A Roadmap to Ending Homelessness

A Guide to Proven, Cost-Effective Policies that Can Prevent and End Homelessness in New York City

Published September 2013
Table of Contents

3 Introduction

5 About United to End Homelessness

6 Endorsers

7 Make Ending Homelessness & Expanding Affordable Housing A Top Mayoral Priority.

11 Efforts to End Homelessness: The Essentials

11 Programs to prevent homelessness

14 Expand and improve housing assistance resources

18 Guarantee adequate shelter, health care and services for all people experiencing homelessness

22 Continue investment in supportive housing

27 Preserve and create more affordable housing for New York’s lowest income households

31 Improve planning around natural disaster-induced homelessness

33 Create an Interagency Council on Homelessness

35 Conclusion

36 Endnotes
Introduction

United to End Homelessness 2013

Steps the next Mayor and City Council Must Take to Resolve New York City’s Homelessness Crisis

The Homelessness Crisis in NYC Today

New York City’s next Mayor and City Council will confront unprecedented levels of homelessness. By the end of 2012, more than 57,000 people, including more than 22,000 children, slept each night on the street or in a City shelter, the largest homeless shelter population ever recorded. This number represents only a fraction of the total number of families and students in temporary housing; last year, the Department of Education (DOE) identified 69,545 school-aged children living in temporary housing situations, and the number continues to grow every year. Since 2002, the number of homeless people sleeping each night in Department of Homeless Services shelters has increased by 61 percent and the number of homeless families has risen by 73 percent. An additional 5,000 people sleep each night in other municipal shelters (including runaway and unaccompanied youth, domestic violence survivors, and people living with AIDS), and thousands more sleep on the streets, in cars, in abandoned buildings or in other public spaces. New York City’s youth shelter system is overwhelmed and a record 80% of domestic violence emergency shelter residents are leaving shelters with no safe place to go. And none of these statistics include the thousands of New Yorkers displaced by Hurricane Sandy, many of whom were low-income and in need of long-term housing aid.

While there are many contributing factors to homelessness, the high cost of housing and the lack of rental assistance remain at the heart of the problem, and barriers to education prolong the problem from generation to generation. Unlike in the past, the overwhelming majority of homeless households have very limited access to affordable housing, making it nearly impossible for most individuals and families to move from shelter into permanent housing. And compounding the harm caused to thousands of vulnerable children and adults, the City is paying a huge financial price for record homelessness. In FY 2012, New York City spent more than $1 billion on shelter and services for homeless people, an 86% increase from FY 2002. In addition, New York City’s housing affordability problems have worsened significantly over the past decade, putting more people at risk of homelessness. According to Census Bureau data, 55% of renter households are spending more than 30% of their income on rent, a one-third increase since 2000, and 28% of renters are spending more than half of their income on rent.

Without a decent and stable place to live, our neighbors and friends struggle to lead healthy lives, obtain good jobs, and attain a proper education for themselves and their children. Housing instability is particularly detrimental to the education of children because of the resulting school transfers, making shelter placements near the original school crucial. Prioritizing homeless policies and programs is smart planning for our communities. Experts know it’s more cost-effective to permanently house homeless individuals and families than to let them cycle through expensive emergency housing systems. This is sound fiscal policy and good for all New Yorkers, too.
United to End Homelessness
A Solutions-Based Platform

There is hope for the future. New York City has historically been a leader in innovative policies and programs—like permanent supportive housing, homelessness prevention, and targeted affordable housing programs—that have successfully reduced the homeless population in the past. City agencies must continue to work collaboratively on this problem. Confronting New York City’s record homelessness will require strong leadership, improved cooperation between the Department of Homeless Services (DHS), Human Resources Administration (HRA), Housing Preservation and Development (HPD), Department of Youth and Community Development (DYCD), Department of Health and Mental Hygiene (DOHMH), Department of Education (DOE), the Coalition on the Continuum of Care, and other city, state, and federal agencies, and smart, cost-effective policies. The United to End Homelessness Platform details the necessary steps the next Administration must take to realize this goal.

United to End Homelessness’s recommendations are built on the following principles:

• Ending not managing homelessness

• Preventing homelessness by addressing housing instability with targeted interventions to stabilize New Yorkers in their communities

• When homelessness absolutely cannot be prevented, providing safe, decent, appropriate shelter for those who need it

• Providing a variety of paths for homeless people to access permanent housing they can afford in the community, and ensuring stability with appropriate services

• Building a true continuum of homelessness interventions to serve households with varying needs

• Developing cost-effective solutions that rely on creative and diverse funding streams

• Building on national and local best practices

• Working collaboratively across systems and with partners in government, private and public sectors, and consumers, to build a holistic system for ending homelessness in NYC
United to End Homelessness was formed in late 2012 by a cross section of homeless and housing advocates, providers, and faith leaders to speak in a unified voice during the 2013 mayoral campaign season about creating real solutions for our clients, neighbors, and friends who are homeless or at risk of homelessness. Although we are focused primarily on the mayoral election, we hope to wield influence in the upcoming City Council and citywide office elections as well. We seek to have influence beyond just the campaign season by creating opportunities for all stakeholders to be at the table when issues of homelessness and the need for extremely low-income housing are discussed.

Our platform has been endorsed by over 130 homeless and housing service providers, faith communities, and other civic organizations across the city. Our platform lays out the three overarching steps that the next Administration must take to combat homelessness. Following the election we are committed to seeing that the ideas in our platform are implemented and to act as a resource for the next Administration on issues of homelessness and affordable housing.

**Coordinating Committee**

Homeless Services United  
Citizens’ Committee for Children of New York  
Supportive Housing Network of New York  
New Destiny Housing  
Coalition for the Homeless  
Care for the Homeless  
Enterprise Community Partners  
Goddard Riverside Community Center  
Interfaith Assembly on Homelessness and Housing  
Habitat for Humanity New York City  
Human Services Council  
HELP USA  
Coalition of Behavioral Health Agencies

**Acknowledgements**

We would like to thank the communications department at Fifth Avenue Presbyterian Church for its invaluable assistance designing and formatting this briefing book.
Endorsers

Abyssinian Baptist Church
Agulia, Inc.
Alembic Community Development
Association for Neighborhood and Housing Development (ANHD)
Association for Rehabilitative Case Management & Housing
Association to Benefit Children
Barrier Free Living
Brainpower, Inc.
BronxWorks
Brooklyn Community Housing and Services
Brotherhood Synagogue
CAMBA
Cardinal McCloskey Services
Center Against Domestic Violence
Center for Urban Community Services
The Church of St. Francis of Assisi
The Church of St. Luke in the Fields
The Church of St. Paul and St. Andrew
The Church on the Hill
CitiWide Harm Reduction
Coalition of Domestic Violence Residential Service Providers
Columbia Kavanagh House, Inc.
Community Access
Community Housing Innovations, Inc.
Community Service Society
Community Voices Heard
Concern for Independent Living
Concourse House
CONNECT
Corporation for Supportive Housing
Covenant House New York
Emergency Shelter Network
Empire State Coalition of Youth and Family Services
Encore Community Services
Episcopal Diocese of New York
Federation of Protestant Welfare Agencies
Fifth Avenue Presbyterian Church
Food First Family Project, Inc.
Fox House
Girls Educational & Mentoring Services
Good Shepherd Services
Harlem United
Henry Street Settlement
Hour Children
Housing and Services, Inc.
The Housing Collaborative, LLC
Housing Court Answer
Housing Solutions USA
Housing Works
Hunger Action Network of New York State
Information for Families, Inc.
inMotion, Inc.
Jericho Project
Judson Memorial Church
Lantern Community Services
Lawyers for Children, Inc.
Lenox Hill Neighborhood House
Legal Aid Society
LGBT Faith Leaders of African Descent
Life Experience and Faith Sharing Association
Long Island Crisis Center
Lower East Side Harm Reduction Center
Mental Health Association of New York City
Metro Baptist Church
Metropolitan Community Church of New York
MFY Legal Services, Inc.
National Action Network
National Association for Social Workers NYC
Nazareth Housing, Inc.
Neighborhood Coalition for Shelter
Neighbors Together
New Light Baptist Church of Greater New York
New York Asian Women’s Center
New York City Anti-Violence Project
New York Lawyers for the Public Interest
New York Province of the Society of Jesus
The New York Response, Inc.
New York Society for Ethical Culture
New York State Tenants and Neighbors Coalition
New York State Wide Senior Action Council, Inc. (NYC Chapter)
North Brooklyn Homeless Task Force
Northern Manhattan Improvement Corporation
NYC Providers of Health Care for the Homeless
Our Lady Mount Carmel – St. Benedicta Parish
Palladia, Inc.
The Partnership for the Homeless
People Organized for Our Rights (P.O.O.R.)
Picture the Homeless
Pratt Area Community Council
Praxis Housing
Project Hospitality
Project Renewal, Inc.
Queers for Economic Justice
Rauschenbusch Metro Ministries
Safe Horizon
Sanctuary for Families
Settlement Housing Fund
Sisters of Charity New York Leadership Team
St. Francis Friends of the Poor
St. John’s Place Family Center, HDFC
Tenants Political Action Committee
Theatre of the Oppressed NYC
Thorpe Family Residence
Unique People Services
United Neighborhood Houses
University Settlement
Urban Justice Center
Urban Pathways
Urban Resource Institute
Violence Intervention Program
Voices of Community Activists and Leaders (VOCAL-NY)
Volunteers of America Greater New York
West End Collegiate Church
West End Presbyterian Church
West End Residences HDFC, Inc.
West Side Federation for Senior and Supportive Housing
Weston United
Women In Need
Xavier Mission
YWCA of Brooklyn
Make ending homelessness and expanding affordable housing a top mayoral priority

Ending homelessness and expanding affordable housing is not only a moral imperative but is essential to the well-being of the entire City. The lack of stable housing exacerbates negative outcomes for individual health and mental health, family well-being, educational attainment and child development. Conversely, a number of innovative approaches have demonstrated how appropriate, stable housing can promote positive outcomes.

Housing Promotes Individual and Community Well-Being

Housing Promotes Health

Challenge
Being homeless is both a cause and effect of serious health care issues, including addiction, psychological disorders, HIV/AIDS, and a host of order ailments that require long-term, consistent care.7

Being homeless inhibits medical care and can aggravate medical problems: housing instability detracts from regular medical attention, access to treatment, and recuperation. This inability to obtain appropriate medical treatment can aggravate these problems, making them both more dangerous and more costly with people experiencing homelessness are more likely to access the most costly health care services.8

Solution
Supportive housing offers safe and appropriate housing in the community to people who would otherwise be institutionalized or homeless. Once placed in supportive housing, vulnerable and disabled individuals greatly reduce their use of expensive emergency services. This produces significant cost savings to the public that often exceeds the cost of building, operating and providing services in supportive housing. For example, one supportive housing program that targeted high-need Medicaid clients incurred net savings of over $30,000 per unit.9

Housing Stability Strengthens Families

Challenge
Homelessness has been shown to exhaust the social networks that some families have and also be the source of conflict, trauma, and violence.10
Make Ending Homelessness and Expanding Affordable Housing a Top Mayoral Priority

Homelessness is highly linked to family separations, including foster care and involvement with child welfare services.\(^{11}\)

The effects of housing instability may be felt indirectly in many areas, from parenting to self-esteem, as turmoil, fear, self-blame, hopelessness and uncertainty rise.\(^{12}\)

For many this increases personal and family stress which feeds marital problems and exacerbates negative behaviors such as substance abuse and child abuse.\(^{13}\)

This increases the indices of child welfare interventions, increasing the cost on social services.\(^{14}\)

**Solution**

Keeping Families Together, a recent pilot project led by the Corporation for Supportive Housing, has demonstrated the value of stable housing combined with support services for vulnerable families. Data from the Keeping Families Together evaluation show that supportive housing can stabilize vulnerable families, so that they become safe and healthy environments for children. Child welfare involvement among Keeping Families Together families declined significantly during the pilot and most families had no new abuse or neglect cases after moving to supportive housing. Six children were reunited with their families from foster care—and were still with them when the pilot ended. Average school attendance improved steadily among Keeping Families Together school children.\(^{15}\)

---

Housing Prevents Youth Sex Trafficking

**Challenge**

A recent study by Covenant House and Fordham University demonstrates the close relationship between housing instability and sex trafficking. Of the runaway and homeless youth surveyed who reported engaging in commercial sex activity, 48% indicated that a lack of a safe place to sleep was a main reason for their initial entry into prostitution or other commercial sex.\(^{16}\)

A 2008 study released by John Jay University and the Center for Court Innovation interviewed approximately 300 minor youth engaged in the commercial sex trade and found 87% of these youth reported they wanted to exit the sex trade, but could not do so until they access to shelter and another form of income. This study found that the number one self-identified need of young people involved in the sex trade in NYC was shelter and indicates the most effective way to impact the number of NYC youth involved in the sex trade would be to fund youth shelters.\(^{17}\)

**Solution**

New York City’s Runaway and Homeless Youth shelters provide an essential lifeline to young people in need of youth-specific emergency shelter and transitional beds. While all shelters serve youth who are at risk of or have experienced sex trafficking, the options for youth with experience in sex work are extremely limited. GEMS is one specialized option available to cisgender young women with experience in the sex trade. However, experiences in the sex trade amongst youth vary and are inclusive of all genders and sexual identities, and more options are needed so that all youth have the...
Make Ending Homelessness and Expanding Affordable Housing a Top Mayoral Priority

option of housing that is safe and supportive. Additionally, there are insufficient shelter beds to meet demand in the Runaway and Homeless Youth shelter system, and as a result, shelters must turn away hundreds of young people each month. Absent sufficient shelter beds many young people trade sex for survival needs.

Housing Stability Promotes Child Educational Outcomes

Challenge
The experience of homelessness inhibits the physical, emotional, cognitive, social, and behavioral development of children from conception to young adulthood. Compared to poor children who are housed, homeless children have worse health outcomes and more developmental delays.18

Children experiencing homelessness are sick four times more often than other children.19 Studies report that poor homeless children are more likely to have fair or poor health compared with either low-income but housed counterparts20 and are more likely to suffer from inadequate food consumption, poor nutrition, and obesity.21

Solution
Housing solutions for homeless families range from affordable housing in private developments, Federal housing programs including Public Housing and Section 8 vouchers, supportive housing for families with special needs, and rent subsidies, all of which are described in further detail on in this book.

Housing is a Vital Necessity for Domestic Violence Survivors

Challenge
Domestic violence victims are often faced with an impossible choice: remaining with an abuser or becoming homeless due to their financial dependence on their abuser. No one should have to choose between homelessness and abuse.

Solution
Affordable housing is truly a lifesaving resource for victims of domestic violence. The Department of Human Resources operates a small system of Domestic Violence shelters that provide needed emergency housing and services for domestic violence survivors for a very limited amount of time. Domestic violence shelter residents need to have equitable access to safe homeless housing resources including rental subsidy programs, HPD and federal housing resources and supportive housing to help them permanently escape abuse and prevent homelessness. Their unique needs should be considered when crafting city policy to prevent and end homelessness.

Housing Stability Promotes Child Development and Education

Challenge
Numerous studies have linked housing instability to a range of damaging child and adolescent outcomes related to education.
Make Ending Homelessness and Expanding Affordable Housing a Top Mayoral Priority

Students in temporary housing have the legal right to continued enrollment in their original schools, but all too often, homeless children are placed in shelters far from their schools, making it virtually impossible for these children to realize their right to school stability.22

Transferring schools means an interruption to educational continuity, a change in curriculum, disruption of social and emotional support networks, and it correlates with significantly decreased academic outcomes.

Students with two or more school changes are half as likely to be proficient in reading as their peers. Third-graders who have changed schools frequently are 2.5 times more likely to repeat a grade than their peers. Instability reduces school achievement and leads to higher school dropout rates.23 This leads to diminished economic outcomes for adults and perpetuates the cycle of poverty and homelessness.

**Solution**

Housing solutions for homeless families range from affordable housing in private developments, Federal housing programs including Public Housing and Section 8 vouchers, supportive housing for families with special needs, and rent subsidies, all of which are described in further detail in this book.

**Housing Improves Outcomes for Re-Entry Populations**

**Challenge**

Individuals with histories of mental illness and/or homelessness face higher risks of re-incarceration than almost any other group.24 A recent study showed that parolees without housing are seven times more likely to be re-arrested and mentally ill re-entrants who stay in a shelter after release face a shocking 53% rate of re-incarceration in the first two years.25

**Solution**

The New York City FUSE Initiative identifies some of the highest users of both jails and shelters and offers them affordable housing combined with comprehensive support services including relapse management, entitlements assistance, education and employment assistance.26 An evaluation of the first year of the initiative showed a 91% housing retention rate, a 53% reduction in the number of jail days, and a 92% reduction in the number of shelter days one year later. By breaking the cycle of expensive shelter, prison, and hospital stays, Re-Entry Supportive Housing also allocates scarce public resources where they have the most positive impact. Among the most impressive findings from the FUSE Initiative is that each housing unit cut its residents’ cost of services by $20,000 to $24,000 annually.
Efforts to End Homelessness: The Essential Steps

By making smart investments in homelessness prevention and reinvesting savings in proven strategies to end homelessness, New York City can not only manage the homelessness crisis but truly end homelessness in a fiscally and socially responsible way. By including a broad range of solutions to match the cause of a household’s homelessness we can address the problem. The solutions range from shorter term, low cost programs such as homelessness prevention and rapid re-housing, to more intensive, longer-term interventions for those with more extensive needs, including supportive housing or access to permanently affordable housing. These strategies are as varied as the needs of our citizens but taken together, we can build a comprehensive homeless prevention and housing plan that works for everyone.

1) Programs to prevent homelessness

*Increase funding for homelessness prevention programs, including legal services, eviction and foreclosure prevention, and aftercare services for the formerly homeless.*

Helping New Yorkers avoid becoming homeless is no less important than assisting those who are already homeless to re-enter housing. Homeless prevention is an integral and cost effective component of efforts to end homelessness. However, the vast majority of New York City’s current homeless services funding supports systems specifically designed for people who are already experiencing homelessness. By strengthening preventive programs, the City can prevent homelessness before it becomes a reality, promoting residential stability and saving money.

Prevention services and best practices

Current preventive services in New York City range from the Department of Homeless Services’ HomeBase centers to civil legal services and other innovative nonprofit organizations working with residents of some of the most at-risk neighborhoods in the city. Homelessness prevention programs cover a host of services including case management; applications for and advocacy around public benefits and charitable assistance; legal services; employment facilitation; landlord-tenant mediation; assistance with obtaining repairs; relocation assistance; housing court advocacy; education and workforce
Efforts to End Homelessness: The Essential Steps

development; access to daycare; financial assistance; budgeting and financial management; access to health care and mental health services; and information and referrals for other services.

Flexible and adaptable services that meet the varied needs of people at risk of homelessness are critical. Many people at risk for homelessness only require one-time advice and counsel (and perhaps one-time financial assistance), while others may need a higher level of intensive support over a significant period of time. It is important to allocate financial resources both for service provision and for direct financial assistance. Ideally, the larger homelessness prevention strategy allows for access to housing resources in the form of subsidies, public housing slots, and supportive housing.

Preventive services success story

Ms. Gomez came to Project Home, a University Settlement program that helps families and individuals experiencing a housing crisis, two years ago. When she entered the office to complete the initial intake, staff assessed that she needed immediate emergency assistance. Ms. Gomez, who lives in public housing on the East River, was facing immediate eviction and admitted that she had contemplated jumping into the river because she was still reeling from the death of her spouse the previous year, suffering from severe depression, grappling with an open ACS case for her oldest son who refused to go to school, and had neglected her non-payment case in housing court. Project Home convinced Ms. Gomez to talk to a mobile crisis team and stopped her immediate eviction through housing court advocacy and assistance with emergency rental arrears; however, the work from then on was arduous and slow moving. Ms. Gomez fluctuated between immobility from grief and depression and anger at her oldest son and ACS, she would often call her Project Home Case Manager in despair. In the beginning, she did not take the necessary steps to pay her arrears and was not able to accomplish even minor tasks alone. Project Home worked hard to convince the court to give the family additional time, advocated with ACS, and tried—initially in vain—to get Ms. Gomez to seek mental health treatment. Two years later, the family is much more stable. Her ACS case is no longer open, her relationship with her children is improved, and her oldest son is going to school. She is in much better spirits and has attempted, though still sporadically, to address her mental health issues. The change is remarkable!
Efforts to End Homelessness: The Essential Steps

Services that prevent evictions and foreclosures are a critical part of efforts to increase housing stability. Legal service eviction prevention works because tenants benefit from having an advocate or attorney accompany them to housing court where 95% of landlords have legal counsel but 95% of tenants appear pro se. A 2001 study of civil and housing cases confirmed that “representation by a lawyer played the largest role in affecting case outcome,”27 and a 2010 study found that tenants were anywhere from 3 to 19 times more likely to win a case with representation.28

Cost effectiveness

Research found that New York State could save $67 million in shelter costs by providing an attorney to low-income tenants facing eviction.29 This analysis was confirmed by a South Bronx pilot program which itself cost the City $450,000 but saved more than $700,000 in shelter costs.30 By providing a comprehensive rubric of services and helping people understand that such services are available to them in the community, those who are at risk of homelessness are supported in maintaining their housing and develop a sense of permanence in their communities.

Aftercare services

The largest indicator of who will enter shelter is a prior shelter stay, with the greatest risk for re-entering shelter occurring within the first two years of leaving shelter.33 Therefore, aftercare services for people moving out of shelter must be included within homelessness prevention programs. Aftercare services, similar to homeless prevention services, can provide an array of non-traditional services that facilitate community reintegration. Such services can include high level case management; employment and/or job training; day care services; assistance with bill paying and other financial services that help maintain housing stability.

Money spent on well-planned homelessness prevention programs is money saved both immediately, by preventing people from going into shelter, and in the long term, by preventing other problems from arising. It has been proven that prevention is not only effective but also less expensive than the cost of sheltering people31. The cost of housing a family in a New York City homeless shelter is six times more costly than preventing that family from losing their home in the first place. While the city spends an average of $36,000 to keep a family in shelter for one year, only $6,000 is necessary to prevent an eviction.32
2) Expand and improve housing assistance resources

(create a new local rent subsidy for homeless people that is ongoing, affordable, flexible, portable, and accessible.)

Family Homelessness

Individual and Economic Risk Factors

One of the most important independent conditions that affect rates of homelessness is the rate of poverty. Other economic risk factors include job market, the availability of income-based rent subsidies, and local housing market conditions. When the conditions of high rent, diminished housing subsidies, and poor economic indicators exist at a specific place and time (e.g., New York City in 2009), rates of homelessness will increase. Individual risk factors associated with homelessness include a history of foster care, social isolation, forensic history, poor familial relationships, mental illness, and substance abuse. When individual risk factors are combined with economic risk factors, the chances of homelessness are much greater for single adults. Most homeless families experience homelessness related to economic conditions, and their time in homelessness is not strongly correlated to individual characteristics except for substance abuse. It is clear that homelessness is most often the result of larger socioeconomic forces, and the combination of these forces with multiple risk factors, both macro and micro, tends to push families and single adults into homelessness.

While there are myriad reasons why low-income New York families become homeless, such as domestic violence, sudden job loss, divorce, or high medical costs, their inability to afford housing is a major reason why they are remaining homeless. Housing subsidies have been shown to be a cost effective way to enable families and individuals to move out of shelter, and must be included within a coordinated approach to ending homelessness in New York City.

For some families their struggles are too great and the only road out of homelessness for them is a long term, deep rental subsidy with or without onsite services such as Section 8, public housing or supportive housing. However, as a critical mass of research is starting to show, many families do not need a lifelong rental subsidy at the full market rent value. They just don’t have quite enough income to support rent. If the city wants to stem the tide of family homelessness and get out from behind a billion dollar shelter system, the answer is creating a sophisticated rental subsidy that is targeted to meet varying levels of need for the varying situations of homeless families in New York City.
What is Rapid Rehousing?

Rapid Rehousing programs seek to minimize shelter stays for low-income households or eliminate them altogether by quickly moving to rehouse families in stable housing. Families are aided in their transition to permanent housing through short-to-medium term rental subsidies that are tied to case management and after care services.

Local rental subsidies are not a new concept in New York City: the Bloomberg Administration made two attempts via the Housing Stability Plus program and its later iteration, Advantage. There continues to be a vigorous debate over what worked well and what didn’t about those programs, but at the height of the program in 2010, 9,864 families exited the shelter system to permanent housing, 7,678 or 78% left with Advantage (see chart, below). Last year, the first full year after the end of the Advantage program, only 4,930 families in total exited shelter into permanent housing, zero with a city rental subsidy.

The U.S. Department of Housing and Urban Development (HUD) and the U.S. Inter-agency Council on Homelessness are encouraging localities to use their HUD Emergency Solutions Grant (ESG) and Continuum of Care (CoC) funds to fund Rapid Rehousing programs, but with current sequestration and budget cuts there is very little funding available through these resources.

However, due to an emphasis on Rapid Rehousing as part of the Federal Stimulus program, there are many programs to learn from across the country which can be looked to as models. Nationally, hundreds of thousands of families have received rapid re-housing assistance to move out of homelessness and back into housing. Of these families, 91% who received rapid re-housing assistance exited homelessness for permanent

Families Relocated to Permanent Housing by Type of Housing, FY 2002–2011

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Stability Plus</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>2,086</td>
<td>4,641</td>
<td>3,380</td>
<td>173</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Work Advantage</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>94</td>
<td>2,100</td>
<td>3,106</td>
<td>4,033</td>
<td>2,990</td>
</tr>
<tr>
<td>Other Advantage</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>175</td>
<td>2,261</td>
<td>3,077</td>
<td>3,645</td>
<td>629</td>
</tr>
<tr>
<td>NYCHA</td>
<td>1,108</td>
<td>1,818</td>
<td>1,900</td>
<td>1,759</td>
<td>563</td>
<td>995</td>
<td>149</td>
<td>140</td>
<td>134</td>
<td>104</td>
</tr>
<tr>
<td>HPD</td>
<td>191</td>
<td>308</td>
<td>156</td>
<td>102</td>
<td>158</td>
<td>350</td>
<td>327</td>
<td>298</td>
<td>134</td>
<td>29</td>
</tr>
<tr>
<td>Section 8</td>
<td>1,969</td>
<td>2,588</td>
<td>4,160</td>
<td>1,915</td>
<td>216</td>
<td>232</td>
<td>351</td>
<td>397</td>
<td>193</td>
<td>107</td>
</tr>
<tr>
<td>Other placements</td>
<td>253</td>
<td>619</td>
<td>874</td>
<td>818</td>
<td>1,056</td>
<td>1,561</td>
<td>2,231</td>
<td>1,799</td>
<td>1,725</td>
<td>2,636</td>
</tr>
<tr>
<td>Total Families Placed in Permanent Housing</td>
<td>3,521</td>
<td>5,333</td>
<td>7,090</td>
<td>6,680</td>
<td>6,634</td>
<td>6,187</td>
<td>7,592</td>
<td>8,817</td>
<td>9,864</td>
<td>6,495</td>
</tr>
<tr>
<td>Percent of Families Placed in Permanent Housing of Families Served</td>
<td>22%</td>
<td>28%</td>
<td>33%</td>
<td>33%</td>
<td>33%</td>
<td>28%</td>
<td>32%</td>
<td>33%</td>
<td>34%</td>
<td>24%</td>
</tr>
</tbody>
</table>

Efforts to End Homelessness: The Essential Steps

Successful rapid rehousing programs across the country have demonstrated success in quickly moving people from homelessness to housing, saving local communities and taxpayers millions of dollars in shelter costs. In Mercer County, New Jersey, the number of families who were served in shelter and transitional housing declined by nearly one-third over two years following the implementation of a rapid rehousing approach. Hamilton County, Ohio’s program resulted in a low rate of shelter return, with only 8% of the 219 homeless families returning to shelter within two years of exit. Similarly, the State of Delaware found that its average cost for each successful exit to permanent housing was $1,701 per family, as opposed to $6,065 for emergency shelter and $15,460 for transitional housing. Other high-cost cities with low-vacancy and high-poverty rates such as Philadelphia are also showing signs of success with their new rapid re-housing programs.

We can also learn from the Advantage rent subsidy program, which assisted thousands of New York City families in their moves out of shelter. According to the Department of Homeless Services, 80% of families with children remained housed three years after exiting the shelter system. However, the Advantage subsidy program arguably fell short as an initiative because it was used in isolation and not as part of a comprehensive plan to end homelessness. United to End Homelessness urges the next Administration to reinstate a similar subsidy program but with a safety net that includes aftercare services to better catch those families and individuals for whom the intervention was not successful. This program should be extended to households using both the Department of Homeless Services shelter system and the Human Resource Administration’s Domestic Violence Shelters.

Moving On Program

From 2004–2006, DHS and HPD, working with providers and other stakeholders, created a pilot program to provide more appropriate permanent housing opportunities to 100 supportive housing tenants who wanted a more independent setting, as well as long-term shelter and “hotel” stayers who needed supportive housing. Based on this first Moving On pilot, NYC DHS created a Moving On Initiative from 2007–2009. Now there is new and growing interest in replicating the Moving On model from organizations like the National Alliance to End Homelessness and the US Interagency Council on Homelessness, and places such as Connecticut, Los Angeles, and Chicago. In only two years of the NYC DHS Moving On program (2/07–2/09), 1118 tenants applied for and more than half (652) received Section 8 vouchers. Due to program limitations (e.g. lack of funding for housing placement specialists, availability of after care, etc.) many tenants did not end up moving before the pilot ended, but the program allowed hundreds of long-time supportive housing tenants to move on to more independent housing and in the process yielded hundreds of new units for new supportive housing tenants.
A new, locally funded rental subsidy program should also prioritize a set-aside of long-term rental subsidies for supportive housing tenants who have stabilized in their own apartments but no longer need the level of care of supportive housing. Having access to a rental subsidy allows these tenants to move on to greater independence and in doing so, would free up their much needed apartments for people with disabilities and other barriers still cycling in and out of the shelter, hospital and other emergency systems. Since the majority of supportive housing tenants have very low income, they will need a Section 8-like subsidy to keep them out of homelessness, but it’s a small price to pay compared to tenants remaining in supportive housing they don’t need, or exiting supportive housing without a sufficient subsidy and recidivating after many years of health and stability back into the emergency shelter system.

Reinstate and expand priority set-asides for homeless individuals and families within existing Federal, State, and City programs, including one-third of available public housing units and Section 8 vouchers, and at least one-fifth of units in HPD-assisted private housing resources.

New York City offers a range of subsidized housing programs for low-income households, including public housing, Section 8 Housing Choice vouchers administered by NYCHA, and affordable units in private developments administered by HPD. These resources are highly in demand due to the high cost of housing in the City. Given New York City’s record homelessness, it is essential to utilize all available resources to confront the current crisis. This includes ensuring that homeless individuals and families have priority access to a portion of these resources.

Section 8 Housing Choice vouchers and public housing apartments provide invaluable assistance to hundreds of thousands of New Yorkers. These programs are especially important to low-income New Yorkers because they are permanent and subsidize rent above 30% of monthly income. New York City has prioritized homeless families in both the DHS and HRA shelter systems for available public housing units and Section 8 Housing Choice vouchers in the past, which reduced homelessness both in terms of helping homeless families move from shelters to permanent housing, and in ensuring that these families remain stably housed.44 A 2005 Vera Institute study found that families who exit shelter to subsidized housing exhibited the lowest rate of reentry, with NYCHA public housing and Section 8 placements having particularly low rates of reentry.45

A 2012 study by the NYC Independent Budget Office concluded that if priority referrals for homeless families to NYCHA and Section 8 were reinstated, shelter costs would decrease by $29.4 million and there would be a net decline in the total family shelter population.46

Reassess and redesign the City’s system for placing extremely low-income and homeless households in set-aside units in tax credit buildings, making the process more efficient for landlords and ensuring that this subsidized resource is utilized to meet the City’s housing priorities.
Efforts to End Homelessness: The Essential Steps

The City’s set-aside units in tax credit buildings are another underutilized tool for confronting record homelessness. The current system for placing low-income households in these units lacks transparency and is inefficient for both landlords and prospective tenants and their advocates. Little information is publicly available on how eligible shelter residents are matched with available units, and landlords often do not receive as much information as they would like about applicants, leading to mismatches between the applicants’ needs and the landlords’ requirements. At the same time, applicants are not given sufficient information about vacancies in these properties and experience long waits while their applications are verified and processed, unnecessarily increasing the amount of time they spend in shelters. The process should be reformed to allow a more efficient flow of information and to provide a clear pipeline that applicants can equitably access and landlords can turn to in order to fill vacancies.

Additionally, the referral process must be expanded to allow homeless families and individuals who do not reside in the DHS shelter system access to these resources. Currently, there is no mechanism to refer homeless domestic violence or youth shelter residents to permanent housing resources offered through HPD. Domestic violence and DYCD shelter residents ought to be recognized as homeless and granted a proportional share of HPD’s homeless housing resources such as Project-Based Section 8 vouchers and homeless set-aside units in affordable housing developments.

3) Guarantee adequate shelter, health care, access to education and services for all people experiencing homelessness

Ensure access to emergency shelter without deterrent and bureaucratic barriers for all families, unaccompanied youth, and single adults who lack alternative housing options that are both available and suitable to their needs, and ensure access to drop-in centers for unsheltered homeless individuals.

Solutions beyond shelter are necessary to confront record homelessness in New York City. However, when homelessness cannot be prevented, it is essential to ensure access to safe, decent shelter as a last resort for New Yorkers who need it. Shelters are best used when efforts to prevent homelessness have failed and are viewed as a short-term solution with ample paths to permanent housing.

Commit sufficient resources for all homeless shelter systems in the City, including those administered by the Department of Homeless Services, Human Resources Administration, and the Department of Youth and Community Development, ensuring that all vulnerable populations have a safe place to stay.

While the right to general shelter in New York City has been established under Callahan v. Carey and Boston v. City of New York, there are specialized shelter systems that exist outside of the administration of the Department of Homeless Services that do not offer a right to shelter, namely the runaway and homeless youth and the domestic violence shelter systems.
Domestic Violence Survivors

Domestic Violence shelter stays are time-limited due to State regulation. After the maximum 180 days in emergency domestic violence shelter ends, a family is required to leave the shelter regardless of their circumstances and whether or not they have a place to go. Many families with no safe housing option have no choice but to enter DHS shelter. To access a placement families are not presumed eligible and must apply at the DHS PATH intake center despite having already been deemed eligible for DV shelter, which requires one to be in immediate danger with nowhere else to go. Families are subject to lengthy interviews at the PATH NoVA unit where they must discuss their domestic violence history with a social worker in front of their children to facilitate a safe shelter placement in DHS. Anyone who gets into and stays in domestic violence shelter for the maximum allowable time should be automatically deemed homeless and allowed to seamlessly transition to DHS shelter without having to go to PATH.

Additionally, because of the way domestic violence shelters tend to be configured and the way programs are structured around families headed by women, there are very few shelter options for single adults, especially men and transgendered individuals. While many shelter providers have made strides to reconfigure spaces and build programs that welcome single people, men and the LGBTQ community in general, more work needs to be done to create safe, welcoming spaces for all victims of domestic violence regardless of their family composition, gender, gender identity or sexual orientation. Working with State partners to re-examine the rate structure to make serving single people more feasible and providing resources for staff training would enable shelter providers to continue building on their efforts to create a more accessible, equitable shelter system.
Runaway and Homeless Youth

For New York City’s runaway and homeless youth (RHY), shelters and other services provide invaluable assistance to extremely vulnerable young people. However, for the thousands of RHY under 26 in New York City, there are only about 585 emergency and transitional beds dedicated to them, most of which are limited to youth under 21. Unfortunately, unaccompanied homeless youth and young adults do not have a legal right to youth-specific shelter, which means that when shelter beds are full (as they usually are), providers must turn youth away. This results in street homelessness for thousands of young people each year and subsequent involvement in extremely risky behaviors – such as survival sex or substance use—in attempts to meet survival needs such as temporary shelter. While youth who are 18 or older may access the adult shelter system administered by DHS, this system is developmentally inappropriate to meet the unique needs of homeless youth. Adult homeless shelters may not always be safe spaces for homeless youth, particularly for youth who are LGBTQ.

The lack of a right to shelter for homeless youth results in increased exposure to physical and emotional trauma during adolescence and involvement in street activities, and has consequences that negatively impact young people into adulthood. Homeless youth are at an increased risk of severe anxiety, depression, suicide, poor health and nutrition, and low self-esteem. Additionally, they are at high risk of becoming victims of sexual trafficking or of engaging in “survival sex” for food or shelter, are more likely to become victims of physical or sexual assault, and are more likely to engage in high-risk behaviors such as unprotected sex and intravenous drug use.47

Connecting these youth to RHY housing services is essential, not only because shelters meet their immediate need for shelter, but also because shelters serve as a gateway for connecting youth to much-needed health, mental health, educational, and workforce services. DYCD only funds an approximate 253 crisis and transitional beds. In recent years privately funded RHY beds have significantly decreased across RHY programs. The City’s Commission on LGBTQ Runaway and Homeless Youth documented the need for increased bed capacity for RHY in 2010,48 and emergency and transitional shelters providers report having to turn away increased numbers of youth, with one shelter reporting that it has turned away as many as 400 youth per month.

In addition to being severely underfunded given the need for shelter beds, funding for RHY services is highly unstable. Of the $12.6 million New York City budgets for RHY services, only 42% is base lined, stable funding, which means that the City Council must restore the remaining 58% of funds each year. As the loss of youth shelter beds in recent years illustrates, private funding is very precarious and cannot be seen as a stable alternative to government funding. A lack of stable funding from year to year negatively impacts services providers at the expense of program planning, staffing continuity, and long-term organizational stability.
Efforts to End Homelessness: The Essential Steps

*Commit adequate resources for social services for all homeless people including the availability of comprehensive health and mental health care, education, job training, and employment resources.*

For people experiencing homelessness, the need for housing is often accompanied by a variety of other needs for services. In addition to addressing immediate needs such as health and mental health care, providing education, job training, and employment resources will allow individuals and families to improve their ability to support themselves and afford housing.

Homelessness and Health Care Needs

Specific subpopulations have specific health care needs and concerns. The federal government has recognized people experiencing homelessness as a specific health care subpopulation with specific needs and concerns since the 1980s. Among the special needs and concerns are greatly increased risks of numerous diseases and conditions, a lack of access to appropriate health care (or, in many cases, any primary health care) and many circumstances that aggravate existing conditions including exposure and stress. This results in far worse outcomes and much greater costs than adequately providing appropriate high-quality and culturally competent health care to homeless people in the first place. Failure to provide adequate health care has resulted in homeless people having poorer health, vastly higher rates of physical illness, mental illness, substance abuse and early mortality. Providing appropriate treatment will provide the greatest value per dollars spent in improved health outcomes and tax dollar savings.49

Most importantly from a medical perspective, chronically homeless people experience dramatically better health outcomes with appropriate health care. Some homeless people suffer from dual diagnosis, meaning they have more than one chronic condition that must be treated and managed. Often, appropriate treatment of chronically homeless people results in vast improvements in health and allows for a more productive and satisfying life. All people deserve adequate and appropriate health care.50
Educational Needs for Homeless Youth and Children

Homeless youth, children, and their families often need additional services to maintain educational continuity or return to school. Many youth who access shelter through DYCD have disconnected from school. Focused on crisis, youth shelters need resources and staff support to work directly on educational issues with their teen residents. Shelter staff should be encouraged to improve partnerships with the DOE to ensure that their clients have information about supportive and alternative education programs such as District-79 schools, YABC programs, Learn-to-Work, and GED options.

For children living with their families in the DHS system, transportation to and from school is a major barrier to educational continuity. Although the Department of Education is required to provide transportation to and from school, young children’s access to their original schools is hampered by lack of readily available school bus routes. When families are placed far from their youngest children’s schools of origin, even an available bus route can be problematic; few families want their children commuting for hours each day. Absent a bus route, transportation most often is provided via public transit.

4) Continue investment in supportive housing:

Create a New York-New York IV agreement that increases the supply of supportive housing for homeless people, including persons living with disabilities, persons living with mental illness, families, unaccompanied youth, veterans, seniors, survivors of domestic violence, and people exiting correctional facilities.

Supportive housing combines permanent, affordable housing with onsite access to support services to ensure that residents are able to remain housed. New York City’s record number of homeless people includes many individuals and families in need of supportive housing. This group includes those who have mental illnesses and/or substance abuse disorders as well as other underserved populations such as youth, veterans and seniors.

The next mayor must invest in new supportive housing development for individuals and families with behavioral health issues and other ongoing challenges to stability. New York City’s nonprofit providers and developers invented the supportive housing model, and developed it into the effective intervention it is today. Three successful City-State initiatives, called the New York/New York Agreements, together funded the creation of over 13,000 units of supportive housing over the past 23 years. Both the City and the State benefitted from the resulting cost savings, and both contributed to the costs of construction, with the State paying for the majority of the service costs. And because a majority of these units were integrated into affordable apartment buildings with mixed tenancies, NY/NY financing leveraged the creation of thousands of additional affordable
Efforts to End Homelessness: The Essential Steps

units for non-disabled households. The next mayor must build upon the success already achieved through these initiatives and this proven, effective, and cost-efficient housing model.

A new City-State supportive housing initiative will help address the needs of disabled and otherwise vulnerable populations who need services and supports to remain housed in the community. The next mayor should commit to a fourth City/State initiative to build 10,000 new supportive housing units for homeless individuals and families. The total capital subsidy for developing these units would be $1.2 billion over a period of eight years.51 The next NY/NY agreement can improve upon previous initiatives by:

• Housing a diverse range of disabled people who are currently homeless, institutionalized, and/or unstably housed high-cost Medicaid recipients, as well as vulnerable populations who were underserved or excluded from previous agreements, including survivors of domestic violence, homeless youth, disabled/long-term care populations, and those re-entering from correctional facilities.

• Using an expedited procurement process that streamlines development by coordinating capital, operating and service awards.

• Eliminating barriers to development, such as extraneous siting requirements.

• Establishing a reinvestment fund that automatically reallocates savings from shelter reductions to supportive housing (similar to State programs that reinvest savings from psychiatric center, hospital and nursing home bed closures).

• Structuring supportive housing service and operating funding streams so that they coincide with 15-year capital compliance periods and keep pace with inflation.
Expanding Supportive Housing for Young Adults and Domestic Violence Survivors

While supportive housing has been able to serve a wide variety of individuals ranging from those living with serious mental illness to those living with HIV/AIDS, there are several populations who have been underserved and who would benefit greatly from greater access to supportive housing. Some of these populations were not directly addressed in the previous NY/NY III agreement, such as unaccompanied homeless youth, survivors of domestic violence and re-entry populations. It is particularly important that these groups are served in a City-State initiative because several of these groups cannot be served in federal homeless housing programs due to recent changes to HUD’s definition of homelessness.

More supportive housing units are needed that reflect the real needs of homeless unaccompanied youth. For example, “harm reduction housing,” which allows young people who use substances to access apartments prior to becoming sober, is an effective means of getting young people off the streets and into a stable environment. This low-barrier “housing first” approach maximizes the chances of their engaging in the services they need to become stable. This approach works from the understanding that homeless youth have disproportionately high experiences with sexual, physical and emotional abuse, and that substance usage often functions as a coping mechanism that is best engaged in a non-judgmental way.

Domestic Violence survivors ought to be included in any new supportive housing agreement that is created. Currently, in order to qualify for supportive housing, a survivor must be diagnosed with a disabling medical condition, usually a mental health diagnosis. Labeling survivors with such a diagnosis is dangerous since many are involved in family court disputes with their abusers and could be at risk of losing custody of their children to a batterer. However, despite a lack of diagnosis in many cases, due to the trauma of domestic violence many survivors need support to heal from abuse and move forward with their lives.
Supportive Housing Success Story

“I was placed into the foster care system at the age of 12 because of my abusive stepfather and negligent mother. Throughout the overall time that I had stayed in the foster care system, I was placed into five to six different homes ten to twelve times. Growing up in the foster care system was a game of survival and chance. You never knew where you were going or what was going to happen in any of the homes that you were placed in. Most foster parents weren’t supportive and were very abusive. I was subjected to various kinds of abuse including mental, emotional and physical.

Upon aging out of the foster care system I was placed in an old foster home where I lived for more than six months. Unfortunately this living situation didn’t work out. Desperate for something better, I was forced to walk the streets at night looking for food and a shelter to stay in. For about a year and a half I was couch jumping until by luck I came across the Next Generation Center. The workers there advocated for me and helped me move into the Jasper Hall Supportive Housing building. Since then things have gotten a lot better.

During my time living at Jasper Hall, I learned important life skills such as cooking, financial management, having confidence in yourself, networking and other things. Unfortunately, my foster siblings didn’t have as much luck as I have. Two foster brothers that I had ended up joining gangs and now have an extensive history of being incarcerated. Many of my foster sisters ended up in abusive relationships and having multiple kids that they couldn’t take care of and some others just became homeless with no way to get anything that they needed. It has been a journey and then some, but throughout all of my struggles, I have tried my best to stay true to who I am and the morals I believe in.”

-Keith Hunter, a supportive housing tenant.
Support city and state efforts to ensure sufficient funding to fulfill the NY-NY III agreement and to invest Medicaid savings in supportive housing development and services.

The NY/NY III agreement has been one of the most successful and largest supportive housing initiatives in the country. Now entering into the eighth year of this historic city-state agreement, almost all of the capital funding dollars have been committed. However, in the next couple of years there will insufficient service and operation funding for the remaining units in the pipeline. Within the next two years, NY/NY supportive housing development could come to a grinding halt if this issue of inadequate service and operations funding is not addressed. The next mayor must work with the city agencies that are signatories to the agreement in committing the necessary resources to fulfill the city’s commitment. While it is critical that the city maintain its commitment, it is also important that the next mayor also work closely with the state to obtain the funding so that the state can maintain its goals.

Sidebar: Medicaid Redesign

A critical component to the state’s recent plan to expand supportive housing development is the Medicaid Redesign process. Research has shown that housing chronically homeless individuals, who are often heavy users of Medicaid, reduces their use of emergency medical services and results in lower hospitalization rates. Because this results in significant savings in Medicaid costs, the state has decided to devote Medicaid savings to supportive housing. The Cuomo administration has committed to investing hundreds of millions of dollars over the next several years to supportive housing development. The work of the MRT’s Affordable Housing Work group has resulted in a plan that both focuses on building new supportive housing units for high Medicaid users as well as accelerating NY/NY III development.

Ensure that existing supportive housing tenants continue to get the services they need by bringing contract rates up to current costs.

The pairing of supportive services with affordable apartments is the key to supportive housing’s success in ending homelessness. Yet, too often providers face flat-funded operating and rental subsidies that do not keep pace with rising costs. Most of the contract rates for supportive housing have remain frozen at their original rates for 2005 even as costs of operations have continue to steadily increase. It is rare for supportive housing providers to receive any Cost of Living adjustments (COLAs) even though they must continue to provide high quality services and cover their costs. This is particularly difficult for scatter site supportive housing, which represents over 40% of the supportive housing stock city-wide, as rental rates in New York City continue to skyrocket. As these costs have escalated, a greater percentage of contract costs have shifted towards rental
Efforts to End Homelessness: The Essential Steps

costs as opposed to services. In congregate settings other operational costs such as water and sewage fees have skyrocketed in recent years.

In order to maintain the high level of social services that makes supportive housing so effective, it is critical that the issue of bringing contract rates up to current costs is addressed. Regular cost of living adjustments should be incorporated into supportive housing contracts. This will keep pace with inflation and assure investors that the service funding will be adequate in these buildings.

5) Preserve and create more affordable housing for New York’s lowest income households

Protect and expand capital development funding for low-income to extremely low-income affordable housing production, with a priority on creating permanent housing opportunities for the lowest income households.

Supportive housing has been proven as an effective and cost-efficient solution for individuals with severe barriers to housing instability, such as those with severe and persistent mental illness and chronic substance-addiction. For these populations, supportive housing is the solution to their homelessness and deserves significant funding and support, as discussed elsewhere in this briefing book.

However, for the majority of families, research shows that the primary cause of homelessness is economic, and receiving access to housing that is affordable to their income levels permanently ends their homelessness. For most families in the shelter system, their income was simply insufficient to pay for rent in New York City’s increasingly high-cost rental market. For a few families, this disconnect can be solved by helping them increase their income. However, this “demand-side” solution has only resulted in limited success in New York City and has not been effective in substantially reducing the numbers of homeless families in the shelter system. Providing access to housing that is truly affordable to the lowest-income households will be critical in order to meaningfully address the family homelessness crisis in New York City.

Unfortunately, many of the “affordable” housing units developed under City programs are not affordable to homeless families. In fact, a recent Association for Neighborhood and Housing Development report shows that the majority of new units created by the NYC production programs under Mayor Bloomberg are affordable only to families earning 60% area median income (AMI) and above, or roughly $50,000 annual income for a family of four. However, the vast majority of homeless families make far less than $50,000 a year—in fact, most homeless families’ income levels are less than half what would be required to rent these apartments—their incomes are at 30% or below of area median income, or $24,550 per year or less for a family of four.

As rents in New York City continue to skyrocket, our poorest households are finding it harder and harder to secure and maintain permanent housing. Traditional options for housing for the lowest income households, such as public housing and Section 8 vouchers, are insufficient to fulfill the demand for housing at the lowest-income level of families. Ending family homelessness will require investing in proven methods as well as innovative new options to create housing options for the lowest-income levels.
Affordable Housing Success Story:

Maya left her physically abusive husband when she was pregnant and entered an emergency shelter. Soon after the birth, her baby died. Still grieving, Maya continued to work at her $7/hour job. When the domestic violence emergency shelter told her she could no longer stay, she considered returning to her husband. Desperate, she called New Destiny, a nonprofit specializing in affordable housing and services for domestic violence survivors, for help. Maya qualified for a vacant apartment. Today, she is attending college while holding down a job. Maya has successfully escaped abuse, rebuilt her life and is on her way to becoming economically independent.

The Challenge: The need for capital and operating subsidy

In order to create housing, even at higher income levels, funding is necessary for property acquisition, any necessary construction, and the ongoing operations of the building. The cost of purchasing a site or building and construction has been escalating in NYC. At the same time, the cost of operating the building, including water and sewer, heat, electricity, staff, ongoing maintenance and supplies, and more, is also rising. As a general rule of thumb, the cost just for these annual operating expenses is equal to approximately the rental income at 40% of AMI. If the building had to take out any loans for site acquisition and/or construction, then the debt service payments on that loan further increase the monthly and annual costs the building’s income (rent) must support. It is not possible to create housing for extremely low income households simply by mandate: sources of subsidy for these households must be found to either lower the cost of development or increase the amount of operating income, through rent or otherwise, that the building receives. Often both methods are necessary.

There are a variety of tools in place to subsidize the cost of building and/or operating low-income housing, and the creative use of multiple subsidy sources is often necessary to create housing with deep-enough rent targeting for homeless and at-risk households. Each funding program and project is unique, and funding sources can be combined in a variety of ways to reach the ultimate goal. To the extent possible, pre-designed funding packages that combine funding sources into a predictable set model are the most effective in leading to regular production.

Existing sources that should be strengthened, expanded, and targeted to extremely low-income homeless households:

• Equity capital sources, such as the Low Income Housing Tax Credit, fulfill the need for equity and reduce the total amount of debt required...
Efforts to End Homelessness: The Essential Steps

to construct.

- Subsidized debt sources, such as tax exempt bonds, reduce the amount of debt service the project must pay. Additionally, bond financing comes with as-of-right 4% tax credits.57

- Rent subsidies, such as Section 8, increase the amount of rent that a project receives.

Create a reinvestment fund that automatically allocates any shelter savings towards a fund for new and expanded permanent housing programs.

By reducing the number of homeless New Yorkers through the steps outlined in this briefing book, the City can expect to save money, both directly in terms of reduced emergency shelter expenses, and indirectly through reduced hospital, child welfare, and prison system usage. In order to continue to meet the housing needs of New York City’s lowest income households, these savings must be reinvested in a fund for new and expanded permanent housing programs. The City’s reinvestment strategy should utilize savings to support a variety of approaches to ending chronic homelessness, including but not limited to supportive and extremely low income affordable housing development.

A comprehensive reinvestment program would include the following components:

- A mechanism to calculate and publicly report savings available for reinvestment on an annual basis;

- A mechanism to promote transparency and public accountability for plants to fully reinvest City tax levy savings into strategies to end homelessness;

- A range of strategies to end homelessness, including but not limited to supportive housing development and extremely low income affordable housing development; and

- A strategy to capture and reinvest State and Federal savings.

Develop and implement a strategy for converting and rehabbing shelters into permanent supportive housing.

Supportive housing has been shown to be a more cost effective solution to homelessness over the long term than providing emergency shelter. According to a study of costs of serving homeless individuals in nine major cities, it costs on average $54.42 a day to house a person in a homeless shelter versus $41.85 a day to house an individual in supportive housing.58 One study quantified the costs of both homelessness and supportive housing by tracking the public service use of 4,679 individuals over an eight year period. It calculated that a homeless, mentally ill person on the streets costs New York City taxpayers $40,451 a year while supportive housing reduces that annual cost by a net of $16,282 per housing unit.59 Other studies have shown that placing individuals in supportive housing reduced hospitalization rates by 29% and emergency department visits by 24% for adults with a chronic medical condition.60
Efforts to End Homelessness: The Essential Steps

Converting and re-purposing a portion of the city’s shelters into permanent supportive housing would not only reduce the City’s long-term shelter costs which are nearing a billion dollars in 2013, it would provide those in most need with the services and supports they need to maintain long-term stability, improve health outcomes particularly among those who are chronically homeless and provide affordable housing for very low-income individuals and families.

Standardize the City’s and State’s process of siting new development in communities, giving more predictability to neighborhoods and developers alike.

Currently, supportive housing and affordable housing developers seeking to build new residences face confusing, wildly varying siting requirements that are dictated by disparate City and State capital funding sources. Both the discrepancy among these requirements and the general lack of clarity surrounding community leaders’ and developers’ roles in these processes often lead to acrimonious NIMBY (Not In My Back Yard) disputes that add time and cost to development and satisfy neither party. Clear guidelines are needed for siting supportive housing going forward. This includes procedures that require active, good faith and mutually respectful communication, and that clearly prescribe roles and responsibilities for developers and community representatives alike and define unambiguous timeframes for each stage of the process.

Institute an annual vacant building count and implement policies to encourage the sale and use of vacant and underutilized spaces to meet the housing needs of low-income New Yorkers.

Vacant lots and buildings, many of which are owned by New York City, are potential assets that must not be ignored in a plan to address New York City’s homelessness crisis. A study by Picture the Homeless identified 6,040 vacant lots and buildings in 1/3 of the city through a vacant building count executed in partnership with the Hunter College Center for Community Development and Planning. The count revealed enough potential space to house a total of 199,981 people. Promising proposals to address vacant lots include examining tax treatment of vacant and underutilized properties to create incentives for development, expanding of community land trusts as a model for permanently affordable housing for all income levels, and re-allocation of shelter money to fund rehabilitation of vacant property into housing for homeless people.

Support state legislation for a 30 percent rent cap for recipients of the HASA subsidy.

The near-universal standard for affordable housing requires that tenants pay no more than 30 percent of their income towards rent. In New York State, only one low-income housing program denies tenants this standard affordable housing protection—the HIV/AIDS rental assistance program.

Low-income people living with HIV/AIDS and their families in New York City’s “independent living” rental assistance program are forced to pay upwards of 70 percent of their disability income towards rent, well above what is considered affordable housing or a sustainable rent share burden. As a result, hundreds of low-income New Yorkers living with HIV/AIDS are homeless and thousands more are on the brink of losing their homes.
In addition, chronically ill people are forced to make difficult trade-offs between medical care, food and other essential needs in order to pay their rent each month.

Many are unable to continue this difficult balancing act and become homeless, with all the risks to their health—and to HIV prevention efforts—that homelessness entails. Homelessness can be a virtual death sentence for a person living with HIV/AIDS. It jeopardizes the success of other interventions to fight the HIV/AIDS epidemic, making it harder for people living with HIV/AIDS to adhere to medication and medical appointments, adopt proper nutrition, and practice safer sex and other forms of HIV prevention.62

A simple solution is to ensure that homeless and formerly homeless people living with HIV/AIDS pay no more than 30 percent of their income towards their rent if they already qualify for rental assistance.

Support the comprehensive platforms to preserve and produce affordable housing put forth by the Association for Neighborhood and Housing Development, the Real Rent Reform campaign, and Housing First.

6) Improve planning around natural disaster-induced homelessness

Any disaster-related homeless housing assistance should be fully integrated into the City’s overall strategy to assist homeless people regardless of the cause of homelessness.

Hurricane Sandy exposed and exacerbated the ongoing affordable housing crisis in New York City. Before the hurricane touched down, a record 48,000 people were already sleeping in City shelters each night, including more than 20,000 children. Thousands more families were living in unstable housing situations, including illegally-converted apartments and overcrowded conditions. Many of these marginally-housed families were living in the low-income coastal neighborhoods impacted most heavily by Sandy. It is critical that these low-income displaced families are not left without assistance, nor should they be forced to compete with other homeless and low-income families for the dwindling stock of affordable housing that currently exists. Rebuilding must be used as an opportunity to expand the availability of affordable housing for all displaced families, including those left homeless by Hurricane Sandy as well as those previously forced out of the increasingly unaffordable housing market in New York City.

During the aftermath of Hurricane Sandy, the already daunting challenges related to school proximity were even harder to surmount. The shelter system did a remarkable job responding to the emergency, opening new sites and incorporating an unexpected volume of displaced families. At the same time, the city learned that greater collaboration between shelters and DOE would be needed to ensure that when a new site opened, DOE staff could find out where and how to serve families, provide MetroCards, share information about school stability, and offer support.

In addition, even after Sandy, families continued to enter the shelter system for reasons unrelated to the storm. For these families securing a shelter placement near the young-
A Roadmap to Ending Homelessness: The Essential Steps

est child’s original school became increasingly rare. As the shelter census rose, education-related transfers ground to a virtual standstill. In the surge of new shelter requests, families who had lost housing due to eviction or other non-storm related reasons were placed at opposite ends of the city from their youngest children’s schools, and waited many months before even being considered for a move. The result was that many students had to forfeit their legal right to school stability because of transportation hardships. Other families chose to discharge themselves from shelter and re-applied, hoping to secure a new placement closer to their geographic and educational support systems. As noted above, a system that takes into account educational proximity on a day-to-day basis will significantly reduce the impact of this problem during times of crisis.

Disaster-related housing assistance should include undocumented disaster victims.

Many people impacted by Sandy were undocumented immigrants. In the immediate aftermath of the storm, it was unclear to many what, if any, disaster assistance they were entitled to. Future storm preparedness and recovery efforts should include linguistically competent outreach to immigrant communities and explain what, if any, restrictions are in place to receive aid from federal agencies such as FEMA. Local relief programs should be extended to households excluded by federal regulations such that households are not forced into homelessness.

Ensure that, as part of rebuilding and recovery from Sandy and other disasters, affordable rental housing is a priority.

Before Hurricane Sandy touched down, a record number of homeless people were already sleeping in City shelters each night, and thousands more families were living in unstable housing situations, including illegally-converted apartments and overcrowded conditions. Many of these marginally-housed families were living in the low-income coastal neighborhoods impacted most heavily by Sandy.

Six months after the hurricane, hundreds of households displaced by Sandy were still living in temporary hotels and shelters administered and paid for by the Federal Emergency Management Agency (FEMA) and the City of New York. Thousands more remain in their affected communities, either in dangerous conditions or doubled-up with family and friends. The majority of these households were struggling to survive on low-incomes even before the storm.

The biggest and most important need continues to be permanent, long-term affordable housing. After the storm, the Department of Housing Preservation and Development created a “housing portal” meant to match low-income Sandy evacuees to affordable apartments. But so far, even these “affordable” apartments are out of reach for most evacuees. Out of the 1,500 households who have registered with the portal, three-quarters have incomes too low to qualify for these units.
Create an Interagency Council on Homelessness that includes government, non-profit, and consumer stakeholders to implement a comprehensive plan to end homelessness.

Over a dozen agencies in New York City have programs and policies that directly impact New Yorkers who are homeless or at risk of becoming so. Unfortunately, there is currently no central authority to exercise leadership and execute priorities, leading to organizations operating within silos with limited opportunities for collaboration. Because DHS is the largest agency charged with assisting homeless New Yorkers, it often drives City policy regarding shelter and homeless re-housing. Yet different homeless and at-risk populations are assisted by different city agencies that are often not a part of discussions on how best to serve homeless New Yorkers (see chart, below). For example, the Human Resources Administration administers the City’s domestic violence shelters, while the Department of Youth and Community Development oversees the City’s runaway and homeless youth shelter system. Further, since DHS does not control the City’s affordable housing stock, agencies like NYCHA and HPD must also be enlisted to assist with homeless re-housing plans. Any discussion about how to serve homeless people ought to be holistic and these agencies need a seat at the table. (See Chart on page 32)

Unifying priorities by sharing data and resources across agencies will enhance system-wide efficiencies. Similarly, bringing nonprofit and consumer stakeholders to the table will ensure that the resulting comprehensive plan will be informed by those working closest to the ground and thus is responsive to community needs. The comprehensive plan will clearly delineate policy priorities and funding needs for preservation, new construction, affordability, and a timeline with milestones.
# Create an Interagency Council on Homelessness

## New York City Government Agencies & Authorities that Provide Services to People who are Homeless or at Risk of Becoming Homeless

<table>
<thead>
<tr>
<th>Agency</th>
<th>Description of Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration for Children’s Services (ACS)</td>
<td>Administers a housing subsidy for families at risk of homelessness and youth aging out of foster care.</td>
</tr>
</tbody>
</table>
| Coalition on the Continuum of Care (CCoC) | • The CCoC is not a City agency but is a broad-based coalition of homeless housing and shelter providers, consumers, advocates, and government representatives.  
• The purpose of the CCoC is to provide a leadership role in the prevention and eradication of homelessness in NYC and coordinate NYC’s application for Federal McKinney-Vento funds. |
| Department of Corrections (DOC) | Coordinates with DHS and other social service agencies in discharge planning for inmates. |
| Department of Education (DOE) | Provides specialized services for students experiencing homelessness, as required under the McKinney-Vento Act |
| Department of Finance (DOF) | • Administers the Senior Citizen Rent Increase Exemption Program (SCRIE)  
• Administers the Disability Rent Increase Exemption Program (DRIE) |
| Department of Homeless Services (DHS) | • Administers the citywide homeless shelter system  
• Provides homelessness prevention services  
• Provides homelessness aftercare services. |
| Department of Youth and Community Development (DYCD) | Administers runaway and homeless youth shelters and continuum of services. |
| Housing Preservation and Development (HPD) | • Provides financing for affordable housing development  
• Administers the Project-Based Section 8 Program  
• Provides tenant Based Section 8 Program for select populations  
• Administers the HPD shelter system |
| Human Resources Administration (HRA) | • Administers the domestic violence and HIV/AIDS shelter systems  
• Administers the HASA subsidy program  
• Provides rent arrears assistance  
• Administers the Family Eviction Prevention Supplement (FEPS) |
| New York City Council | Funds a number of housing and homelessness related programs through one-year funding. For example, City Council one-year funding funds the majority of the City’s Runaway and Homeless Youth shelter system budget. |
| New York City Housing Authority (NYCHA) | • Administers public housing  
• Administers the Tenant-Based Section 8 Program |
| Department of Health and Mental Hygiene (DOHMH) | Administers supportive housing |
| Housing Development Corporation (HDC) | Finances affordable housing development through the issuance of tax-exempt bonds. |
Conclusion

The United to End Homelessness platform represents a way forward for New York City’s next administration to finally address the City’s decades old homelessness crisis. The plan, developed and conceived by a broad and experienced coalition of stakeholders, builds upon current research and proven solutions that will assist the over 100,000 of New Yorkers each year who are homeless or at risk of homelessness.

We call upon the mayoral candidates to endorse this platform and commit to making homelessness a primary focus not only of their campaign but also their administration should they be elected.

We call upon community organizations, social services providers and the faith community to join us in elevating the cries of New York’s most vulnerable people by endorsing the solutions contained in the United to End Homelessness platform. Together we can end the housing crisis for our 57,000 neighbors who are homeless tonight.

57,000 is 57,000 too many. Join us!
Endnotes


2 Data from New York State Education Department in the Student Information Repository System (SIRS). http://www.nysteachs.org/media/INF_SED_SIRS3YearAvg.xls


5 U.S. Census Bureau, American Community Survey 1 Year Estimates, 2010.

6 For a family of 4 “extremely low-income” refers to those earning $24,550 per year or less (30% of Area Median Income (AMI)); “low-income” refers to those earning $49,080 (60% AMI).


8 According to a report in the New England Journal of Medicine, homeless people spent an average of four days longer per hospital visit than comparable non-homeless people. This extra cost, approximately $2,414 per hospitalization, is attributable to homelessness. A study of hospital admissions of homeless people in Hawaii revealed that 1,751 adults were responsible for 564 hospitalizations and $4 million in admission costs. Their rate of psychiatric hospitalization was over 100 times higher than their non-homeless cohort. The researchers conducting the study estimate that the excess cost for treating these homeless individuals was $3.5 million or about $2,000 per person (Salit S.A., Kuhn E.M., Hartz A.J., Vu J.M., Mosso A.L., Hospitalization costs associated with homelessness in New York City. New England Journal of Medicine, v. 338, 1998; Martell J.V., Seitz R.S., Harada J.K., Kobayashi J., Sasaki V.K., Wong C., Hospitalization in an urban homeless population: the Honolulu Urban Homeless Project. Annals of Internal Medicine, v.116, 1992.


11 Id.


13 A Minnesota Supportive Housing and Managed Care Pilot found that “nearly half of the parents in the Pilot experienced levels of parenting stress high enough to put them at increased risk of committing child abuse and neglect. National Center on Family Homelessness. The Minnesota Supportive Housing and Managed Care Pilot: Evaluation Summary, 2009.

14 An analysis of 8,251 homeless children in New York City found that 18% of them received child welfare services over the five-year period following their first shelter admission. Park, J.M., Metraux, S., Brodbar, G., Culhane, D., Public Shelter Admission among Young Adults with Child Welfare Histories by Type of Services and Type of Exit. Social Service Review, v. 78, 2004..


Footnotes


22 McKinney-Vento Homeless Assistance Act §722(g)(3)(g); NYS Education Law §3209(2)(a)(1)-(3); 8 N.Y.C.R.R. §100.2(x)(2)(i).


31 Homelessness prevention is less expensive and has shown to be effective in other American localities and countries including Germany and England, and most importantly, in New York City. Culhane, D. P., Metraux, S., & Byrne, T., *A prevention-centered approach to homelessness assistance: a paradigm shift?* Housing Policy Debate, v. 21, 2011.

Footnotes


40 Id.

41 Id.

42 Information obtained from the New York City Department of Homeless Services, 2013.


45 Vera Institute, Understanding Family Homelessness in New York City, 2005. Available at: http://www.vera.org/project/project1_3.asp?section_id=6&project_id=68&sub_section_id=38


Footnotes

52 Culhane, D.P., Metraux, S. & Hadley, TR., Public service reductions associated with the placement of homeless people with severe mental illness in supportive housing, Housing Policy Debate v. 13, 2002. Additional studies indicating the cost savings attributable to the housing plus services model are available at: http://shnny.org/research-reports/research/cost-savings/

53 Culhane, D.P., Metraux, S., Park, W.M., Schretzman, M., & Valente, J., Testing a Typology of Family Homelessness Based on Patterns of Public Shelter Utilization in Four U.S. Jurisdictions: Implications for Policy and Program Planning, University of Pennsylvania Scholarly Commons, 2007. Available at: http://repository.upenn.edu/cgi/viewcontent.cgi?article=1069&context=spp_papers


55 New York City Housing Authority, Plan NYCHA: A Roadmap for Preservation, December 2011.

56 For example, HPD’s Supportive Housing Loan Program has been historically very successful by providing developers with significant in-house expertise and guidance as well as working with other agency funding sources to provide project sponsors with a “package” of funding for supportive housing projects.

57 New York State Department of Homes and Community Renewal, 80/20 Housing Program. Available at: http://www.nyshcr.org/Topics/Developers/MultifamilyDevelopment/8020HousingProgram.htm


63 New York City Department of Homeless Services data.