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Gale A. Brewer, Borough President

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**Gale A. Brewer, Manhattan Borough President
Testimony before the NYC Council Committee on General Welfare
Oversight: Outreach NYC and Barriers to Shelter for Individuals
Experiencing Homelessness**

My name is Gale A. Brewer and I am the Manhattan Borough President. Thank you to Chair Levin and the members of the General Welfare Committee for the opportunity to testify today.

In November 2019, Mayor de Blasio announced Outreach NYC as a new program that would train front line city employees to identify people experiencing homelessness. Sanitation workers, firefighters, building inspectors, and others will be “deputized” to act as eyes and ears to alert the Department of Homeless Services (DHS) to dispatch Street Outreach teams to such unsheltered individuals that they spot on the street. Sometimes it can take dozens of interactions before an unsheltered person agrees to accept placement in a shelter, so a program that bolsters outreach and interaction is a step in the right direction toward providing our city’s unsheltered individuals with the support they need.

Time will tell how well Outreach NYC has strengthened the engagement aspect of reducing street homelessness. But outreach is only part of the process to help someone access shelter. It is just as important to address the barriers to shelter that range from inconsistent coordination among agencies and shelter sites to a mismatch between shelter requirements and shelter seekers’ unique circumstances.

My office works closely with DHS’s Street Homeless Solutions Unit and with advocates from the Emergency Shelter Network (ESN) to track and improve the ongoing utilization of respite beds offered at houses of worship throughout New York City. Run by volunteers who are often congregation members, churches, synagogues, and other religious facilities open their doors to provide overnight shelters to clients deemed eligible for respite beds through intakes at DHS drop-in centers. In Manhattan, as many as 20 religious facilities offered between 121 and 194 respite beds on a given night over the past year. According to the latest available data my office obtained from July 2019 on respite bed utilization, 24 congregations citywide offered a combined total of 236 beds during that month. Of that, 12 Manhattan sites offered 121 beds—half of the citywide total in both number of sites and in total available beds.¹

¹ DHS Street Homeless Solutions Unit, respite beds utilization report from July 2019 (FY20 Q1). Data is collected monthly, with respite bed availability listed as “Average Available Beds” at each site from a given month.

DHS's data also shows that, overall, the Average Daily Utilization rate of respite beds is within a range of 74%–86% over the past four quarters. In Manhattan, data from the two Manhattan-centric drop-in centers shows an Average Daily Utilization rate as low as 61% for one month and as high as 92% for another month. While the wide ranges reflect the transitory nature of street homelessness and fluctuations are to be expected, I believe addressing the following issues will increase the utilization rate of respite beds and allow for expansion of the respite shelter model into more houses of worship throughout the city:

- Curfew requirements. Individuals placed into respite sites are required to report to the site by a certain time, sometimes via designated transportation from the drop-in center to the site. They must remain onsite until a specified time the next morning, also required to be transported back to a drop-in center at some locations. The curfew is very limiting to people who work or have other obligations that prevent them from getting to a respite site on time. DHS should work with respite shelters on more flexible curfew requirements so working individuals who need shelter can access respite beds.
- Pets. Individuals with pets are not eligible for respite bed placements. As this committee considers Intros 1483 and 1484 today on accommodating pets of homeless individuals in the shelter system, I urge you to extend this consideration for respite bed shelters as well.
- Drop-in center accommodations. Multiple constituents have raised concerns to my staff about drop-in centers being a barrier to shelter. At least one drop-in center in Manhattan has no beds and clients are only given a chair to sleep on overnight until an assessment and placement can be secured. A veteran informed my staff that he had nowhere to elevate his legs to alleviate his medical conditions while he was at a drop-in center. Another constituent, an elderly woman, felt unsafe while waiting in line to be let into a drop-in center and decided to leave prematurely. Drop-in centers must become more accommodating to client needs, especially for those with medical issues and the elderly who cannot always spend a long time standing in line.
- Coordination with sites. Most respite shelter sites are run by volunteers. Understandably, volunteer availability impacts the overall availability of respite beds—for example, fewer sites are open during summer months because congregation members may be out of town. Yet both DHS and advocates from organizations like the Emergency Shelter Network recognize that having a consistent number of available beds is beneficial to program coordination and placement. One idea that the ESN supports is for nearby shelter sites to collaborate and keep more beds open through sharing volunteers, a model that DHS would have to accommodate on its end through adjusting its intake and placement process—and through resources.
- Resources. Ideally, an umbrella coalition like the ESN would have consistent and sufficient funding to bring on a full-time coordinator to encourage collaboration among existing respite shelter sites and to expand the program into the many other houses of worship throughout the city. This person can also be a liaison between shelter sites, drop-in centers, and DHS's Street Homeless Solutions unit. Both the Administration and City Council must back the commitment to eliminate barriers to shelter by allocating funding for program coordinators who can strengthen the respite shelter program.

While the respite shelter program serves a very specific demographic within New York City's larger homeless population, the issues I highlighted above are not exclusive to people seeking to access respite beds. My office has also assisted constituents who encountered similar barriers with the more traditional DHS shelter placement process.

For example, Mr. S was evicted from his apartment in December 2019 and has been on the street, sometimes sleeping in a Dunkin' Donuts. My office connected him with Adult Protective Services (APS). Although APS referred Mr. S to a shelter, his case manager did not take steps to assure his intake. As someone with severe health conditions, Mr. S was unable to move into just any shelter due to many of their conditions that would exacerbate his health problems. In the end, he chose to remain on the street.

Ms. M lost her employment in September 2019 and was left without a home for her and her two-year-old daughter. She could not move in with her parents, who live in a NYCHA apartment with four other grandchildren. When Ms. M sought help at Department of Social Services, she was inaccurately refused shelter and told to go live with her family in NYCHA, which she could not do as this would make her parents' apartment overcrowded and violate NYCHA house rules. Ms. M and her daughter now float around at different friends' home.

Both of these stories show how city agencies, which are supposed to help people access shelter, are themselves barriers that keep those in need of a home from securing suitable shelter. In Mr. S's case, the APS case manager failed to coordinate with DHS staff to ensure Mr. S would be provided with shelter that would not worsen his health. For Ms. M, she was refused shelter outright due to a DSS staff's mistaken belief that she could move into her parents' NYCHA unit. These cases highlight the lack of coordination and communication of accurate information among agencies, and the people these agencies are supposed to help end up suffering the consequences.

As much as I believe the Administration's effort to reduce the city's approximately 3,500 street homeless population through Outreach NYC is well intended, this number will not significantly decrease until barriers to shelter, sometimes created by city agencies, are addressed. As this committee considers my recommendations, I urge you to follow through by committing resources to homeless advocacy organizations and service providers, and to improve interagency coordination through more staff training so that everyone experiencing homelessness can have access to adequate and appropriate shelter.