, available at [https://schs.dph.ncdhhs.gov/schs/pdf/primer13_2.pdf](https://schs.dph.ncdhhs.gov/schs/pdf/primer13_2.pdf). Data for the city's overall population and mortality were compiled from the Department of Health and Mental Hygiene's COVID-19 data tracking website and confirmed with the Department of Homeless Services. Data for sheltered homeless New Yorkers are provided by the Department of Homeless Services. Because homeless New Yorkers sleeping in shelters are likely more transient than the overall New York City population, we used mortality rates by month for the city and the population in shelters and calculated the average and cumulative differences over time. Higher mortality rates among homeless New Yorkers are not entirely unexpected, given that homeless people face compounding risks for exposure to the coronavirus and a higher rate of underlying health conditions that place them at a greater risk for experiencing serious complications from the virus. This is particularly true for single adults sleeping in congregate shelter settings, and underscores the importance of providing private hotel rooms to help homeless New Yorkers stay safe and prevent further avoidable deaths.
Each year, the City is required to report on the number and characteristics of people who died without a permanent home. The number of such deaths reported in Fiscal Year 2020 (July 2019 – June 2020) was the highest ever reported by the City, with 613 New Yorkers passing away while homeless. This painful record was set in large part because of the 120 deaths classified as related to COVID-19. But even apart from coronavirus-related deaths, the number of homeless people who died in Fiscal Year 2020 reached a new record, fueled by substantial increases in deaths as a result of drug overdoses and heart disease. It is worth noting that some conditions resulting in death may have been related to COVID-19 and not reported as such, given a lack of testing as well as an incomplete understanding of how the virus exploits and exacerbates underlying health conditions. Much research has since linked COVID-19 to an array of symptoms affecting many organ systems of the body, including inflammation of the heart muscle, which can result in heart attack, stroke, and sudden cardiac arrest. Furthermore, growing evidence suggests that the pandemic has contributed to excess deaths, in part because people could not readily access medical care and died from conditions that otherwise might have been successfully treated. The report clearly documents that the pandemic has taken a staggering toll on homeless New Yorkers, both directly and indirectly.

Note the number of COVID-19 deaths (120) reported in the Local Law 7 report does not match the number of deaths DHS reported to the press (99) or to the State (100) during this period. The Local Law 7 report uses a different methodology, includes data from DOHMH and Office of the Chief Medical Examiner, and counts some people not known to DHS. The Local Law 7 report notes that of the 120 reported COVID-19 deaths among people experiencing homelessness, 99 were lab-confirmed and 21 were listed as "probable."

The State of Homelessness

Image Description: A graph labeled “Deaths Among Homeless New Yorkers Fiscal Years 2012 to 2020.” The vertical axis lists numbers 0 to 700 in increments of 100. The horizontal axis lists the years 2012 through 2020. Each year has a bar in three or four sections showing causes of death and corresponding numbers: A purple section shows COVID-related deaths, a green section shows drug-related deaths, a dark red section shows deaths from heart disease, and a gray section shows deaths from “other” causes. The total number of deaths for each year is listed on top of each bar, with a value of 613 for the year 2020.

Source: NYC Department of Homeless Services, Department of Health and Mental Hygiene, Office of the Chief Medical Examiner, via LL7 reports
Underlying Conditions and Age

People who have certain medical conditions and those who are older are more likely to become seriously ill or die if they contract the virus that causes COVID-19, and the high rates of underlying health issues among homeless New Yorkers have placed them at grave risk during the pandemic. As part of the settlement reached in the Coalition’s disability rights case *Butler v. City of New York*, DHS was required to conduct a population analysis measuring the estimated rates and types of disabilities among people utilizing shelters. In November 2019, DHS reported that 77 percent of adult families and 68 percent of single adults sleeping in shelters were living with some type of disabling condition, such as mobility difficulties, conditions requiring the use of air conditioning or medical equipment, and other types of disabilities. Because DHS’ analysis is primarily concerned with how disabilities may impact a person’s meaningful access to shelters and their services, the report categorizes conditions with a focus on those that may require accommodations in physical shelter spaces or shelter system rules. These categories are not all necessarily associated with negative outcomes should someone contract the virus that causes COVID-19, but these very high rates of disability suggest that many single adults and adult families staying in shelters would likely have been more susceptible to serious complications from the virus than families with children. Moreover, prior to the beginning of the pandemic, homeless single adults were primarily sheltered in congregate-style settings, with shared dorms, dining areas, and bathrooms. Homeless adult families were also often sheltered in settings with shared bathrooms and meal service areas. The high rates of underlying health conditions and the physical layout of shelters for these populations likely contributed to their higher age-adjusted mortality rates, as discussed above.

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*Image Description: A graph labeled “Estimated Rates of Disability Among People Sleeping in DHS Shelters November 2019.” The vertical axis lists percentages from 0% to 90% in increments of 10. The horizontal axis lists three categories with corresponding gray bars indicating the percentage of people with a disability: “Families with Children” with a value of 53%, “Single Adults” with a value of 68%, and “Adult Families” with a value of 77%.*

Note: Disabilities include blindness, vision, mobility difficulties, conditions requiring air conditioning, conditions requiring specific medical equipment, deafness, or hard of hearing, and mental health conditions.

Source: NYC Department of Homeless Services *Butler v. City of New York* Population Analysis

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12 In 2015, represented by The Legal Aid Society and White & Case, the Coalition for the Homeless, Center for Independence of the Disabled, New York (CIDNY), and homeless New Yorkers with disabilities filed *Butler v. City of New York*, 15 CIV 3753 (SDNY), a class action lawsuit designed to ensure that the right to shelter includes accessible accommodations and services for people with disabilities, consistent with Federal, State, and local laws. The case was settled in 2017, and monitoring of the five-year settlement phase-in period is ongoing.
Although the aforementioned age-adjusted mortality calculations account for age-related mortality differences between sheltered homeless New Yorkers and the overall New York City population, it is important to note the age differences among the three household population types in DHS shelters in the context of the pandemic. In DHS shelters, 8 percent of single adults and 5 percent of people in adult families are 65 or older, compared with just 0.2 percent of people in families with children. A substantial portion of single adults (47 percent) and adult families (38 percent) are between the ages of 45 and 64.
Testing

DHS began proactive, voluntary SARS-CoV-2 testing in shelters at the end of April 2020. Since then, they have administered several thousand tests per month. Frequent testing is important to monitor spread of the virus, particularly among asymptomatic people. However, testing conducted within the DHS system has been seriously hampered by low participation rates and is only capturing a fraction of all positive cases that are ultimately confirmed via other means, including off-site testing and contact tracing investigations. This indicates that proactive testing should continue, but with the provision of effective incentives to encourage participation and dissemination of clear information about the benefits of regular testing.

Table 1: DHS Testing Program

<table>
<thead>
<tr>
<th>Phase</th>
<th>Number of tests conducted by DHS</th>
<th>Positive cases identified by DHS</th>
<th>Average participation rate (%)</th>
<th>Total system-wide incidents with a positive test reported (via DHS reports to the State)</th>
<th>Cases identified by DHS testing program (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1</td>
<td>6,897</td>
<td>247</td>
<td>-</td>
<td>548</td>
<td>45.1%</td>
</tr>
<tr>
<td>Phase 2</td>
<td>4,564</td>
<td>8</td>
<td>-</td>
<td>48</td>
<td>16.7%</td>
</tr>
<tr>
<td>Phase 3</td>
<td>4,829</td>
<td>2</td>
<td>23%</td>
<td>31</td>
<td>6.5%</td>
</tr>
<tr>
<td>Phase 4</td>
<td>5,045</td>
<td>5</td>
<td>21%</td>
<td>43</td>
<td>11.6%</td>
</tr>
<tr>
<td>Phase 5</td>
<td>6,684</td>
<td>38</td>
<td>27%</td>
<td>134</td>
<td>28.4%</td>
</tr>
<tr>
<td>Phase 6</td>
<td>6,833</td>
<td>65</td>
<td>29%</td>
<td>181</td>
<td>35.9%</td>
</tr>
</tbody>
</table>

Source: NYC Department of Homeless Services

Long COVID

A growing body of evidence has emerged linking SARS-CoV-2 infection to long-term chronic health conditions, sometimes referred to as Long COVID or post-acute sequelae of COVID-19 (PASC). A recent report by the COVID-19 Working Group of New York, to which the Coalition for the Homeless is a contributing author, highlights the suffering associated with chronic conditions that have been caused or exacerbated by the virus, and which may be compounded by inequitable access to health care.13 Moreover, with more people experiencing chronic health conditions associated with Long COVID, more New Yorkers may be unable to return to work, lose their income, and as a result, become homeless.

Vaccines

Residents of congregate shelters in New York State became eligible to receive the coronavirus vaccination on January 11, 2021. Prior to this, DHS began planning a vaccine distribution program in its facilities for clients and staff that focused on centralized, borough-based points of distribution (PODs) staffed by contracted medical providers. Soon after the first POD began administering vaccinations on January 18, 2021, DHS realized they could not meet their vaccination goals due to the challenging logistics of transporting shelter residents and staff to the POD for the two-dose Moderna vaccine. DHS not only had to ensure they did not underschedule or overschedule appointments in order to limit vaccine waste, but they also had to help clients and staff wrestling with reservations and misinformation about the vaccines. During the week of March 1, 2021, after the Johnson & Johnson/Janssen (J&J) single-dose vaccine received FDA Emergency Use Authorization, DHS pivoted its vaccine distribution program to deliver the J&J vaccine, which is more easily transported than the other vaccines, to clients at their shelters. Preliminary data demonstrate that clients are more willing to get vaccinated at their shelters, likely because it is more convenient and they are able to observe how other clients and staff feel after receiving the vaccine.

Homeless Single Adults Sleeping in Shelters

In February 2021, the number of single adults sleeping each night in DHS shelters was at a new all-time record of 20,822. The single adult shelter census reached new records in 10 of the 12 months between January and December 2020. Over the past decade, the single adult shelter census has increased by a staggering 109 percent.

Distribution of the J&J vaccine was temporarily paused on April 13th, but was later resumed.

Image Description: A graph labeled “Number of Homeless Single Adults Sleeping Each Night in NYC Shelters 1983-2021.” The vertical axis lists numbers 0 to 22,000 in increments of 2,000. The horizontal axis lists the years 1983 through 2021. A gray shaded area stretches along the horizontal axis and shows small peaks and troughs before a large incline with a peak labeled “February 2021 20,822.”
According to DHS data collected at shelter intake facilities in Fiscal Year 2019, the primary reasons for homelessness reported by single adults when they enter shelters are discord at prior residence (30 percent), release from jail or prison (11 percent), and coming in off the streets after a period of unsheltered homelessness (10 percent). An additional 9 percent of single adults entered shelters after being discharged from a hospital (including both medical and psychiatric units) or other non-hospital program, including nursing homes. These reasons highlight the housing instability faced by homeless single adults, the great majority of whom are people of color and people living with disabilities. While some homeless single adults face formal evictions from apartments where they are tenants or lawful occupants, they are more often forced to leave untenable, ad hoc living situations without judicial intervention — or the opportunity to be represented by counsel — and frequently cycle between the criminal justice system, hospitals, nursing homes, the streets, and shelters.

Unsheltered Homeless Adults

Since the start of the pandemic, homeless New Yorkers staying on the streets or in the transit system have lacked access to food and bathrooms and have struggled to obtain essentials like masks, hand sanitizer, wipes, socks, toiletries, and blankets. Many unsheltered New Yorkers continue to experience intensified levels of stress and more extreme isolation while staying on the streets, often exacerbating symptoms of serious mental illnesses as well as chronic and acute physical health conditions.

In willful ignorance of these challenges and in contradiction to best practices, the response from the City and State governments to unsheltered New Yorkers has relied heavily on policing, forcing homeless people to move around from one public location to another, and on attempts to convince them to enter congregate shelters where they fear for their health and safety. In direct violation of CDC guidance, the City actually increased the number of encampment-clearing sweeps in 2020 — a punitive and counterproductive practice that pushes people further away from familiar resources and support services.

In response to some public complaints about the presence of homeless people on the subways at the beginning of the pandemic (when few others were using the subway system), on May 6, 2020, Governor Cuomo ordered the MTA to shut down subways overnight, between 1:00 a.m. and 5:00 a.m. This resulted in the forced removal of homeless people from trains and stations, often by heavy-handed policing. Throughout 2020, outreach workers present at end-of-line subway stations generally offered homeless individuals nothing more than transportation to congregate shelters. Unsurprisingly, this was the offer least likely to result in an actual indoor placement, as confirmed by DHS data: Just 30 percent of individuals offered transport to shelters accepted a bed upon arrival. A much smaller number of individuals were offered transportation to low-threshold stabilization beds (often single-occupancy hotel rooms), and the acceptance rate for this type of placement was significantly higher, at 65 percent. Of those who accepted a placement, people placed in Safe Havens were more likely to still be in that placement 11 months later (84 percent) than those entering stabilization beds (44 percent) or shelters (32 percent).

See also View From the Street: Unsheltered New Yorkers and the Need for Safety, Dignity, and Agency, Coalition for the Homeless, April 2021.

In February 2021, the number of families sleeping in shelters was 11,839, down from 14,344 in February 2020 and down 23 percent from the all-time high of 15,899 in November 2016. Several important policy decisions led to the lower census in the shelter system for homeless families with children. The de Blasio administration’s introduction of an array of housing assistance programs over the past several years stemmed what had been a skyrocketing family census, but the number of families staying in shelters did not begin to decrease in any meaningful way until the onset of the pandemic. The sharp decrease in the family census that occurred over the past year can be primarily attributed to a series of State orders halting most evictions. In Fiscal Year 2019, eviction remained the second-most common reason families with children entered shelters (21 percent), and the most common reason for adult families (29 percent). The stay on evictions undoubtedly helped many families who may otherwise have been evicted into homelessness remain in their homes. However, many of these families now face mounting rent arrears, and without immediate rent relief and long-term rental assistance, the family shelter census is likely to suddenly and sharply increase in the year ahead.

**Table 2: Outcomes from End-of-Line Outreach May 5, 2020 – April 4, 2021**

<table>
<thead>
<tr>
<th></th>
<th>Shelter</th>
<th>Safe Haven</th>
<th>Stabilization Bed</th>
<th>Drop-In Center</th>
<th>Total</th>
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<tr>
<td>Transported</td>
<td>6,161</td>
<td>111</td>
<td>614</td>
<td>709</td>
<td>7,595</td>
</tr>
<tr>
<td>Accepted Placement</td>
<td>1,854</td>
<td>32</td>
<td>397</td>
<td>152</td>
<td>2,435</td>
</tr>
<tr>
<td>Still in Placement</td>
<td>590</td>
<td>27</td>
<td>175</td>
<td>-</td>
<td>792</td>
</tr>
<tr>
<td>% Accepted Placement</td>
<td>30.1%</td>
<td>28.8%</td>
<td>64.7%</td>
<td>21.4%</td>
<td>32.1%</td>
</tr>
<tr>
<td>% Accepted Who Are Still in Placement</td>
<td>31.8%</td>
<td>84.4%</td>
<td>44.1%</td>
<td>-</td>
<td>32.5%</td>
</tr>
</tbody>
</table>

Source: NYC Department of Homeless Services

**Family Homelessness**

In February 2021, the number of families sleeping in shelters was 11,839, down from 14,344 in February 2020 and down 23 percent from the all-time high of 15,899 in November 2016. Several important policy decisions led to the lower census in the shelter system for homeless families with children. The de Blasio administration’s introduction of an array of housing assistance programs over the past several years stemmed what had been a skyrocketing family census, but the number of families staying in shelters did not begin to decrease in any meaningful way until the onset of the pandemic. The sharp decrease in the family census that occurred over the past year can be primarily attributed to a series of State orders halting most evictions. In Fiscal Year 2019, eviction remained the second-most common reason families with children entered shelters (21 percent), and the most common reason for adult families (29 percent). The stay on evictions undoubtedly helped many families who may otherwise have been evicted into homelessness remain in their homes. However, many of these families now face mounting rent arrears, and without immediate rent relief and long-term rental assistance, the family shelter census is likely to suddenly and sharply increase in the year ahead.
The State of Homelessness

Image Description: A graph labeled “Number of Homeless Families Sleeping Each Night in NYC Shelters 1983-2021.” The vertical axis lists numbers 0 to 16,000 in increments of 2,000. The horizontal axis lists the years 1983 through 2021. A gray shaded area stretches horizontally with several peaks and troughs and a large incline followed by a decline leading to a point labeled “February 2021 11,839.”

Image Description: A graph labeled “Number of Homeless Families and Single Adults Sleeping in DHS and HPD Shelters 1983-2021.” The vertical axis lists numbers 0 to 25,000 in increments of 5,000. The horizontal axis lists the years 1983 through 2021 with a marker at 2020 labeled “Beginning of COVID-19 Pandemic.” Two lines run horizontally with multiple peaks and troughs: A red line shows the number of single adults rising in recent years, and a gray line shows the number of families falling in recent years.

Source: NYC Department of Homeless Services and Human Resources Administration; Local Law 57 Reports

Note: HPD refers to family shelters run by the Department of Housing Preservation and Development.
Another reason for the decrease in the number of families sleeping in shelters each night is reduced access to the front door of the shelter system, evidenced by shockingly low shelter eligibility rates for homeless families in 2020. Families must undergo an arduous and bureaucratic application process to be deemed eligible for shelter, and many are erroneously found ineligible due to difficulties in gathering the copious amount of documentation required or due to City intake workers incorrectly determining that the family can return to a dwelling that is not actually available to them.

The difficulties that homeless families had long faced in gaining access to the shelter system were exacerbated in 2016 after the State, at the request of DHS, revised an administrative directive to allow more restrictive shelter eligibility rules. The revised directive resulted in an increasing number of homeless families being denied shelter placements – at their time of greatest vulnerability. The already shamefully low eligibility rates got even worse during the pandemic: Data from the months following the onset of the pandemic show that DHS made establishing eligibility even more challenging in 2020, resulting in all-time record low shelter acceptance rates for homeless families. From July to December 2020 (the first half of Fiscal Year 2021), the average monthly eligibility rate for homeless families with children was just 30 percent, down from 49 percent in 2015. Likewise, the average monthly eligibility rate for adult families was just 22 percent, down from 37 percent in 2015.

Image Description: A graph labeled “Percentage of Families Found Eligible for Shelter (Monthly Average) Fiscal Years 2014-2021 (through December).” The vertical axis lists percentages from 10% to 55% in increments of 5. The horizontal axis lists the years 2014 through 2021 (through December). Two lines mark percentages for each year in two categories: A red line shows percentages for adult families with a value of 22.4% for 2021 (through December), and a gray line shows percentages for families with children with a value of 30.1% for 2021 (through December).
The difficult task of proving eligibility has become even more complicated during the pandemic, given the logistical challenges of obtaining the necessary documents while so many organizations and government agencies are understaffed, relying on a remote workforce, and otherwise operating with reduced accessibility. These challenges have been compounded by a lack of any real assistance from DHS to help families obtain the required records. Of the homeless families with children who were ultimately found eligible for shelter in December 2020, 12 percent had to submit six or more applications; the rate for adult families was a whopping 38 percent. The mix of new and returning families did not substantially change during this period, with nearly half of family households having applied for shelter sometime in the past, while slightly more than half were classified as new entrants.

Although DHS changed some rules during the pandemic so that families could more easily reapply for shelter if they were incorrectly deemed ineligible, the low eligibility rates and large number of families found eligible only after repeated applications strongly suggest that the shelter eligibility process is deeply flawed. Far too often, DHS fails to accurately identify families who are homeless and in need of shelter, and instead forces them to jump over needless bureaucratic hurdles without providing appropriate assistance to help them establish their eligibility for shelter as required by State rules.
The State of Homelessness

Image Description: A graph labeled "Percentage of Eligible Homeless Families Submitting Six or More Applications Before Being Found Eligible for Shelter January 2019 - December 2020." The vertical axis lists percentages from 0% to 45% in increments of 5. The horizontal axis lists the months January 2019 through December 2020. Two lines mark percentages for each month for two categories: A red line shows percentages for adult families with a value of 39.4% for November 2020 and 38.1% for December 2020, and a gray line shows percentages for families with children with a value of 14.1% for November 2020 and 11.9% for December 2020.

Source: NYC Department of Homeless Services

Image Description: A graph labeled "Percentage of Families Entering NYC Shelters With a Prior Episode of Homelessness Fiscal Years 2014 - 2021 (through September)." The vertical axis lists percentages from 0% to 70% in increments of 10. The horizontal axis lists fiscal years 2014 through 2021 (through September). Two lines mark percentages for each fiscal year in two categories: A red line shows percentages for adult families with a value of 45.2% for 2021 (through September), and a gray line shows percentages for families with children with a value of 49% for 2021 (through September).

Source: NYC Department of Homeless Services
Homeless Children and Students

The pandemic has been uniquely challenging for homeless families with school-age children, who already struggle to keep up with their stably housed classmates. The transition to remote learning left thousands of homeless students without a viable or consistent way to attend and succeed in school. Months into the pandemic, many students who had been issued iPads by the City were still unable to connect to cellular service because their shelters were located in dead zones and the majority of shelter facilities were not equipped with WiFi as an alternative. In the spring of 2020, students staying in shelters had an average attendance rate of just 72 percent, far below the 86 percent average for all students in NYC Department of Education schools.

Following months of advocacy to persuade the City to rectify these staggering inequities, and a deeply flawed municipal response that left homeless students in limbo, The Legal Aid Society and Milbank LLP, representing homeless families and the Coalition for the Homeless, sued the City for its failure to provide reliable internet access to students residing in City shelters. The case forced the City to substantially speed up installation of WiFi in shelters for families with children and, as of April 2021, the City had installed wireless internet in about 75 percent of these shelters. On April 6, 2021, Legal Aid and Milbank LLP secured a settlement to ensure that every shelter for families with children will be wirelessly connected by August 31, 2021, and students will have a streamlined process for resolving connectivity issues.
Homelessness, of course, affects very young children as well. Even though the number of families with children sleeping in shelters has decreased from its all-time high in 2016, the number of babies born to parents living in shelters reached a new high of 1,399 in 2019. Initial data for 2020 suggest a similarly high figure, as shown below.

Image Description: A graph labeled “Number of Babies Born to Parents Sleeping in NYC Shelters Calendar Years 2015-2020.” The vertical axis lists numbers 0 to 1,600 in increments of 200. The horizontal axis lists the years 2015 through 2020. Gray bars mark the number of babies born to parents in shelters for each listed year, with a value of 1,399 for the year 2019, and a pale gray section of the bar for year 2020 marking the projected number for October through December 2020, which is 1,287.
Equity

The demographics of mass homelessness continue to expose stark racial, ethnic, gender, and economic inequities in New York City (and indeed across the nation). Heads of family households and single adults sleeping in DHS shelters are disproportionately people of color. Black New Yorkers in particular are vastly overrepresented in the homeless population, with 57 percent of homeless heads of household identifying as Black, compared with 23 percent of all New York householders.

The racial inequities associated with being homeless and related challenges have compounded the already staggering disparities in COVID-19 mortality rates among different populations. At the end of February 2021, the age-adjusted mortality rates for homeless single adults and adult families surpassed those of Black and Hispanic/Latinx New Yorkers, while the rate for homeless families with children was slightly lower than the rate for all New Yorkers. The age-adjusted mortality rate for homeless single adults was 153 percent higher than the rate for White New Yorkers, underscoring the profound inequality that places homeless individuals at such a grave risk of death due to COVID-19.

Image Description: A pie graph labeled “Race and Ethnicity of Adults and Family Households Sleeping in NYC Shelters Fiscal Year 2021 (through September).” There are six segments with correlating percentages: A gray segment is marked 57% for Black (non-Hispanic), a dark red segment is marked 31% for Hispanic, a green segment is marked 7% for White (non-Hispanic), a purple segment is marked 4% for Unknown, a blue segment is marked 0.6% for Asian/Pacific Islander, and an orange segment marked 0.102% for Native American.
Even as the City, State, and nation grapple with systemic racism perpetuated by the carceral state, New York State continued to release thousands of formerly incarcerated individuals (who are disproportionately people of color) directly into New York City shelters. In 2019, a full 52 percent of people released from New York State prisons to New York City were released directly to shelters, comprising 3,614 people, up from 3,466 individuals in 2018. That same year, DHS reported 523 single adults who were discharged directly from hospitals to shelters and 51 adults who were discharged directly from nursing homes to shelters.
Discrimination continues to play a truly pernicious role in denying people throughout the United States access to decent and affordable housing – whether based on race, disability status, arrest or criminal conviction, household composition, or source of income. Far too many homeless individuals have documented the prejudice and open bigotry they face when trying to gain access to housing, despite laws forbidding such discrimination. In January 2021, NY1 News highlighted several examples of landlords illegally refusing to rent to individuals with CityFHEPS rent vouchers.\textsuperscript{17} People returning from prison encounter nearly insurmountable hurdles as they search for permanent housing.\textsuperscript{18} Landlords routinely use background checks to screen out any member of a household with an arrest record, and New York law does not protect against this type of discrimination despite its disparate impact on people of color and other protected classes.\textsuperscript{19} As a result, those who are most in need of the stability of a home are instead left to languish in shelters or relegated to a harsh life on the streets.


\textsuperscript{18} Coalition for Women Prisoners. (2013). A Place to Call My Own: Women and the Search for Housing After Incarceration. \url{https://static1.squarespace.com/static/5b2c07e2a9e02851fb387477/t/5c4f69bb2a257b17/1548708255018/2013+Women+and+the+Search+for+Housing+After+Incarceration.pdf}

Image Description: An adult standing in front of a building wears a disposable surgical mask, hoop earrings, and a hoodie over a medical scrub top.

Image Description: On a public plaza, an adult who uses a wheelchair speaks into a microphone. Other adults stand behind the speaker and one holds a sign that reads “Everyone deserves a home!” The adults are wearing face masks.

Image Description: As snow falls, an adult in winter clothing stands on the sidewalk holding a plastic bag. A white van with its backdoor open is parked in the street. The door displays the logo of the Coalition for the Homeless.
CITY AND STATE REPORT CARD

NEW YORK CITY

<table>
<thead>
<tr>
<th>COVID-19 Response</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sheltered Homeless Single Adults</td>
<td>C-</td>
</tr>
<tr>
<td>Sheltered Homeless Families</td>
<td>B-</td>
</tr>
<tr>
<td>Homeless Students</td>
<td>F</td>
</tr>
<tr>
<td>Unsheltered New Yorkers</td>
<td>D</td>
</tr>
<tr>
<td>Emergency Food Distribution</td>
<td>A</td>
</tr>
<tr>
<td>Housing Production and Supply</td>
<td>D</td>
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<tr>
<td>Housing Vouchers and Stability</td>
<td>C-</td>
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<tr>
<td>Homelessness Prevention</td>
<td>A-</td>
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NEW YORK STATE

<table>
<thead>
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<th>COVID-19 Response</th>
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<tr>
<td>Unsheltered New Yorkers</td>
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<tr>
<td>Homelessness Prevention</td>
<td>B-</td>
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</table>
COVID-19 RESPONSE
SHELTERED HOMELESS SINGLE ADULTS

CITY: C-

The City’s delay in opening sufficient hotel capacity to protect homeless single adults from the dangers of congregate settings during a pandemic had deadly consequences. In the early weeks of the pandemic, advocates urgently called on the City to open the thousands of hotel rooms needed to allow homeless adults sleeping in congregate settings and on the streets to safely practice social distancing. Amid these delays, 120 homeless New Yorkers would die due to COVID-19 by the end of June 2020, and the age-adjusted mortality rate for sheltered homeless single adults between March and June 2020 was tragically nearly 80 percent higher than the overall New York City rate.

The use of hotels has proven to be life-saving. Since the City moved approximately 70 percent of single adult shelter residents into commercial hotels, the age-adjusted mortality rate has consistently been below the city’s overall rate on a monthly basis. However, COVID-19 cases and deaths are again on the rise, and coronavirus variants are spreading in New York City. With nearly 7,000 single adults still sleeping in congregate settings and thousands more staying on the streets, the need to expand the hotel program remains urgent.
COVID-19 RESPONSE
SHELTERED HOMELESS FAMILIES

CITY: B-

The configuration of the family shelter system has largely spared homeless families from the worst mistakes that placed homeless single adults at risk. Families with children are provided with their own dwelling units, and in most cases private bathrooms and kitchens. As a result, far fewer members of homeless families have lost their lives to COVID-19. However, Mayor de Blasio’s intransigence in his decision to relocate homeless adults from the Lucerne Hotel on the Upper West Side in response to the NIMBY outcry from some residents of that neighborhood led to unnecessary suffering and distress for families at multiple shelters, who were told they would be displaced to make room for the single adults from the Lucerne.

Moreover, the City’s callous practices at shelter intake have resulted in the lowest-ever percentage of homeless families found eligible for shelter. As a result, many families are caught in a web of uncertainty regarding their shelter eligibility and face the stress of trying to supply documents that are not available to them. During their often months-long limbo, these families remain ineligible for any type of rental assistance to help them secure housing. The primary goal of DHS should be to help homeless families move out of shelters and into permanent housing as quickly as possible, not to artificially suppress the shelter census by creating insurmountable obstacles at the front door of the system.
COVID-19 RESPONSE
HOMELESS STUDENTS

CITY: F

The City's flat-footed response to the needs of homeless students who require access to remote learning has been a shameful failure. Since the abrupt switch to remote learning in the spring of 2020, homeless students have faced an uphill battle as they attempt to access the virtual classroom. The majority of family shelters lack reliable internet access, and even after families with school-age children were provided City-issued iPads with cellular connectivity, many families reported a lack of cellular service or “dead zones” in their shelters.

Throughout the summer and fall of 2020, system-wide access problems persisted without ready and concrete solutions from the City. When homeless students and families were still reporting ongoing internet connectivity problems eight months into the pandemic, The Legal Aid Society and Milbank LLP, representing the Coalition for the Homeless and parents of DOE students, sued the City to gain immediate relief for students who had been denied their right to an education in E.G. v. City of New York, 20 CIV 9879 (SDNY). While the lawsuit and negative publicity spurred the City to initiate WiFi installation at more shelters, the delay has caused egregious educational disruption for thousands of homeless students, and may cause lasting damage as they struggle to catch up with their housed classmates.

Fortunately, a settlement agreement was reached in E.G. v. City of New York in early April 2021. The settlement requires the City to install WiFi at all remaining shelters for families with children by August 31, 2021. About 75 percent of these shelters have already been equipped with working WiFi as a result of the case. In addition to WiFi installation, the settlement establishes a streamlined process to resolve internet connectivity issues for students within days.
COVID-19 RESPONSE
UNSHELTERED NEW YORKERS

CITY: D     STATE: F

Mayor de Blasio’s and Governor Cuomo’s responses to the needs of unsheltered homeless New Yorkers were abysmal prior to the pandemic, and have since only gotten worse. Much of the city shut down after the Governor announced “New York State on PAUSE” in March 2020, and there was a notable increase in the number of unsheltered homeless people on the city’s streets and in the transit system. A wave of newly homeless individuals who had been displaced from very tenuous housing arrangements and were afraid to enter congregate shelters were bedding down in public spaces, often unable to find essential resources like food, clothing, bathrooms, and PPE in the new, highly restrictive environment.

The Governor’s response was to shut down overnight subway service, calling the presence of homeless New Yorkers “disgusting.” To enforce the shutdown, hordes of police, joined by City outreach workers, were deployed to force people from the subways to the streets. Many homeless New Yorkers were offered transportation to congregate shelters, only to return to the streets immediately upon arriving at shelters holding hundreds of other people – fearing for their safety amid the crowded conditions.

Once again displaying his apparent disdain for homeless people, Governor Cuomo proposed in his executive budget an expansion of the conditions under which people – even those who have no apparent mental illness – could be taken against their will and transported to psychiatric hospitals, emergency rooms, or mental health crisis centers. The proposed expansion specifically targeted people who are unhoused by broadening the involuntary commitment criteria to people who lack appropriate clothing or shelter. Since the Governor entered office, he has systematically reduced funding and flexibility for Medicaid, effectively dismantling the voluntary mental health care system for the lowest-income and homeless New Yorkers. As of January 2021, only 2.5 percent of eligible adults in New York City had received any of the specialized community-based Medicaid services for which they were eligible in the prior 12 months.Mayor de Blasio’s response has not been much better. In contravention of CDC guidance discouraging sweeps of unsheltered homeless people staying on the streets during the pandemic, DHS, along with agencies like NYPD and the Department of Sanitation, continued to conduct sweeps of unsheltered homeless New Yorkers. This counterproductive extirpation of the most rudimentary protection from the elements people could find forced vulnerable homeless New Yorkers to move, losing belongings like basic hygiene supplies, and further engendered mistrust in government agencies. The City has also continued to resist calls for more hotel rooms for unsheltered New Yorkers, known as stabilization beds. Between March and December 2020, the stabilization bed census increased by just 500, even as the need for safe, indoor spaces numbered in the thousands of beds.

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COVID-19 RESPONSE
EMERGENCY FOOD DISTRIBUTION

CITY: A  STATE: B

The Mayor and Governor mostly rose to meet the ballooning hunger crisis across the state by expanding access to emergency food for low-income and homeless New Yorkers. The City set up grab-and-go meals at many public schools throughout the five boroughs, including hundreds that operated as community meal hubs for all New Yorkers. Governor Cuomo also provided $25 million in funding to food banks and other programs throughout the state under the Nourish New York program (set to expand in 2021-22), which provided a critical resource in the midst of increased need during the pandemic. However, the Governor has cut outreach funds to boost participation in Federal SNAP (Supplemental Nutrition Assistance Program) and WIC (Women, Infants, and Children) programs, which provide critical food and nutrition assistance to low-income New Yorkers.

Image Description: An adult wearing a face mask and winter coat stands in front of a van that displays the logo of the Coalition for the Homeless.

Photo by Coalition for the Homeless
HOUSING NEW YORK

At the beginning of Fiscal Year 2021 (July 2020), Local Law 19 went into effect, requiring the City to set aside at least 15 percent of new apartments for homeless households in all City-subsidized buildings larger than 40 units. This law was the culmination of years of advocacy, and the City Council adopted it with a veto-proof majority. In Fiscal Year 2020, the Fiscal Year immediately preceding the implementation of Local Law 19, Mayor de Blasio’s Housing New York plan once again short-changed homeless New Yorkers and highlighted the critical need for the new law: Just 1,417 apartments for homeless New Yorkers were financed, out of 30,281 total apartments underwritten by the City. This was the lowest percentage (4.7 percent) of total apartments financed for homeless households since Mayor de Blasio launched Housing New York, and the second-lowest number since Fiscal Year 2014, the very beginning of the Mayor’s housing plan.

Image Description: A graph labeled “Housing New York Total Units and Homeless Set-Aside Units Financed Fiscal Years 2014 – 2020.” The vertical axes list numbers 0 to 35,000 in increments of 5,000 on the left, and percentages from 0% to 12% in increments of 2 on the right. The horizontal axis lists the years 2014 through 2020. At each year are bars in two sections: A gray section shows the number of Housing New York homeless units financed, with a value of 1,417 for the year 2020, and a dark red section shows the number of Housing New York non-homeless units financed. A green line marks the percent of homeless units financed at each year, with a value of 4.7% for 2020.

Source: NYC Department of Housing Preservation and Development and Mayor’s Management Reports
Supportive housing production continues to lag far behind the pace necessary to meet the dire needs of homeless individuals living with serious mental illnesses, substance use disorders, or other disabilities. In Fiscal Year 2020, just 1,417 homeless single adults were placed in supportive housing – the lowest number since 2004. At the same time, the number of single adults who slept in a DHS shelter at any point during Fiscal Year 2020 reached a new high of 43,803. Many homeless individuals living with a mental illness or substance use disorder face nearly insurmountable barriers as they navigate the process of applying for and being accepted into supportive housing, including onerous documentation requirements, clinical evaluations, and proof of homelessness, among other prerequisites. Even if applicants make it through this difficult bureaucracy, there is currently only one available unit for every five approved applicants.

As the number of homeless adults who need supportive housing continues to increase, Mayor de Blasio has implemented steep cuts to his supportive housing pipeline, NYC 15/15. The 2022 Capital Commitment Plan retains cuts to supportive housing production totaling $246 million between 2020 and 2024. Conversely, Governor Cuomo’s executive budget includes $250 million in capital appropriations for supportive housing and a Capital Plan that projects the continuation of this level of funding in each of the next five years, to fulfill his 2016 commitment to create 20,000 units of supportive housing over 15 years. The continued low availability of supportive housing placements, however, demonstrates that the City and State’s separate supportive housing plans are producing far fewer units than a joint agreement would have. Many projects receive funding from multiple sources, and there is a lack of clarity and transparency about total unit counts produced by these separate plans.

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Image Description: A graph labeled “Annual Supportive Housing Placements for Homeless Single Adults and Unduplicated Single Adults Sleeping in Shelters Each Year Fiscal Years 2002 - 2020.” The vertical axes list numbers 0 to 4,500 in increments of 500 on the left, and numbers 15,000 to 50,000 in increments of 5,000 on the right. The horizontal axis lists the years 2002 through 2020. At each year is a gray bar that lists single adult supportive housing placements, with a value of 1,417 for the year 2020. A dark red line marks the unduplicated number of single adults sleeping in shelters, with a value of 43,803 for the year 2020.
The City’s housing subsidy programs for homeless New Yorkers continue to present challenges for those wishing to exit shelters quickly and permanently. In Fiscal Year 2020, there were fewer exits from shelters with City-initiated voucher programs than in the previous two years. However, the drop in City-subsidized exits was due almost entirely to a sharp decrease in exits with the Special One-Time Assistance Program (SOTA). This program allows homeless New Yorkers to move anywhere in New York State or out of state, but provides only one year of rent assistance. In its initial roll-out, SOTA perpetuated instability among formerly homeless families due to insufficient vetting of participating landlords and the poor conditions found in many of the apartments available to SOTA recipients. Exits with CityFHEPS, a longer-term subsidy, remained relatively consistent with equivalent programs compared with previous years.

Note: Includes vouchers used for shelter exits only, not prevention. Annual figures are calculated estimates based on the percentage of vouchers used for shelter exits across all years.

Source: NYC Department of Homeless Services
In Fiscal Year 2020, the percentage of homeless households exiting shelters with some type of assistance (City vouchers, or State or Federal assistance) reached a new high of 69 percent – a welcome change from the later Bloomberg administration years, when there were virtually no programs available to help homeless New Yorkers move out of shelters and into permanent housing. However, this high percentage relies heavily on the assistance provided to nearly 2,000 households who exited shelters using the time-limited SOTA program.

Despite the promising number of subsidized shelter exits in Fiscal Year 2020, the housing assistance provided to homeless New Yorkers has never fully kept pace with the need, and unrealistically low limits on maximum rents constrain their utility. It remains extraordinarily challenging for individuals and families to exit shelters, even when they have a rent subsidy in hand, and this leads to longer shelter stays. Among a cohort of homeless households who received a voucher in 2018, a substantial number were still sleeping in shelters as of November 2020: Nearly 20 percent of these single adults and families with children and 27 percent of adult families had yet to secure permanent housing. Moreover, thousands of households who had vouchers in 2018 left shelters after they were unable to use their rent subsidies, at least in part due to ubiquitous and unlawful forms of discrimination.
With the exception of those established within the context of litigation, the State has failed to provide housing subsidies to homeless New Yorkers and those at risk, even when fully funded by the Legislature, and Governor Cuomo has consistently opposed popular and viable plans to do so, including Home Stability Support and the Housing Access Voucher Program. The State offers only meager contributions toward City housing subsidies: Just 9 percent of the total cost of City rent subsidies is reimbursed by the State, and the Governor annually disqualifies the City from reimbursement for subsidies for which all of the counties outside New York City are eligible to receive aid.

![Outcomes for Homeless Households with a City Voucher in 2018 as of November 2020](source: NYC Department of Homeless Services)
RETURNS TO SHELTERS

For the most part, Mayor de Blasio’s housing vouchers have accorded families and individuals exiting shelters much more stability than Mayor Bloomberg’s failed Advantage program. Six years into the launch of Mayor de Blasio’s original rent subsidy programs, LINC and CityFEPS, fewer than 10 percent of homeless households have returned to shelters after having exited with the help of one of those programs. By comparison, 35 percent of families who had received Advantage subsidies returned to shelters within six years. SEPS, which was created shortly after LINC and CityFEPS, has a return rate of less than 1 percent after five years. In late 2018, SEPS, LINC, and CityFEPS were consolidated into the CityFHEPS program, which after two years yields a shelter return rate of 0.2 percent. Nearly 7 percent of families with SOTA returned to shelters three years in – placing it on a trajectory for worse performance than Advantage in its ability to offer housing stability.23

This return rate is also likely understated, considering the number of families who moved out of state where they may have become homeless after their one year of assistance ended, unbeknownst to DHS.

23 Image Description: A graph labeled “Rate of Return to Shelters After Exit, by Subsidy Type.” The vertical axis lists percentages from 0% to 40% in increments of 5. The horizontal axis is labeled “Year 1” through “Year 6.” Six lines mark the rate of return to shelters at the relevant out-year for each subsidy: a gray line for “LINC,” with a value of 7.9% for year 6, a dark red line for “CityFEPS,” with a value of 9.8% for year 6, a green line for “SEPS,” with a value of .3% for year 5, a purple line for “SOTA,” with a value of 6.9% for year 3, a light blue line for “CityFHEPS,” and an orange line for “Advantage,” with a value of 35% for year 6.

Source: NYC Department of Homeless Services
The most effective protections against homelessness during the pandemic have been the residential eviction moratoria created by a patchwork of Executive Orders and the late December enactment of the COVID-19 Emergency Eviction and Foreclosure Prevention Act. The halt on most evictions has undoubtedly prevented tens of thousands of households from becoming homeless, despite the severe economic upheaval of the past year. In calendar year 2020, approximately 2,026 families applied for shelter each month, a reduction of 27 percent from an average of 2,763 families in calendar year 2019.

It is important to note that the pause on evictions, while essential, has merely delayed the inevitable avalanche of homelessness likely to occur once the final moratorium is lifted. The City and State have not adopted rent assistance programs on a scale to meet the need to help tenants pay off their arrears, proactively pay their ongoing rent, and avoid eviction in the future. While there is room for improvement, the City has helped people pay off their accumulating arrears. The Department of Social Services continued to use City subsidies for prevention efforts, with nearly 3,000 families gaining access to rent subsidies to prevent homelessness in Fiscal Year 2020. The State, meanwhile, inexplicably refused to waive a requirement that households seeking a State FHEPS rent subsidy must have an open eviction case – a Catch-22, given the current eviction moratoria. Only in March 2021 did the State agree to temporarily waive this requirement when faced with a lawsuit filed by The Legal Aid Society and Hughes Hubbard & Reed LLP. The State also squandered an opportunity to efficiently distribute the first tranche of Federal rental assistance funds from the CARES Act by creating a confusing, inaccessible application process with overly rigid requirements.

With more Federal assistance flowing to New York, it is imperative that the City and State collaborate to ensure that households – including those who are undocumented and those with limited access to technology – are able to access eviction prevention and rental assistance funds as quickly and easily as possible.
Image Description: A graph labeled “Households Avoiding NYC Shelters with City-Initiated Voucher Programs Fiscal Years 2016-2020.” The vertical axis lists numbers 0 to 3,500 in increments of 500. The horizontal axis lists years 2016 to 2020. Each year has a bar in multiple sections showing the types of vouchers and corresponding shelter placement prevention numbers: A green section shows “CityFHEPS,” with a value of 2,925 for the year 2020, a dark red section shows “SEPS,” and a gray section shows “CityFEPS.”
SUMMARY AND RECOMMENDATIONS

The responsibility for keeping homeless New Yorkers safe from the COVID-19 pandemic fell largely on the City. The City’s response proved uneven, and unfortunately showcased how ill-prepared they were to deal with the sudden onslaught of a new and deadly airborne virus. The State, likewise, made particularly egregious mistakes that were detrimental to the wellbeing of unsheltered homeless New Yorkers.

**The pandemic has laid bare with stark and unequivocal gravity that housing is health care.** Homeless New Yorkers could not simply stay home to avoid contracting or transmitting the virus. Those sleeping in congregate shelters were left at the mercy of punitive and slow-to-respond policies that have come to exemplify the shelter system – a system that has become larger than any humane response to homelessness should need to become. Unsheltered New Yorkers, likewise, faced an abrupt end to many services and resources they had come to rely on for survival, along with kneejerk implementation of aggressive and deeply counterproductive policing tactics.

The past year was unprecedented in so many ways, but the coming year could see a new and shocking increase in homelessness if our elected leaders do not take urgent and large-scale action to keep low-income New Yorkers from being evicted into homelessness. Indeed, the scale of the potential crisis is severe: In New York State, there are an estimated 973,000 severely cost-burdened renter households, which include 347,000 people with disabilities, 637,000 children, and 318,000 seniors. The majority of individuals in these renter households are Black and Latinx. Governor Cuomo and Mayor de Blasio must prevent these New Yorkers from becoming homeless and also enact proven policies to help the tens of thousands of currently homeless individuals and families move into the safety and dignity of permanent homes.

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**RECOMMENDATIONS**

**HOUSING**

**Governor Cuomo must:**

- Implement the Home Stability Support (HSS) program to create a State-funded, long-term rent subsidy for households receiving public assistance who are homeless or at risk of losing their housing due to eviction, domestic violence, or hazardous housing conditions.

- Implement the Housing Access Voucher Program (HAVP) to create a State-funded, long-term rent subsidy for homeless and very low-income households.

- Accelerate the pace of production of the 20,000 units of supportive housing pledged by the Governor in 2016 by completing them by 2026 instead of 2031, and fully fund the construction and operation of the remaining 14,000 units.

- Ensure effective reentry planning for individuals being released from State prisons in order to identify viable housing options prior to each individual’s scheduled release date.

- Fund the creation of supportive housing specifically for individuals reentering the community from State prisons.

- Reform punitive parole practices that allow parole officers to exercise wide discretion and deny placement at potentially viable addresses for individuals leaving State prisons.

**Mayor de Blasio must:**

- Implement the Fair Chance for Housing Act (Intro. 2047) to prohibit housing discrimination on the basis of an arrest or conviction record in New York City.

- Raise the rent levels for CityFHEPS rent vouchers to Section 8 payment standards and eliminate the benefits cliff (Intro. 146).

- Help families move out of shelters with long-term rent subsidies, including Section 8 vouchers.

- Allocate at least three-quarters of tenant-based Section 8 vouchers made available each year to homeless households so they can exit shelters.

- Accelerate the timeline for the creation of 15,000 City-funded supportive housing units by scheduling their completion by 2025 rather than 2030.

- Create an impartial appeals process through the Human Resources Administration (HRA) for individuals applying for supportive housing who are denied.

- Eliminate bureaucratic barriers to placement in supportive housing, with a true Housing First model, including relaxing the standard for documenting unsheltered homelessness for the purpose of establishing eligibility for supportive housing.

- Implement a system of notifying supportive housing residents of their rights as tenants and clients of service providers (Intro. 2176).

- Legalize accessory dwelling units with adequate safety standards and appropriate tenant protections.

- Extend the right to counsel to all income-eligible tenants regardless of zip code and ensure that funding of legal services providers enables them to meet the demand.

**Mayor de Blasio and Governor Cuomo should together:**

- Call on the Federal government to fund Section 8 vouchers as an entitlement for all households who meet the eligibility standards.

- Fund the production of more housing specifically for homeless single adults, separate and apart from their respective existing supportive housing commitments.

- Expand access to supportive housing for adult families – a population with disproportionately high levels of disability and complex needs.

- Ensure that undocumented New Yorkers have equal access to affordable and supportive housing and eviction prevention assistance.
SHELTERS AND UNSHELTERED HOMELESSNESS

Mayor de Blasio must:

- Provide single-occupancy hotel rooms for all homeless individuals living in congregate shelters and those living on the streets or sleeping in the subway system for the duration of the COVID-19 pandemic.

- Initiate the redesign of emergency shelter facilities, with the expectation that the risk of exposure in future pandemics will require the provision of private rooms including bathrooms for each individual or household, and with attention to the principles of safety, public health, accessibility, and individual autonomy.

- Provide reliable internet access to all families and individuals sleeping in shelters.

- Reform the process of providing outreach to unsheltered homeless individuals to a client-centered, harm reduction approach. This reform should include expanding the number of providers that conduct outreach in the subways. The following reforms should also be included:
  - Open at least 3,000 new Safe Haven and stabilization beds in single-occupancy rooms and offer them to all unsheltered homeless individuals.
  - Expand the number of Safe Haven and stabilization beds for women.
  - Prohibit NYPD from responding to 311 calls requesting assistance for homeless individuals and remove NYPD from all homeless outreach functions. Calls to 311 should only result in the deployment of contracted DHS outreach workers.
  - Allow individuals with multiple disabling conditions, intellectual or developmental disabilities, or chronic/severe medical issues to enter Safe Havens without first proving they have been on the streets for nine months and/or out of the DHS municipal shelter system for six months.
  - Create a role for peers in outreach and ensure that unsheltered New Yorkers have a voice in policymaking.
  - Equip outreach teams with essential items such as socks, hand sanitizer, backpacks, clothing, and coats.
  - Expand access to low-barrier medical and mental health care, including virtual care and street medicine.
  - Prohibit the use of CCTV to monitor unsheltered New Yorkers in the transit system and public spaces.
  - Implement the CCIT-NYC campaign’s proposal for non-police responses to mental health crises.
  - Cease encampment-clearing operations and street sweeps, focusing instead on connecting people to resources they want.
  - Open a network of public restrooms and showers across the city that are staffed and cleaned consistent with COVID-19 precautions. Public restrooms should be available 24 hours a day.
  - Open a sufficient network of 24-hour warming and cooling centers throughout the city with proper air filtration and ventilation, appropriate safety protocols, and adequate personal protective equipment.
  - Administratively clear all summonses that have been issued under the Subway Diversion Program.
**Governor Cuomo must:**

- Ensure that homeless individuals are not taken against their will to new crisis centers, which must by law only serve voluntary patients.

- Immediately halt the deployment of additional MTA police in response to homeless people located in transit facilities and trains.

- Reverse harmful cuts to New York City’s emergency shelter system that have resulted in the State short-changing the City by hundreds of millions of dollars over the past decade, and share equally with the City in the non-Federal cost of sheltering homeless families and individuals.

- Replace the grossly inadequate $45 per month personal needs allowance for those living in shelters with the standard basic needs allowance provided to public assistance recipients.

- Permanently eliminate the statewide requirement that shelter residents pay rent for shelter or enroll in a savings program as a condition of receiving shelter.

- Promptly implement regulations and funding for medical respite programs included in the State budget.

**Mayor de Blasio and Governor Cuomo should together:**

- Publish detailed COVID-19 statistics on infection, hospitalization, and mortality among homeless New Yorkers, including family composition, age, shelter status and type of shelter, race, and other relevant demographics, including risk factors.

- Ensure that shelter residents, unsheltered New Yorkers, and staff who serve people who are homeless are offered immediate and low-barrier access to available vaccines, including informed consent and clear, consistent, culturally competent, and accessible information.

- Implement a less onerous shelter intake process for homeless families in which 1) applicants are assisted in obtaining necessary documents, 2) housing history documentation is limited to the prior six months, and 3) DHS-identified housing alternatives are investigated to confirm their availability, safety, and lack of risk to the potential host household’s tenancy. For adult families, the City must accept verification of time spent on the streets from the widest possible array of sources, including outreach teams, soup kitchen volunteers, social workers, health care providers, and neighbors.

- Fund additional services for individuals living with severe and persistent mental illnesses, such as expanding access to inpatient and outpatient psychiatric care, providing mental health services in more single adult shelters, and adding more Assertive Community Treatment (ACT) teams for homeless people.

- Reinstate 24-hour subway service, and cease police profiling of homeless individuals in the transit system.

- Open and staff overdose prevention sites as a harm reduction model.
APPENDIX ON DATA SOURCES

PUBLIC DATA SOURCES


- Temporary Housing Assistance Usage Reports, via NYC Mayor's Office of Operations, pursuant to Local Law 37 of 2011: [https://www1.nyc.gov/site/operations/performance/other-reporting.page](https://www1.nyc.gov/site/operations/performance/other-reporting.page)

- NYC Department of Homeless Services Stats and Reports: [https://www1.nyc.gov/site/dhs/about/stats-and-reports.page](https://www1.nyc.gov/site/dhs/about/stats-and-reports.page)

- NYC Mayor's Management Reports: [https://www1.nyc.gov/site/operations/performance/mmr.page](https://www1.nyc.gov/site/operations/performance/mmr.page)

- Annual Report on Deaths Among Persons Experiencing Homelessness, pursuant to Local Law 7 of 2012


Other data not publicly reported were received in response to Freedom of Information Law requests made to the specified agency or through documents provided to the Coalition for the Homeless by the Department of Homeless Services in fulfillment of our monitoring role under the Callahan Consent Decree or to comply with other agreements.