



Human Resources
Administration
Department of
Homeless Services

**Testimony of Molly Wasow Park, Commissioner
New York City Department of Social Services
Before the New York City Council, Committee on General Welfare and
Committee on Public Safety Hearing Protecting Lives in the Cold: Oversight of
NYC's Code Blue Operations
February 10, 2026**

Good morning, my name is Molly Wasow Park and I serve as Commissioner of the New York City Department of Social Services (DSS), which includes the New York City Department of Homeless Services (DHS) and the New York City Human Resources Administration (HRA). I am joined by NYC Emergency Management Commissioner, Zach Iscol, Deputy Commissioner Alexander Crohn from the New York City Police Department, and Chief Medical Examiner Dr. Jason Graham. I would like to thank Chair Hudson, Chair Feliz, and the members of the Committee on General Welfare and Committee on Public Safety for holding this oversight hearing on New York City's Code Blue Operations.

To start, I want to remind New Yorkers to call 311 if you see someone experiencing unsheltered homelessness. An outreach team or first responder from NYPD or FDNY will be dispatched and work to make sure that the individual is connected to a safe and warm place. New Yorkers can also sign up for Notify NYC to learn about current resources and changing conditions; Notify NYC provides information about emergency alerts and important resources and services. During the past three weeks, New York City experienced weather that was as cold or colder than some parts of Alaska. We want to be sure that every New Yorker is safe as we confront the coldest temperatures we have encountered in nearly a decade.

Our hearts go out to the families and loved ones of New Yorkers who have tragically died outside due to the cold temperatures as a result of this horrible cold spell in recent weeks. The reason we do the work we do is to prevent these tragedies and connect vulnerable people to the shelter and resources they need to stay safe and warm. We are acutely aware that extreme cold is particularly challenging and dangerous for people experiencing unsheltered homelessness. DSS is taking action to keep our unsheltered neighbors safe. Part of our job as public servants is delivering the

message that help is available at every opportunity we can – that is, at public meetings like this, in-person with outreach workers, through social media, spreading the word through community partners and faith leaders, and through public service announcements. I thank you all again for this opportunity to use this platform to highlight the resources available and share the work DSS is doing to get people experiencing unsheltered homelessness the help that they need.

Our preparation for Code Blue begins before winter starts. Before winter begins, our team at Street Homeless Solutions reviews our Code Blue procedure with the outreach team directors and discusses winter preparedness. As needed, trainings include a review of how to identify and assess at-risk clients and resources available during a Code Blue. We maintain ongoing, targeted placement of the most chronic and vulnerable clients experiencing unsheltered homelessness into housing, with an enhanced effort in the three months before winter.

Each October, outreach teams will create a Code Blue Priority List of clients and identify the usual locations where they congregate. Clients living in vehicles or in exposed geographic areas (e.g. near bodies of water) may be especially at risk and are included on these lists. This list is based on published evidence, the Vulnerability Index, and can be updated as additional at-risk clients are identified through the winter in New York City.

Individuals may be placed on the list if they are or have:

- More than three hospitalizations or emergency room visits in a year
- More than three emergency room visits in the previous three months
- Aged 60 or older
- Cirrhosis of the liver (hepatic cirrhosis)
- End-stage kidney disease (end-stage renal disease)
- History of frostbite, immersion foot syndrome, or hypothermia
- HIV/AIDS
- Tri-morbidity: co-occurring psychiatric, substance use, and chronic medical condition

In addition, the Vulnerability Index takes into consideration the following:

- Living conditions (structure or lack thereof)
- Appropriate dress (layering, and head, hands, and feet covered)
- Open fires, “contained fires”, and the risk for carbon monoxide poisoning
- Ability to be logical and goal-directed toward meeting basic needs
- Active signs of hallucinations or gross disorganization
- Alcohol dependence (current)

- Known history of heart disease, diabetes, peripheral vascular disease and/or severe psychiatric illness

As demonstrated by that non-exhaustive list of factors taken into consideration for placement on the Code Blue Alert Distribution List, we are seeking to take individual circumstances into consideration and remain sensitive to the unique vulnerabilities a New Yorker may face.

Each November, relevant teams within DSS-DHS review Code Blue Procedures including our Street Homeless Solutions Unit, DSS' Health Services Office, DSS' Office of Performance Management and Data Analysis, and DSS' Office of Legal Affairs. This review is conducted with an eye towards strengthening best practices and ensuring our policies and procedures are positioned to meet our mission of serving vulnerable New Yorkers.

Outreach work occurs year-round and aims to build the trust necessary for people experiencing homelessness to connect with shelter, resources, and assistance. Building trust with vulnerable New Yorkers is a vital component of successfully delivering assistance.

During a Code Blue, the City delivers assistance to vulnerable New Yorkers through several pathways. In this period of emergency, 311 calls about people experiencing unsheltered homelessness are routed to 911 in recognition of the serious life safety danger that need be taken into consideration with such severe weather. DHS directs shelters to suspend their normal intake procedures to more readily accommodate New Yorkers in need of assistance and shelters make accommodations for walk-ins. Outreach teams also gain greater latitude in assisting in bringing individuals to shelters. All drop-in centers are open year round and 24-hours a day; drop-in centers assist as many people as they can safely accommodate (taking account of health and safety regulations) and if necessary the drop-in center will identify an alternative location, such as a shelter, a warming center, or another drop in center, and offer transportation to the alternative location. Shelters, safe havens, and stabilization beds make beds available to accommodate individuals brought in by DHS Street Outreach teams or who walk-in; those individuals are engaged by shelter/safe haven case workers to encourage them to stay indoors and access services.

Outreach teams contact vulnerable individuals, including those on Code Blue Priority Lists, to ensure safety and bring them to shelter. During a Code Blue, DHS Street Outreach teams contact individuals on the Code Blue Priority Lists a minimum of once every four hours beginning at 8:00

PM until 8:00 AM. During an Enhanced Code Blue, DHS Street Outreach teams contact individuals on the Code Blue Priority Lists a minimum of once every two hours beginning at 8:00 PM until 8:00 AM to encourage them to accept transport to a safe and warm place. During Code Blue, hospital waiting rooms also serve as warming centers; DSS reminds hospitals of this protocol each year at the beginning of the season.

Given the historic nature of the recent cold spell, the Mamdani administration has mobilized additional resources beyond the established Enhanced Code Blue protocol to ensure no New Yorkers experiencing unsheltered homelessness are left without access to shelter and warm spaces. For the first time ever, a 24 hour Enhanced Code Blue was established on January 31st to ensure the safety of those experiencing unsheltered homelessness.

Over the past two weeks, the Mayor directed DSS-DHS to open approximately 300 additional low barrier beds across multiple locations in Manhattan, the Bronx, and Queens to assist with capacity needs for those in need of immediate shelter. These provider-operated sites are equipped with wraparound services to ensure unsheltered clients have the resources they need to get back on their feet.

During the first weekend, the city mobilized to open warming centers in schools that operated 24 hours per day and have subsequently opened warming buses in each borough operating 24 hours. Winter Access, Relief, and Medical Outreach, also called WARM Outreach, operated by the Health and Hospitals Corporation, also serves as a resource during a Code Blue. Each WARM Outreach mobile unit is staffed by a team that includes a nurse, someone providing administrative support, and a driver; WARM Outreach buses can provide clinical care, food, and warming supplies. As this unprecedented emergency requires an all hands-on deck response, the city, in conjunction with our partners at the MTA, NYCPS, CUNY and H+H operated nearly 65 WARM Outreach centers including an additional 29 newly established this past weekend at 10 NYCPS schools, 2 CUNY based sites, 2 Northwell sites, 2 Overdose Prevention Centers, and more than 13 H+H mobile units.

Understanding that there is a need for innovation during this unprecedented time, the city has embedded people with lived experience who have been connected to housing to outreach teams. We have also reminded all of our shelter providers to expand their perimeter walks around their buildings, and to proactively engage anyone who appears unsheltered by encouraging them to come inside and stay warm as they call 311 for assistance. This has not only been a DSS/DHS

response, volunteers from other city agencies have answered the call to help staff the warming buses.

In addition to understanding the efforts DSS and our sister agencies are making to identify vulnerable New Yorkers in need of assistance and deliver the shelter and resources they need, it is important to understand the complex reasons why a vulnerable New Yorker may refuse shelter. As clinicians and community experts have shared, there are psychological or mental health barriers that may prevent an individual from seeking refuge from the cold. People with medical conditions experiencing psychosis, hallucinations, delusions, disorganized thinking processes, individuals who have experienced severe trauma, individuals with substance use disorders, or individuals with co-occurring substance use and mental disorders may all resist help. As Dr. Van Yu, the Chief Medical Officer at Janian Medical Care at the Center for Urban Community Services put it, "It's difficult to convince people we are the good guys when many traumatized people don't believe good guys even exist." We also recognize other reasons New Yorkers may hesitate before accepting assistance. An individual may be concerned about separation from their pet, their privacy, or their safety. In collaboration with three drop in centers in the Bronx, Manhattan, and Queens, we recently instituted a pilot program that during Code Blue, a person can also bring in one pet, either a cat or dog that is under 45 pounds to these three sites.

Those challenges are precisely why the work of our outreach teams is so important. Regardless of the presence of a Code Blue or Enhanced Code Blue Alert, DHS Street Outreach teams operate throughout the day and night canvassing and engaging with individuals experiencing unsheltered street homelessness. Building a relationship over time, consistently treating people with dignity, understanding the lived experiences of clients, and taking a person-centered approach are some of the tools in the toolbox of outreach workers in overcoming those barriers and assisting clients to voluntarily come indoors. DHS also works continually to ensure clients' rights are respected, among others, including the right to ask for a reasonable accommodation, the right to a safe, clean-living environment, and the right to receive courteous, fair, dignified, and respectful treatment. Thanks to their work, as of February 9th, we have made approximately 1,400 placements to transitional housing (including shelters, safe haven beds, and stabilization beds) since January 19th.

Outreach teams overwhelmingly focus on voluntary transport. From January 19th to February 9th, involuntary transportation represented approximately 2% of placements (34 of ~1,400 includes placement in transitional housing, drop-in centers, warming centers, and hospitals). In cases where New Yorkers refuse services or treatment, in accordance with New York State Mental Hygiene Law, section 9.58, the agency conducts clinical assessments to see if an involuntary removal is

warranted to ensure the health and safety of the individual (i.e. if they are a danger to themselves/at risk of succumbing to hypothermia). In these cases, the individual is typically taken to a hospital emergency department. New York State Mental Hygiene Law provides that transport does not create a presumption that the person should be involuntarily admitted.

As Mayor Mamdani has said, extreme weather is not a personal failure, it is a public responsibility. Alongside our sister agencies, including NYC Parks, Sanitation, Buildings, Transportation, Education, and Health + Hospitals, we have mobilized dedicated outreach teams, clinicians, and conscientious New Yorkers to make every effort to keep vulnerable neighbors safe through this dangerously cold weather.

Thank you for the opportunity to testify today. I am happy to take your questions.



Tuesday, February 10, 2026

**STATEMENT OF DEPUTY COMMISSIONER ALEXANDER CROHN
NEW YORK CITY POLICE DEPARTMENT**

**BEFORE THE NEW YORK CITY COUNCIL
COMMITTEES ON PUBLIC SAFETY AND GENERAL WELFARE**

**COUNCIL CHAMBERS
FEBRUARY 10, 2026**

Good morning, Chair Feliz, Chair Hudson, and Members of the Council. My name is Alex Crohn, and I am the Deputy Commissioner of Strategic Initiatives for the New York City Police Department. On behalf of Police Commissioner Tisch, I thank you for the opportunity to testify today regarding the Department's role in the response to the recent winter storm and extreme cold conditions in New York City.

The City has been under a Code Blue emergency since January 19, with Code Blue being consistently declared every night until an Enhanced Code Blue emergency was declared on January 31. Code Blue is activated between the hours of 4:00 pm and 8:00 am when the temperature, including windchill, is expected to drop below 32 degrees. By contrast, enhanced Code Blue is put in place 24 hours a day when there is a significant amount of precipitation, temperatures drop below negative five degrees, there are sustained high winds, or at the request of the New York City Office of Emergency Management or City Hall.

During a Code Blue or Enhanced Code Blue activation, all 311 calls concerning homeless individuals are deemed "Code Blue calls" and are immediately routed to 911. EMS is the primary responder to Code Blue calls. The NYPD will typically only respond to such calls if requested by EMS. That said, if EMS is in backlog or if EMS expects that it will not arrive on scene within ten minutes, an NYPD unit is also dispatched to help ensure a timely response.

Oftentimes NYPD officers are the first to arrive on scene in response to Code Blue calls; in those instances, officers verify that an individual is in need of assistance and if so, coordinate with EMS to expedite the arrival of an ambulance. This has not only improved the response time to Code Blue calls but has also helped EMS triage and direct its resources where they are most needed. Since January 19, the NYPD has responded to 2,679 Code Blue calls as of midday on February 8. In 22% of these responses, officers determined that an EMS response was unnecessary because the individual either was not at the location or was not in need of assistance. That information is relayed to EMS, which then removes those Code Blue calls from its queue and enables EMS to direct ambulances where they are in fact necessary. During the course of the emergency, officers across the City and in the subway system have offered shelter to 1,507 individuals, with 540 of those individuals accepting shelter.

In a small number of Code Blue cases, responding officers may identify circumstances that require the involuntary removal of an individual in distress to a hospital. Involuntary removals are governed by strict legal standards and are only permissible when individuals reasonably appear to be suffering from mental illness and as a result pose a risk of serious harm to themselves or others. For example,

there are times when an individual suffering from mental illness is at risk of death from the cold and is refusing assistance. In those circumstances, officers will, consistent with the law, forcibly transport that person to a medical facility for evaluation. They do so to save that person's life. Since January 19, our officers have made the decision to involuntarily remove 52 individuals who were outside at the time our officers encountered them.

To be clear, the efforts that I am describing are completely separate and distinct from homeless encampment cleanups. Those cleanups are conducted by the Department of Social Services and the Department of Sanitation, with NYPD officers serving in an ancillary role to provide for the safety of those conducting the cleanups and to voucher certain types of property. The City paused all such cleanups on January 5 as it reassesses its approach to homeless outreach, and that pause remains in place.

Throughout this period of extreme cold, the men and women of the NYPD have tirelessly assisted in the citywide effort to keep people safe, and we will continue to help EMS and other city agencies in this critical work.

Thank you for the opportunity to testify today, and I look forward to answering your questions.



**New York City Department of Emergency Management
Committees on General Welfare and Public Safety
February 10, 2026**

Good morning Chairperson Hudson and Chairperson Feliz and members of the Committees on General Welfare and Public Safety. I am Zach Iscol, Commissioner of New York City Emergency Management (NYCEM). Today is my last full day as the Commissioner for New York City Emergency Management and I cannot tell you how much I appreciate the opportunity to testify before you all today and alongside so many great public servants, including Molly Park, who I have shared this dais with before and who I consider, along with her team at DSS and DHS, among the heroes of the migrant crisis.

I also appreciate the opportunity to talk about extreme weather, including cold, that put so many New Yorkers, especially our most vulnerable, at risk. While I recognize that much of the public conversation around this winter weather event has focused on the tragic loss of life among New Yorkers experiencing homelessness and on questions such as whether emergency orders should be used to involuntarily remove individuals from the streets or whether encampment sweeps should resume, it is important to acknowledge that winter weather is one example of how extreme weather conditions in New York City can be extraordinarily dangerous across many contexts. We see this not only in exposure on the streets, but also in fires, in hypothermia inside homes, in heat related illness during the summer, and in flooding and other hazards that affect New Yorkers in different ways.

As we have seen with other aspects of severe weather, climate change and its impacts continue to pose new challenges to New York City, and City agencies are working to adjust our plans and outreach to New Yorkers to address increased extreme weather hazards and their consequences. Climate change is already reshaping how New York City experiences heat and cold, forcing changes in how we plan, build, and communicate about severe weather. Average temperatures are projected to rise by about 3 to 7 degrees by the 2050s and 5 to 12 degrees by the 2080s. Days at or above 90 degrees could increase from about 17 per year today to as many as 54 by the 2030s and more than 100 by the 2080s. Heat waves may grow from about two per year to as many as nine or ten by the 2080s. At the same time, very cold days below 32 degrees are expected to decline from roughly 70 per year to as few as 17 to 34 by the 2050s. This means less sustained cold but more frequent temperature swings and freeze-thaw cycles that strain infrastructure.

While the city has experienced prolonged stretches of sub-freezing temperatures before, what makes this one so notable is the confluence of other factors around it and some nuanced aspects of the cold itself. Not only was this cold air outbreak preceded by significant snowfall, but also unusually, daytime temperatures, which often rise into the high twenties or low thirties, remained dangerously cold throughout much of this event. These prolonged cold temperatures and snowfall not only complicate response but present an additional hazard to quickly drain heat away from anyone exposed outside. It should also be noted that temperature extremes have been growing more intense in New York City with the changing climate. These growing extremes, along with rapid transitions between them, are increasing risks to public health, city systems, and vulnerable New Yorkers. City agencies are updating plans and public outreach to address these evolving hazards and their impacts.

At Emergency Management, we work every day with a singular focus on reducing risk, strengthening preparedness, and ensuring that no New Yorker faces extreme weather or any other emergency alone. Our hearts are broken for those lost over the past two weeks, not only for the families and loved ones of the New Yorkers who have passed on our streets, but also to those lost to fires in recent weeks and to



hypothermia at home. Each of these losses is felt by our entire team and also serve to show how serious we must take the dangers of today's weather. These tragedies remind us that extreme weather is not a single incident or a seasonal challenge. It is a persistent and evolving threat that requires coordinated planning, clear communication, and sustained partnership across government, communities, and the private sector.

Our approach at Emergency Management is proactive and collaborative, built on supporting New Yorkers through training, education, and timely emergency notifications, aligning government agencies with community and private sector partners to coordinate response in real time, and supporting individuals and neighborhoods through recovery so resilience is strengthened with every event. Our intent is clear, to ensure that every New Yorker has the information, support, and coordinated response necessary to reduce risk, protect life, and enable communities to recover stronger after every emergency.

At Emergency Management, we work extensively with community groups, local and ethnic media, and other organizations to educate the public about the dangers of extreme weather and ways to protect themselves and their loved ones. Last year alone, our team conducted 435 Ready NY events across all five boroughs.

As I said at the January 26 press conference with Mayor Mamdani at City Hall, just because the snow had stopped falling and cleanup was underway, we were not out of the woods. As we have seen over the past two weeks, dangerous weather conditions persist beyond the snowfall with frigid temperatures that place vulnerable New Yorkers at risk as well as our critical infrastructure and utilities. Winter weather can also mean hazardous visibility conditions due to high winds and blowing snow and, in some cases, coastal flooding. It can mean icing in the waterways of the city. All of these hazards require Emergency Management to coordinate and communicate so the city and its residents are ready to prepare for, respond to, and recover from winter weather events.

Emergency Management is always tracking weather conditions in real time in conjunction with our agency meteorologist as well as the National Weather Service, 24 hours a day, seven days a week, and disseminating related hazard information to agencies and to the public. In preparation for the storm, NYCEM started hosting multi agency calls on January 22 when the Winter Weather Plan was activated. The Emergency Operations Center started staffing on January 24 and remains staffed to this day. Calls were held with elected officials, providing forecast updates and inviting multiple agency partners to speak directly to their operations and response posture. Daily private sector calls were held with participants representing multiple industries including financial services, retail, food distribution, airlines, and real estate. Calls were also held with community partners and those representing vulnerable networks throughout the city. We worked with the Board of Elections to communicate about early voting and with NYC Public Schools to communicate about the pivot to online learning. Emergency Management conducted four briefings for city, state, and federal elected officials.

Notify NYC, New York's official free emergency communications program, had nearly 70,000 new subscribers in one week, the largest organic growth surge in its history, bringing the system close to 1.5 million total users. Between January 24 and January 27, the program added almost 35,000 new subscribers, the largest three day increase ever, demonstrating rapid public response to coordinated city leadership and safety messaging. Citywide Notify NYC English Nixle subscriptions more than doubled in seven days, increasing by over 33,000, showing unprecedented demand for real time, location specific emergency alerts. We know that people want to know what is happening and since January 22, the program has sent out 86 notifications, and counting, related to the winter weather emergency. Examples of Notify



NYC messages, sent in 14 languages including ASL, during this time included alerts around weather preparedness messaging, real time weather impacts, transportation disruptions, warming center hours, and amplification of the City's Enhanced Code Blue.

As dangerously cold temperatures moved through New York, the extreme and prolonged cold weather required flexibility and changes to the City's operations to keep the public and most vulnerable populations safe. As a coordinating agency, Emergency Management's role in this extended cold weather event has been to work with and support our partner agencies with core competencies in sheltering and care for vulnerable populations in their operations, and to connect them with other partners who have assets and resources that the City can leverage in emergencies like this one.

This prolonged – still ongoing – activation has demonstrated the city's flexibility in rapidly scaling emergency operations and targeting them to the population and locations experiencing the most acute needs. The operation further demonstrated the interagency staffing model to recruit interagency staff to fill emergency shifts, and the city will continue to refine this model to better coordinate with agencies and staff. As we have seen with other aspects of severe weather, impacts continue to pose new challenges to New York City, and City agencies are working to adjust our plans and outreach to New Yorkers to address this hazard. We will continue to pursue giving New Yorkers the most up to date information on the potential dangers so they can make any adjustments to their activities as needed and stay safe.

Thank you for this opportunity to testify today.



JUMAANE D. WILLIAMS

**TESTIMONY OF PUBLIC ADVOCATE JUMAANE D. WILLIAMS
TO THE NEW YORK CITY COUNCIL COMMITTEES ON
PUBLIC SAFETY AND GENERAL WELFARE
FEBRUARY 10, 2026**

Good morning,

I am Jumaane D. Williams, the Public Advocate for the City of New York. I want to thank Chairs Feliz and Hudson as well as the members of the Committees on Public Safety and General Welfare for holding this important hearing.

*CityFHEPS
ADMIN*

The snowstorm that landed in New York City in late January was the first major snow event in five years. Parts of the city were blanketed in 15 inches of snow and ice. Temperatures as cold as we've seen over the past month are far lower than what we have come to expect. All of this begs the question- how prepared are we for the next major snowstorm or cold spell? And even more generally, are we ready for climate and weather related emergencies going forward? As we enter into budget season in Albany and soon after here in New York City, what are we doing to backfill the vacancies in vital service rolls left by the previous administration while we look at very real budget gaps, especially from programs like CityFHEPS, which by design keeps people in their homes- when we know the most basic prevention from deaths during an extreme cold emergency is shelter.

The deaths of New Yorkers on our streets during these frigid weeks are tragic. As I understand, at least ~~10~~ ¹⁰ New Yorkers lost their lives between January 23rd and ~~February 1st~~ ^{February 2nd}, and of those ten are presumed from hypothermia. No matter their causes of death, it is heartbreaking to know that our neighbors lost their lives out in the cold, believing something could have been done to prevent it. There needs to be a full accounting for what led to these losses. We also must look expectantly to continually expanded efforts from the new administration to provide government support that helps ensure such future pain is prevented.

NYPD

~~Unfortunately some are using the deaths of our fellow New Yorkers for bad-faith political and policy attacks. Today the Council will look at what steps the city has taken, and where those programs can and should be expanded.~~ I assume the loudest voices weaponizing these deaths will also now join in speaking out for expansions in supportive and deeply affordable housing and increased services for New Yorkers, instead of putting more effort into exploiting New Yorkers in death than they supported them in life. Thank You.

NYC



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GREATER NEW YORK

WRITTEN TESTIMONY SUBMITTED TO THE NYC COUNCIL COMMITTEES ON GENERAL WELFARE AND PUBLIC SAFETY OVERSIGHT HEARING ON PROTECTING LIVES IN THE COLD 2/10/26

Introduction and Thanks: My name is Catherine Trapani, and I am the Assistant Vice President of Public Policy for Volunteers of America - Greater New York (VOA-GNY). We are a local affiliate of the national organization, Volunteers of America, Inc (VOA). I would like to thank Chair Hudson and Chair Feliz and members of the Committees on General Welfare and Public Safety for the opportunity to testify today.

About Us: VOA-GNY is a 130-year-old anti-poverty organization that aims to end homelessness in Greater New York through housing, health and wealth building services. We are one of the region's largest human service providers, impacting more than 12,000 adults and children annually through 70+ programs in New York City, Northern New Jersey, and Westchester.

We are also an active nonprofit developer of supportive and affordable housing, with a robust portfolio of permanent supportive housing, affordable and senior housing properties—with more in the pipeline.

Background:

VOA-GNY has been providing shelter services to homeless families since 1991 when DHS first began contracting with nonprofits to do so. We operate five transitional housing programs for families in the New York metropolitan area which serve 456 families, three DHS "emergency" shelters serving an additional 244 families, 7 HRA domestic violence shelter programs serving families and individuals fleeing domestic violence, two single adult women's and one single adult men's DHS shelters which combined have a capacity to serve 538 individuals, a DHS safe haven with capacity to serve 83 men who experienced street homelessness, and our Street to Home DHS Pilot program which places individuals experiencing unsheltered street homelessness directly into supportive housing typically within 1 to 2 weeks of first meeting them.

Thank you Chair Hudson and Chair Feliz for holding this critically timed oversight hearing to safeguard the lives of New Yorkers during this treacherously cold winter. It is heartbreaking that at least 18 people have already lost their lives due to freezing

conditions. We must act with urgency to do everything that we can as a city to help ensure every New Yorker is warm and safe. The City's efforts to help the thousands of unsheltered New Yorkers are a herculean feat by everyday standards, and we applaud the tireless efforts of homeless outreach teams to work with extremely vulnerable unsheltered New Yorkers to keep them safe during these particularly brutal conditions.

In this unprecedented cold wave, every New Yorker must do their part to watch over unsheltered neighbors and call 311 or 911 if someone is in distress. VOA-GNY's staff, in response to Mayor Mamdani's letter to DHS shelters, is canvassing the immediate areas outside our programs to check if anyone needs to come inside to warm up. Beyond heightened awareness, there are multiple immediate and longer-term actions the City can take to further reduce the number of New Yorkers experiencing unsheltered street homelessness:

1. Coordinate efforts of City, State, and privately funded street outreach teams.

- a. **Designate an Outreach Coordinator with the authority to coordinate street and subway canvassing of all City and State funded outreach teams.** New York City has a number of parallel street outreach programs including DHS Street Homeless Solutions (SHS) contracted providers and Joint Command Center (JCC) staff, NYS OMH Safe Options Support (SOS), H+H Street Health Outreach & Wellness (S.H.O.W.) and others. Coordination of parallel programs would minimize duplicated efforts and further expand coverage areas.
- b. **Implement data sharing across City and State funded outreach programs to increase transparency across parallel systems and improve coordination of care and resources.** DHS Street Homeless Solutions (SHS) non-profit outreach teams and Joint Command Center (JCC) staff utilize StreetSmart and CARES data systems to track engagements and case notes on the street and in shelter, however other outreach programs like NYS OMH Safe Options Support (SOS), NYC DYCD Runaway and Homeless Youth (RHY) and H+H Street Health Outreach & Wellness (S.H.O.W.) use different systems. By coordinating data, different outreach teams will be able to more efficiently provide care and connect them to shelter and housing placements like safe havens and supportive housing.

2. Provide more viable choices for unsheltered people

- a. **Enable "chosen families" to shelter together.** We encourage DSS to add flexibility to how it defines "family" to enable "chosen families" to enter shelter or temporary stabilization sites. People living on the street may band together for safety and be unwilling to separate into Single Adult shelters.

Allowing them to shelter together preserves support networks and avoids social isolation.

- b. **Widen access to low-barrier shelter options that appeal to people on the street.** People make rational choices to not enter shelter, citing concerns of safety, privacy, and overly restrictive regulations. Offering transitional housing options which address these concerns can convince more people to come in off the streets.

- i. **Pause implementation of the rule change¹ limiting access to safe havens.** Minimally, the City should wait until other street outreach programs have access to DHS CARES and StreetSmart data systems or expand accepted data sources to verify street homelessness and clinical needs of individuals. Slated to take effect on Feb. 12th, 2026, a new rule with mandate that only those with documented chronic homelessness and physical/mental health needs in these limited data sources can qualify for safe haven placement which will create a barrier to safe havens for street homeless individuals served by non-DHS outreach programs, such as DYCD RHY and OMH SOS clients.

The City should also incorporate healthcare data systems (with client consent) to demonstrate someone meets “significant clinical needs” criteria for safe havens. These systems include OMH Psychiatric Services and Clinical Knowledge Enhancement System (PSYCKES) as well as NYC specific Regional Health Information Organizations (RHIOs). Someone who needs enhanced clinical support to stabilize ought not need to be verified by one specific outreach program when there’s existing clinical healthcare records.

- ii. **Create more stabilization beds and Safe-Haven “light” low-barrier shelters for less-hardened unsheltered homeless.** Because of the scarcity of safe haven beds, the City relies on chronicity requirements to ration these out. Any chronicity requirement to access such services only prolongs the amount of time people are likely to remain unsheltered and out of the system. There should be enough stabilization and safe haven bed capacity to accommodate everyone who needs such a placement.

While safe havens have enhanced clinical services for the most complex cases, the appeal of the model is its low-barrier nature, and more privacy than typical shelters. For individuals who may not need the clinical supports, creating a “light” version which still gives clients the flexibility to come in without preconditions like sobriety (“wet”

¹ <https://rules.cityofnewyork.us/wp-content/uploads/2026/01/DHS-Final-Rule-for-Publication-Relating-to-Low-Barrier-Transition-Housing.pdf>

shelters) and have a private room, without the enhanced clinical services, could help convince more unsheltered to come inside while preserving capacity of traditional safe havens for those with untreated mental health conditions and similar needs.

iii. **Expand Pet-friendly shelters:** In places where the city has been able to accommodate pets with their owners in shelter, like specific safe havens and domestic violence shelters, the success has been clear. However, accommodating pets entails specific challenges for the program which must be planned for, particularly in congregate facilities with shared spaces of unrelated households. Utilizing purpose-built design, intentional room assignment composition, and providing resources for responsible pet ownership can help mitigate challenges, letting people avoid having to give up their pet to enter shelter.

c. **Improve the quality of the general shelter system:** Many people who refuse offers of shelter do so because they've had bad experiences in shelters in the past. Typical shelters for single adults are congregate style, and some have dorms with dozens of people sharing rooms making privacy scarce. It can be difficult to sleep with so many people sharing one space given noise and the sense of vulnerability one may feel. In many shelters, the design is institutional in feel reminding residents of carceral settings. While the City has prioritized purpose built and well-designed shelter for new facilities coming online, many existing shelters are in desperate need of rehab. Despite historic investments in 2018 to improve conditions with the implementation of model budgets, the rates were not indexed to inflation, and older shelters are struggling. The City must invest in capital improvements for these older facilities to promote client-centered, traumatic-informed design and they must update the rates to ensure access to quality food, robust services, dignified living spaces, and high-quality care that will help people get back on their feet.

3. Streamline access to permanent housing for unsheltered people

a. **Expand and replicate VOA-GNY's Street to Home DHS pilot program** which directly places people directly from the street into permanent supportive housing. By putting people before paperwork, we were able to offer keys to their own private room to people living on the street within days, not months, of first meeting them. This innovative model demonstrates that chronically homeless individuals with significant mental or behavioral health needs, when given direct access to permanent housing paired with clinical supports, can regain stability and thrive within the community.

- b. Pass Int. 1191-2025 (Nurse) to study and streamline information requirements for supportive housing applications.** By simplifying the 2010e supportive housing application through removal of non-mandatory information requirements, the City can simplify an unnecessarily complicated application which can be a barrier for housing, especially for people lacking permanent addresses and disconnected from systems of care.

Closing:

We are grateful for the opportunity to testify and look forward to working with the Council and the Administration to continue safeguarding the lives of New Yorkers experiencing the trauma of homelessness and helping them regain stability and find a place to call home. Should you have any questions, please email me at ctrapani@voa-gny.org.

Respectfully submitted by Catherine Trapani, Assistant Vice President of Public Policy, Volunteers of America - Greater New York.



HOMELESS SERVICES UNITED

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www.HSUnited.org

Testimony for the New York City Council Joint Oversight Hearing on Code Blue Operations

February 10, 2026

My name is Kristin Miller, and I am the Executive Director at Homeless Services United. Homeless Services United (HSU) is a coalition representing over 55 mission-driven, homeless service providers in New York City. HSU advocates for the expansion of affordable housing and prevention services and for immediate access to safe, decent, emergency and transitional housing, outreach and drop-in services for homeless New Yorkers. Homeless Services United promotes effective solutions to end the crisis of homelessness in New York City. Thank you, Chairs Hudson and Feliz, for convening us here today to discuss this critical issue.

We are incredibly saddened and outraged by the death of 18 New York residents who passed during the ongoing cold snap. There is no justifiable reason for someone dying on the street.

What we would like to raise in today's testimony are some of the issues that street outreach and stabilization bed providers have identified as obstacles in successfully moving New Yorkers experiencing unsheltered homelessness into low-barrier transitional housing. In a review of the current eco-system of street outreach, there are over 25 different agencies, entities, or data systems involved. This complex network creates significant coordination challenges, with different funding requirements, data systems, and reporting mechanisms making unified client service difficult. As the central coalition of providers, HSU has been working to navigate this complexity and identify strategic points for intervention.

Last year, we saw the population of New Yorkers experiencing unsheltered homelessness rise to 4,500 people. This increase is incredibly concerning. However, street outreach teams have been working non-stop. Over the last 2 years, these teams successfully placed 10,842 people experiencing unsheltered homelessness into housing. However, the success of contracted street outreach teams and safe haven or stabilization bed providers have been limited by system inefficiencies.



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We need greater coordination between teams and systems. For example, increased coordination between emergency departments, inpatient teams, and outreach teams. Teams also want more data coordination and increased access to comprehensive client information on CARES. In the immediate future, providers are requesting faster response times and more clarity from the DHS Joint Command Center.

In order to successfully move more clients from the streets to housing, we need to expand the options available. Often times, clients don't want to enter shelter for a number of reasons. For example, clients repeatedly discuss wanting single rooms or private places that they can feel secure. We recommend reinvesting in stabilization bed sites that have closed their doors due to funding issues and expanding VOA's Street to Home program.

We also call on the administration and the City Council to examine how these programs are funded. The cold snap may be over soon, but New Yorkers experiencing street homelessness are just as much at risk during extreme heat. We must fund these programs to be innovative and responsive all year round. Our members report that staffing is always a challenge for outreach teams because of government-contracted low wages for extremely challenging work, which is especially challenging during conditions like the recent storm and cold weather fronts. We need contracts to be funded sufficiently to pay our staff career wages, and this is especially clear when emergencies happen.

Finally, while the state expanded the involuntary commitment laws in last year's budget, we stand by the belief that these should be used in the most extreme and limited of cases. In the event that a person is committed and hospitalized involuntarily, we must do more by addressing post-commitment care by catering hospitalization periods to meet treatment needs. We do not believe that the increased use of involuntary commitments is the solution.

We think that this moment calls on all of us to learn, reflect, and be ready to be innovative to meet the needs of unsheltered New Yorkers. We look forward to working with the council and the administration on these issues.



Testimony before the New York City Council
Joint Hearing of the Committees on General Welfare & Public Safety

February 10th, 2026

Jody Rudin, President & CEO, Institute for Community Living (ICL)

Good morning, my name is Jody Rudin, and I am the president and CEO of the Institute for Community Living (ICL), a large behavioral health and housing organization that serves over 10,000 people annually and provides housing for 4,000 people each night across all five boroughs.

Thank you, Speaker Menin, Chairs Hudson and Feliz, and Committee members, for your leadership in calling this hearing.

The Administration deserves credit for its rapid mobilization of warming centers, buses, and kiosks, and for opening emergency beds during this recent cold weather emergency. The effort to evolve the plan and resolve issues has been noteworthy. And the homeless outreach providers deserve our gratitude for their 24/7 life-saving work. My colleagues at ICL and I stand ready to support this work however we can.

However, we must also understand that for our neighbors living on the streets, "emergency" is not a seasonal event; it is their daily reality. Unhoused New Yorkers face an ongoing public health crisis. Individuals living on the streets experience mortality rates 3.5 times higher than the general population due to the compounding impact of weather emergencies (including hot weather), deterioration of health, and violence.

We cannot "emergency" our way out of a structural crisis. We need a permanent, non-seasonal commitment to the following:

Housing Prioritization, "low-threshold" beds (such as safe havens, stabilization, and medical respite beds), more IMT slots, and a commitment to fund the STEPS program, which works with the highest acuity clients across the city who have often been on the streets for decades and have been failed by other systems. Programs like STEPS, an innovative pilot program operated by ICL that steps down those with the most acute needs from an intensive mobile treatment program to less intensive services, have demonstrated that sustained, intensive engagement can successfully connect even the most chronically unhoused individuals to housing and care. The city council worked with then-Mayor Adams to allocate \$15M in the FY2026 budget. These funds have not been procured and, if allocated, could save lives.

We also need an accountable governance structure that reflects and streamlines the complexity and cross-agency nature of this work.

And we need to return to a humane encampment policy.

When I was assistant commissioner at DHS, we reduced street homelessness by 40%.

Here's how: outreach teams created a by-name list of people living on the streets, identified what each individual wanted, and we created those options, including innovating and scaling safe havens, stabilization beds, and other low-threshold models. We prioritized people for housing based on their mortality risk and length of homelessness.

And we paired this person-centered approach with a commitment to ending encampments, which are not humane and rob people of their dignity.

You can read more about this approach in my recent column in Vital City [here](#).

Thank you for the opportunity to testify.



Center for Urban Community Services
198 East 121st Street, 6th Floor
New York, NY 10035

City Council Testimony from the Center for Urban Community Services & its healthcare affiliate, Janian Medical Care

Committee on Public Safety: Protecting Lives in the Cold: Oversight of NYC's Code Blue Operations

10 February 2026

Chairperson Hudson, Feliz and members of the committee on General Welfare and Public Safety, thank you for the opportunity to deliver testimony about Code Blue operations. I am Van Yu, Chief Medical Officer of the Center for Urban Community Services (commonly referred to as CUCS), and its healthcare affiliate Janian Medical Care, which provides psychiatry and street medicine to city-funded outreach teams including the Manhattan Outreach Consortium, Breaking Ground Street to Home in Brooklyn and Queens, and the BronxWorks Homeless Outreach Team, and in this capacity we've enjoyed a long-standing partnership with the Department of Homeless Services including the Joint Command Center. In calendar 2025, street medicine served 489 patients over 3,417 visits and outreach psychiatry served 344 patients over 1,084 visits. We offer the following two recommendations to improve Code Blue Operations.

Pre-Code Blue Investments

First is to seek opportunities to increase support, training and retention of outreach staff. Much of the groundwork for Code Blue success is laid down in day-to-day, painstaking work BEFORE a Code Blue. Many vulnerable people suffer from serious, difficult-to-treat mental disorders that impair people's ability to accept care and navigate housing pathways. For some, severe psychosis can lead to paranoia and disturbances of reality testing that can cause fear of outreach providers. For others, severe, chronic trauma often results in serious mood disorders, disrupted personality development, and substance use disorders. For such people, chaos and cruelty feel normal, and traumatized people often sow chaos in, and expect cruelty from, interactions with service providers. Furthermore, the processes and settings of service can be overwhelming and even terrifying. These are some of the most complicated and challenging psychiatric conditions to address. Therefore, effective service requires psychological understanding, resilience, persistence and patience. Without adequate training, supervision and support, outreach encounters can inadvertently exacerbate symptoms, and outreach providers can get burnt out. Furthermore, the separation of familiar outreach provider from a team can disrupt weeks or even months of hard-won trust. During a Code Blue, a vulnerable person is much more likely to agree to come inside or accept care from a provider who has already nurtured a psychologically effective, trusting relationship over time. So, interventions to support and retain providers—investments made today—will pay dividends during a Code Blue.

Reinstatement of the Senior Advisor for Severe Mental Illness Position



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Second is to seek opportunities to improve collaboration around, and support for, hospital transports and inpatient admissions. The Senior Advisor for Severe Mental Illness, who has reported directly to the Deputy Mayor for Health and Human Services, has been invaluable in brokering such collaborations between outreach providers, NYPD, FDNY, and Health and Hospitals. We encourage the city to reinstate this position. Also, increased acute inpatient, extended care unit, and transitional housing unit capacity could ease pressure to discharge people from emergency departments and provide more opportunity for inpatient stays of adequate duration to realize treatment benefit.

Thank you for your attention and consideration of these recommendations.

Sincerely,

A handwritten signature in black ink that reads "Van Yu". The signature is written in a cursive, flowing style.

Van Yu, MD

Chief Medical Officer, Center for Urban Community Services (CUCS)



**Testimony for Protecting Lives in the Cold:
Oversight of NYC's Code Blue Operations**
Committees on Public Safety & General Welfare
New York City Council
February 10, 2026

Dear Members of the New York City Council:

Legal Services NYC is the largest civil legal services provider in the country, and our neighborhood-based offices and outreach sites across all five boroughs assist over 100,000 individuals annually. Legal Services NYC is dedicated to fighting poverty and seeking racial, social and economic justice for low-income New Yorkers. This testimony is being submitted to shine a light on a critical contradiction in the City's policies that puts New Yorkers's lives at risk every winter.

Wisely, the City created a Code Blue policy that goes into effect when temperatures drop below freezing to ensure that the unhoused can easily gain access to shelter. The City also deploys outreach teams to offer services and shelter and warming centers are utilized across all five boroughs. This policy is in place for a good reason – living outside during freezing temperatures is not only dangerous but can be deadly.

The City recognizes that for the unhoused, freezing temperatures present a real threat, yet at the same time the City is working to bring the unhoused inside it allows City Marshals to continue with evictions -- thereby rendering a new class of New Yorkers homeless. This is an unconscionable policy contradiction.

Legal Services NYC analyzed, using publicly available data the number of evictions that occurred across the City when the temperature was below 32°F thereby triggering a Code Blue response and found that from 2017 to date there were nearly 15,000 evictions carried out¹. And, even more shocking, on days when the temperature in New York City was below 20°F degrees, 2,150 individuals and families became homeless as a result of an eviction. These figures are assuredly an underestimate because they only take into account the actual temperature and not the wind chill which the City's Code Blue policy takes into account.

¹ The total number of evictions that occurred from 1/1/17 to 2/6/26 when the actual temperature was below 32°F was 14,837.

Demand Justice.

Climate change is exacerbating the risks posed by both excessive heat and extreme cold. Last summer Legal Services NYC released a report, [The Deadly Impact of Evictions During Extreme Heat](#), on the dangers of being evicted during periods of extreme heat. Last summer's brutal heat waves were followed by this viciously cold winter, the coldest many of us can remember. We know from these past weeks how dangerous it can be to be unhoused during below freezing temperatures. And yet last week when the actual temperature on Monday morning at approximately 9am was 20°F and 9°F with the wind chill, City Marshals began evicting tenants and ultimately evicted 107 individuals and families.²

The human cost of this contradiction is real. There is ample evidence to support the fact that an eviction is a violent disruption that has long-term destabilizing impacts. Nearly 18,000 New York City tenants and their families were evicted in 2025.³ Evicted tenants are often forced to relocate to poorer and higher-crime neighborhoods with lower performing schools and fewer job opportunities than those who move by choice.⁴ Mothers who are evicted are more likely to suffer from depression and experience elevated stress levels, and they and their children tend to have poorer health outcomes than those who were not evicted.⁵ The day an individual or family loses their home can be one of the worst days of their lives and it also can be life threatening as losing one's home can significantly increase the risk of suicide.⁶

A tenant attempting to stop an eviction must travel to court to file an emergency motion or travel to a shelter intake center in another borough all while being exposed to the dangerous elements. Families evicted during Cold Blue periods face immediate danger, particularly those with children, elderly members, or individuals with health conditions. Emergency shelters, already strained during extreme weather, may not be able to adequately absorb the additional displacement caused by evictions. Many families evicted during winter months cannot secure alternative housing immediately and face the choice between overcrowded shelters, unsafe temporary arrangements, or exposure to the elements.

The City has acted to suspend evictions during periods of extreme weather in the past. Evictions were suspended the week immediately following the late January storm. And on other occasions the City has suspended evictions during extreme weather events but unfortunately there is not a uniform policy. The notice to suspend evictions are typically not issued until the day prior so

² See NYC Open Data at https://data.cityofnewyork.us/City-Government/Evictions/6z8x-wfk4/data_preview

³ According to NYC Open Data the exact number of households that were evicted in 2025 was 17,894.

⁴ Mathew Desmond and Tracey Shollenberger, "Forced Displacement from Rental Housing: Prevalence and Neighborhood Consequences," *Demography* 52, no. 5 (October 2015): 1751–1772, <https://doi.org/10.1007/s13524-015-0419-9>.

⁵ Matthew Desmond and Rachel Tolbert Kimbro, "Eviction's Fallout: Housing, Hardship, and Health," *Social Forces* 94, no. 1 (September 2015): 295–324, <https://doi.org/10.1093/sf/sov044>.

⁶ Katherine A. Fowler et al., "Increase in Suicides Associated with Home Eviction and Foreclosure during the US Housing Crisis: Findings from 16 National Violent Death Reporting System States, 2005–2010," *American Journal of Public Health* 105, no. 2 (February 2015): 311–16, <https://doi.org/10.2105/AJPH.2014.301945>.

tenants may still be taking steps to either plan for an eviction or to prevent it such as travelling to court during dangerously cold weather. The Department of Investigation needs to implement a policy, rather than an ad hoc day by day response, that makes it clear when it is too dangerous to evict.

As climate change intensifies extreme weather events across all seasons, New York City has an opportunity to take a bold step on behalf of its most vulnerable residents when they need shelter most. In doing so, the City will be joining other jurisdictions who have implemented policies suspending evictions during periods of extreme weather. Both Washington, DC, and Cook County Illinois, which includes Chicago, have recognized that evictions during extreme cold are dangerous and have policies in place to protect tenants.

Allowing evictions to occur when it puts New Yorkers at risk of serious harm or even death is inhumane. New York City has recognized that extreme cold is a grave threat to our fellow citizens who are unhoused, yet the City allows people to become newly unhoused during those same conditions. By establishing a uniform standard that suspends evictions when a Cold Blue is in effect, New York City can prevent unnecessary illness and death, reduce strain on emergency services and the shelter system, and demonstrate that basic human dignity and public health are paramount.

Thank you for your time and consideration.

Respectfully submitted,

Carolyn M. Norton
Interim Chief of Litigation & Advocacy
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The Deadly Impact of Evictions During Extreme Heat

An Advocacy Report

by Carolyn Norton and Virginia Ryan

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ABOUT LEGAL SERVICES NYC

For more than 50 years, Legal Services NYC has challenged systemic injustices and made real, tangible improvements in the lives of low-income communities across the city. This work includes preventing evictions and preserving housing; demanding access to high-quality education, health care, and economic security; ensuring safety and stability for survivors of domestic violence and immigrants; and fighting for the dignity and respect of all New Yorkers, including LGBTQ communities, New Yorkers with disabilities, and people of color.

With deep roots in communities in all five boroughs, Legal Services NYC has handled more than two million cases since our founding. And with a staff of over 700 dedicated advocates, we are now the largest provider of free civil help in the country serving over 100,000 New Yorkers in need annually. We are proud of what we have accomplished and look forward to continuing to expand the scope of our work with the generous support of our individuals, partners, and communities across the city.

Learn more at <http://www.legalservicesnyc.org>.

EXECUTIVE SUMMARY

Extreme heat in New York City endangers all New Yorkers, but it is particularly dangerous for those facing eviction and homelessness. Due to global warming and the City's dense urban environment, heat waves are becoming more frequent and hotter, putting vulnerable communities at risk. New York City experienced the hottest day in more than a decade on June 24, 2025, with the temperature hitting 99°F in Central Park and 102°F at JFK airport. The result was a massive spike in emergency room visits. Statistics show that more than 500 New Yorkers die from the heat each summer.

At particular risk are New Yorkers facing eviction, who, Legal Services NYC found, statistically live in the City's hottest neighborhoods. When already vulnerable tenants are forced out of their homes during extreme heat, they are at greater risk of heat-related health problems and even death. But it doesn't have to be that way. This report analyzes rising temperatures in New York City, the heat's disproportionate impact on Black and marginalized communities, the frequency of evictions in NYC's hottest neighborhoods, and recommends that the City halt evictions during extreme heat as a matter of public safety.

Key Findings:

- **New York City is becoming increasingly hot**, exacerbated by the extreme density of buildings and the Urban Heat Island (UHI) effect, which has a greater impact on New York City than any other American city. 2024 was the hottest year on record.
- **Deaths due to excessive heat disproportionately impact low-income communities of color.** Black New Yorkers are nearly 2.5 times as likely to die from heat-stress than white New Yorkers and at

younger ages due to social and economic disparities.

- **Evictions during a heat wave are deadly.** From January 1, 2017 to June 30, 2025, an astonishing 7,554 evictions occurred on days when the temperature exceeded 90°F. Tenants facing eviction have a greater risk of heat-related health issues due to their exposure to the elements, putting them at risk of exhaustion, dehydration, and other heat-related illnesses.
- **Data shows that New York City's poorest neighborhoods are also the hottest, and the hottest neighborhoods are where evictions happen more frequently.** From 2017 to 2025, data shows that 64% of evictions occurred in areas where the Heat Vulnerability Index is 4 or 5 (the hottest), demonstrating the interconnectedness of heat vulnerability and poverty. Areas with the highest evictions rates in New York City are majority Black and Latinx.
- **Other U.S. cities have taken action, but New York City has not.** Cities in California, Maryland, Illinois, and Washington DC have policies regarding eviction in extreme weather, but New York City lags behind.

Recommendation:

New York City must act to protect its most vulnerable residents during extreme heat. A modest first step is for the Department of Investigation, which oversees city marshals, to adopt a policy that universally suspends evictions during heat events, defined as any day the temperature is projected to be above 90°F. Such a policy is essential to protect the most vulnerable New Yorkers from heat-related illness or even death.

INTRODUCTION

In New York City and nationwide, extreme heat kills more people on average every year than all other natural disasters.¹ Shockingly, more than 500 New Yorkers die prematurely each summer on average due to hot weather.² As a point of comparison, there are more heat-related deaths in New York City each summer than there are homicides in the entire year,³ and there are twice as many heat-related deaths in New York City than car accident deaths annually.⁴ Heat-related deaths account for roughly 3% of all deaths in New York City between May and September.⁵ Extreme heat is known as the silent killer because its effects can be subtle and delayed, making it hard to recognize its danger until serious problems have occurred, and it disproportionately impacts the most vulnerable.⁶

Heat also significantly increases the risk of hospitalization and puts a strain on New York's emergency rooms. On June 24, 2025, when the temperature in Central Park reached a sweltering 99°F, 112 New Yorkers were hospitalized for heat-related illnesses, a staggering number given that in the past five years, there have only been three days when more than 50 New Yorkers were brought to emergency rooms as a result of the heat.⁷ Excessive heat directly compromises the body's ability to self-regulate temperature resulting in dehydration, heat cramps, heat exhaustion, heatstroke, and hyperthermia.⁸ Exposure to extreme temperatures can also exacerbate chronic conditions such as cardiovascular and respiratory diseases, cerebrovascular issues, and diabetes. Prolonged heat exposure is linked

to increased hospital admissions for cardiovascular, kidney, and respiratory disorders.⁹ It can also worsen mental health conditions and in some instances result in death.¹⁰

There are more heat-related deaths in New York City each summer than there are homicides in the entire year.

Being evicted during a period of extreme heat is potentially life-threatening, as being unhoused dramatically increases one's chance of heat-related death. Tenants may be forced to pack up their belongings to prepare to move when it is dangerously hot, or travel to another borough to an intake center to access shelter. Moreover, tenants trying to stop an eviction must travel to court during a heat wave.

The City recognizes the dangers that extreme heat poses to New Yorkers but has yet to meaningfully act. This report urges the City to establish a clear policy that would uniformly suspend evictions when the heat index exceeds 90°F to protect tenants from the compounding dangers of possible homelessness during heat waves which can lead to heat-related illness, hospitalization, or death.

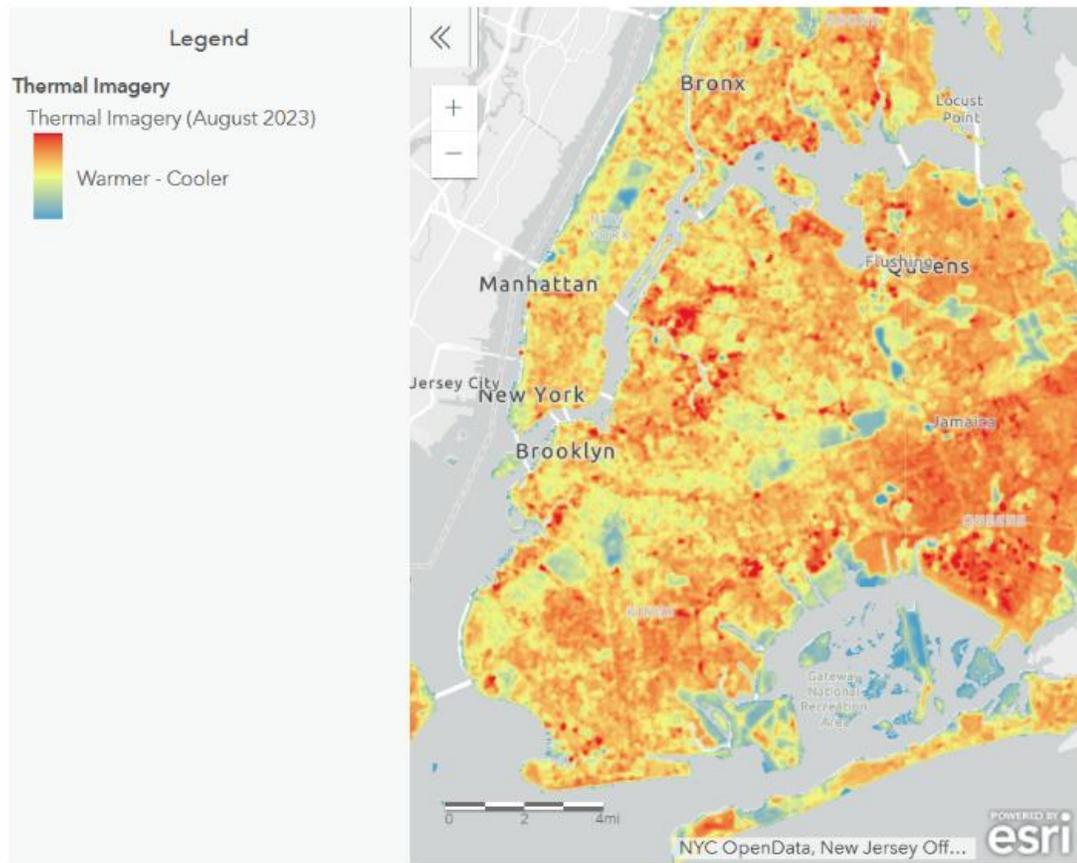
EXTREME HEAT EVENTS ARE BECOMING MORE SEVERE IN NYC

New York City’s dense urban environment makes heat waves particularly acute due in part to the urban heat island (“UHI”) effect. The UHI effect refers to the phenomenon whereby cities resemble an island of heat among a broader sea of cooler temperatures in suburban or rural areas.¹¹ Because of this, the UHI effect results in more heat-related deaths in urban areas than in rural or suburban areas.¹² In New York City, the UHI effect has a greater impact than in any other American city, resulting in the temperature feeling an average of more than 9.7°F hotter because of the built environment.¹³

The extreme density of buildings and the large population of people living in small spaces in close proximity makes New York City particularly susceptible to trapped heat. Concrete, glass, and asphalt are excellent insulators, which means they trap heat during the day, and the proliferation of tall buildings causes heat released from buildings to linger between them.¹⁴ The high concentration of people increases energy from the heat people burn off in their daily lives.¹⁵

Vegetation that is abundant in rural areas and lacking in urban areas has an important impact

NYC Thermal Imagery



Source: NYCEM GIS

Figure 1. Thermal Imagery Map of NYC in 2023. Warmer locations are shown in orange and red, while cooler areas are shown in green and yellow.

on the UHI effect. A city block covered in trees, shrubs, and grass can have an average summertime temperature several degrees cooler than one completely covered in impervious surfaces.¹⁶ During a heat wave on August 9, 2022, Washington Heights, a neighborhood with only 3% vegetation and high volume of built-up areas, recorded the highest temperature in the City.¹⁷ That same day, Ferry Point Park, which has 77% vegetation and is close to the water, recorded the lowest temperature in the City at 8°F cooler than Washington Heights.¹⁸ The map above demonstrates that neighborhoods with parks and trees reduce urban heat.¹⁹

Further, what the temperature actually feels like can vary significantly from the actual temperature because of the heat index. The heat index measures how it actually feels when humidity is combined with the air temperature. The heat index is a better measure of the risks from heat exposure than the actual temperature alone because with higher humidity, the body is less able to cool itself through sweating. More moisture in the air means that sweat cannot evaporate, which is an essential way the body regulates temperature.²⁰ Potential risk to public health is better assessed through forecasted heat index rather than forecasted temperature.²¹

In addition to the dangers of the heat itself, air quality worsens during extreme heat, thereby increasing the risk of being outside for those with respiratory issues. Urban areas have high levels of ground-level ozone pollution, which occurs when heat triggers chemical reactions between pollutants associated with electric utilities, industrial facilities, and vehicles.²² In New York City, fine particulate matter is

In New York City, the UHI effect has a greater impact than in any other American city, resulting in the temperature feeling an average of more than 9.7°F hotter because of the built environment.

particularly concerning. It annually contributes to 2,000 deaths and over 5,000 emergency room visits and hospitalizations for respiratory and cardiovascular disease.²³ Hot weather worsens ground-level ozone concentrations, which can exacerbate asthma and other respiratory diseases.²⁴ The dangerous combination of heat and air pollution makes evictions especially dangerous during extreme heat. Respiratory illnesses like asthma are twice as prevalent among the unhoused population.²⁵

Climate change is exacerbating the risks posed by excessive heat. As the climate continues to warm, extreme heat events in New York are becoming more intense, frequent, and severe.²⁶ Indeed, 2024 was the hottest year on record²⁷ and heat extremes are projected to increase so frequently and universally that they are likely to impact Americans' daily lives more than any other aspect of climate change.²⁸ The annual number of days in New York City with temperatures of 90°F and above has noticeably increased since the late 19th century.²⁹

Suspending evictions during extreme heat marks a crucial first step toward fostering a more compassionate and resilient society as we begin confronting the challenges of climate change.

EXTREME HEAT’S DISPROPORTIONATE IMPACT ON MARGINALIZED COMMUNITIES

The poorest neighborhoods in New York City are also the hottest due to systemic inequality and historic disinvestment. Deaths due to excessive heat have disproportionately occurred in low-income communities of color.

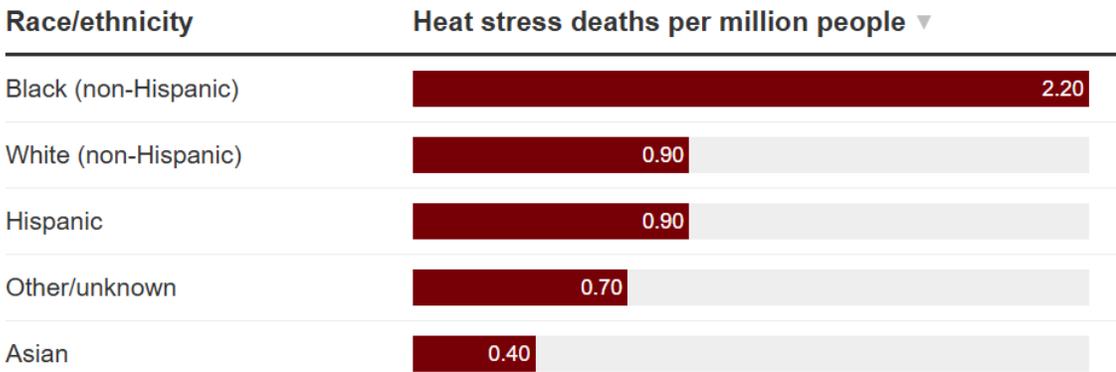
Black New Yorkers are nearly 2.5 times as likely to die from heat-stress than white New Yorkers and at younger ages due to social and economic disparities.³⁰ Structural racism has resulted in greater financial instability for Black New Yorkers due to higher unemployment rates, fewer job opportunities, and lower wages as well as neighborhood disinvestment, the legacy of racist housing policies, and less access to high-quality education and health care and affordable housing with air conditioning.³¹

These inequities have made Black New Yorkers much more likely to get sick and die due to extreme heat in part because they are more likely to develop multiple chronic medical conditions at younger ages.³²

New York City communities of color lack access to resources to combat the disproportionate heat in their neighborhoods as race and household income are strongly correlated with access to air conditioning.³³ Deaths from heat stress are higher in neighborhoods where more than 30% of residents have a household income below the federal poverty line.³⁴

Elderly New Yorkers are also at elevated risk to the dangerous effects of excessive heat.³⁵ The highest death rates due to heat stress in New York City and nationwide occur among people ages 60 and older.³⁶ They are more susceptible to heat-related health problems because they are more likely to have chronic health conditions and to take medications that contribute to heat intolerance.³⁷ People aged 60 years and older are also more likely than other groups to be socially isolated since they are less likely to be employed and may have fewer opportunities for other community

Black New Yorkers suffer greater health impacts from heat



Average annual age-adjusted death rate (2011-2020).
 Source: [NYC Heat-Related Mortality Report](#) • [Get the data](#) • Created with [Datawrapper](#)

Figure 2. Heat Stress Deaths by Race

involvement, making the dangers of extreme heat even greater.³⁸ It can be difficult for older adults to notice if they are dehydrated or overheating. Older bodies trap more heat than younger bodies, their glands release less sweat, and their hearts do not circulate blood as well resulting in less heat being released from the skin, which is an essential bodily function to combat heat.³⁹

Air conditioning can address some of these issues and there is pending legislation before the City Council that requires landlords to provide air conditioning, but preventing evictions during periods of extreme heat is a modest yet essential first step to ensuring that tenants at risk of homelessness are not facing serious injury or death during a heat wave.



EVICCTIONS HAVE VIOLENT AND LIFE-THREATENING IMPACTS GENERALLY

Eviction is a violent disruption that has long-term destabilizing impacts. Over 16,000 New York City tenants and their families were evicted in 2024.⁴⁰

Evicted tenants are often forced to relocate to poorer and higher-crime neighborhoods with lower performing schools and fewer job opportunities than those who move by choice.⁴¹

Mothers who are evicted are more likely to suffer from depression and experience elevated stress levels, and they and their children tend to have poorer health outcomes than those who were not evicted.⁴²

The day an individual or family loses their home can be one of the worst days of their lives and can be life threatening as losing one's home can significantly increase the risk of suicide.⁴³

Extreme heat amplifies the horrors associated with an eviction. Tenants facing eviction have a greater risk of heat-related health problems on the day of or immediately following an eviction.

Tenants may be packing up their belongings, and the physical intensity of packing up one's entire life during a heat wave poses major risks of heat exhaustion, dehydration, and other heat-related illnesses particularly for low-income tenants who are less likely to have access to air conditioning. A tenant attempting to stop an eviction must travel to court to file an emergency motion or have to travel to a shelter intake center in another borough. Subway platforms can be dangerously hot during a heat wave.⁴⁴ The platforms are often hotter than the outside temperature because of

Tenants facing eviction have a greater risk of heat-related health problems on the day of or immediately following an eviction.

limited air flow, a lack of air conditioning, and heat generated by the trains braking and accelerating.⁴⁵

On June 24th, when the temperature in New York City hit 100°F, an elderly Queens tenant travelling to Housing Court fell and injured herself, resulting in a hairline fracture. This same tenant had to leave court early due to heat-related illness.

Another Legal Services NYC client was evicted from her Bronx home on July 8th when temperatures in the Bronx reached 99°F.⁴⁶

Becoming unhoused on a brutally hot day was particularly dangerous for this tenant as she is pregnant and therefore at higher risk of dehydration, heat exhaustion, and heat stroke.⁴⁷



EVICTIONS DURING EXTREME HEAT HAVE DEADLY IMPACTS ON NEW YORK'S POOREST COMMUNITIES

When New Yorkers are evicted, they often rely on the shelter system. In New York, four in ten shelters do not have air conditioning, and only those shelter residents with documentation from a health care provider are entitled to an air-conditioned room and even then, relief is not guaranteed.⁴⁸

Being unhoused dramatically increases the risk of heat-related medical issues. It exposes people to both the heat and direct sunlight for continuous and prolonged periods, and it limits people's access to air-conditioned spaces.⁴⁹ People experiencing homelessness are considered one of the most vulnerable populations to the health impacts of extreme weather.⁵⁰ People who are unhoused often have chronic health conditions that make them more vulnerable to extreme heat, and medications used to treat conditions that are prevalent among unhoused people, such as

diuretics and anticholinergics, can interfere with proper body temperature regulation.⁵¹

Phoenix's [Office of Heat Response and Mitigation](#) estimates that unhoused and unsheltered people are at 200 to 300 times higher risk of heat-related death.⁵² Unhoused New Yorkers face particular dangers during extreme heat events as they have heightened exposure to increased air pollutants during heat waves.⁵³ And, asthma is much more prevalent among low-income communities of color in New York due to much greater exposure to pollution. The Bronx, which had the most evictions in 2024,⁵⁴ has the highest rate of asthma in the country.⁵⁵

Those who are at the highest risk of death and serious illness from extreme heat are also those who are most likely to be evicted. Communities of color, specifically Black and Latinx



communities, experience far more evictions than white communities. Areas of New York City with the highest rate of executed evictions are areas with a population of majority Black or Latinx residents.⁵⁶ Less than one in every five renters is Black, but over half of all eviction filings are against Black renters.⁵⁷

New York City uses a Heat Vulnerability Index to rank neighborhoods from one to five, with five being the most heat-vulnerable. Factors that affect heat vulnerability include daily summer surface temperature, percentage of households with air conditioners, the amount of green space (trees, grass, or shrub cover), and median income.⁵⁸

Legal Services NYC analyzed, using publicly available data from NYC Open Data, the locations of eviction proceedings across the City and determined that approximately 64% of

Approximately 64% of evictions citywide from 2017 to 2025 occurred in areas where the Heat Vulnerability Index is four or five.

evictions citywide from 2017 to 2025 occurred in areas where the Heat Vulnerability Index is four or five. The maps below demonstrate the heightened risks that low-income tenants at risk of eviction face as a result of the interconnectedness of heat vulnerability and poverty.

The maps below include a Heat Vulnerability Index Map of NYC and an overlay map of eviction cases citywide on top of the City's heat vulnerability data.

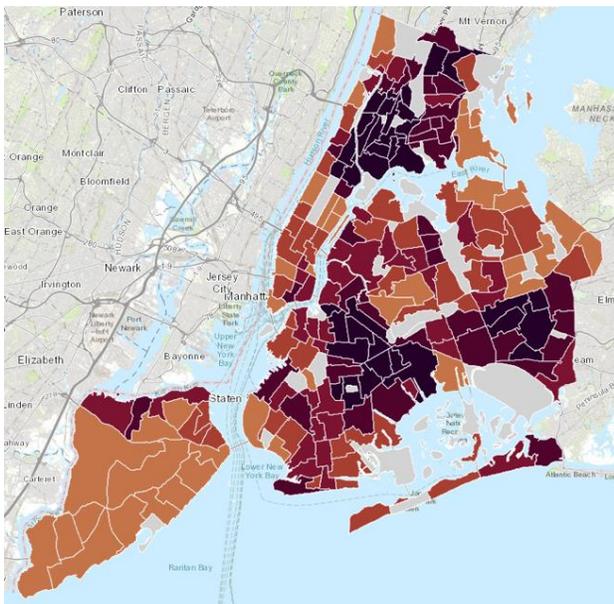


Figure 3. Heat Vulnerability Index Map of NYC with dark red indicating higher heat vulnerability index scores.

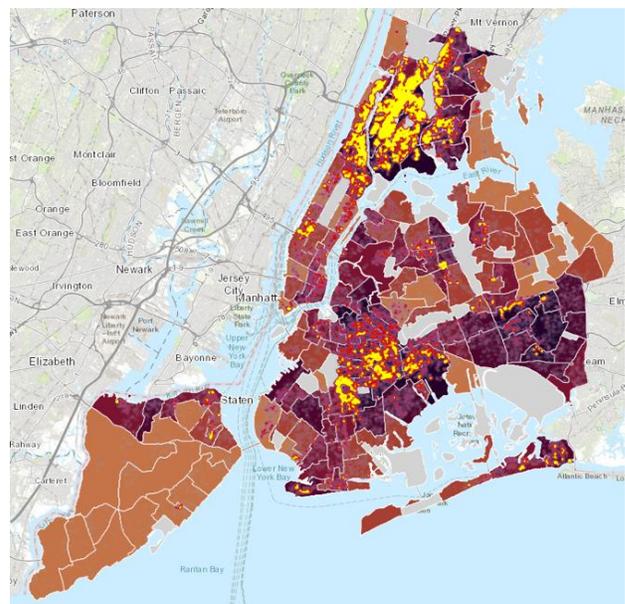


Figure 4. An overlay of NYC eviction cases citywide from 2017 to 2025 (in yellow) over the City's heat vulnerability data

THE CITY RECOGNIZES THE PROBLEM BUT HAS FAILED TO RESPOND TO THE CRISIS

The City recognizes that for the unhoused, extreme heat is a real threat as it has created policies to reduce barriers to shelter during periods of extreme heat, yet the City allows the marshals it oversees to render a new class of New Yorkers unhoused during periods of significant heat. The City’s current policies protecting residents from extreme heat do not go far enough.⁵⁹ The Department of Homeless Services has a “Code Red” protocol designating different levels of emergency response based on the temperature.⁶⁰ During a “Heat Emergency,” more cooling centers are open, there is more outreach to unhoused New Yorkers, anyone who needs shelter can access it without undergoing the typical intake and screening requirements, shelter residents cannot be suspended from shelter, and those who have been sanctioned are allowed to return to shelter during the emergency period.⁶¹

On June 20, 2025, Mayor Adams warned New Yorkers “Summer in the city is here—and so is our first heat wave of the year. This extreme heat will not just be uncomfortable and oppressive, it will be brutal, and it will be dangerous to those who spend extended periods outside. This week’s heat wave could be deadly and life threatening if you are not prepared.”⁶² Yet on June 23rd, the first day of the heat wave when temperatures soared to 94°F with a heat index that made it feel like 104°F,⁶³ 60 New Yorkers and their families were evicted.⁶⁴

Similarly, during other periods of extreme heat, the City failed to act as in the case of the Legal Services NYC pregnant client who was evicted from her Bronx home on July 8th when the temperature in the south Bronx reached a

“feels-like” temperature of 99.9°F.⁶⁵ Legal Services NYC attempted to prevent this eviction and was informed by the assigned marshal that they would not hold off on executing the eviction despite the heat and risk to the tenant. 68 households were evicted that same day across the City.⁶⁶

From January 1, 2017 to June 30, 2025, a whopping total of 7,554 evictions occurred on days when the temperature exceeded 90°F

On July 22, 2024, the hottest day of 2024, 59 New Yorkers and their families were evicted.⁶⁷ During a heat wave that swept the nation in 2019, 166 New Yorkers were evicted on July 19 and July 22.⁶⁸ Legal Services NYC analyzed publicly available data on evictions and maximum temperatures around the City and determined that from January 1, 2017 to June 30, 2025, a whopping total of 7,554 evictions occurred on days when the temperature exceeded 90°F. That’s an average of 58 households evicted per day across the city on these days.

There is precedent for the City and State taking action to stop eviction in cases of extreme weather and public health emergencies. For example, the State enacted an eviction moratorium during the COVID-19 pandemic.⁶⁹

The City also suspended evictions in November 2012 following Hurricane Sandy, and the New York City Housing Authority extended the

suspension through February 2013 for its public housing units affected by the storm.⁷⁰

And, during the extreme heat in late June and on several brutally hot days in late July this summer, the Department of Investigation (DOI), which oversees city marshals, instructed the marshals to suspend all evictions.⁷¹

Unfortunately, those notices were not issued until the day prior, so tenants did not have time to plan and could have been taking steps to plan for eviction that would put them at risk such as packing up their home or travelling to court during dangerously hot weather. The Department of Investigation needs to implement a policy, rather than an ad hoc day by day response, that makes it clear when it is too dangerous to evict.

The City defines extreme heat as a period where two or more days with a heat index reaching 95°F, or one or more days reaching 100°F.⁷² This definition is not suitable when developing a policy to determine when it is too dangerous to render people homeless. Any day where the heat index reaches above 90°F is dangerous to become unhoused as the body's ability to offset heat dissipates.⁷³ The DOI needs to enact a clear and consistent policy that pauses all evictions on days that cross this threshold to address this public health concern.

Several localities have recognized the acute dangers of evictions during extreme weather events and have taken action. The Sonoma County Board of Supervisors in northern California adopted an ordinance in September 2024 that prohibits evictions during a state of emergency.⁷⁴ Maryland also recently passed a law that pauses evictions in the event of extreme weather conditions, which includes an excessive heat warning issued by the National Weather Service.⁷⁵ During the June heat wave that plagued the East Coast, Baltimore City

Sheriff's Office announced a suspension of evictions from June 22–June 26, 2025.⁷⁶

Meanwhile, 60 households were evicted in New York City on June 23, 2025, when the actual temperature was 94°F and with the heat index it felt like 104°F.

The City's current policies protecting residents from extreme heat do not go far enough.

Other jurisdictions, such as Washington, DC⁷⁷, Cook and County, Illinois⁷⁸, have recognized that evictions during extreme cold are dangerous and have policies in place to protect tenants. While the dangers of the cold have been known for many years, the dangers of extreme heat are one of the new climate-related realities cities must now confront. As climate change intensifies extreme weather events across all seasons, New York City has an opportunity to be a national leader by implementing a policy that suspends evictions during heat emergencies thereby protecting its most vulnerable residents when they need shelter most.



CONCLUSION AND RECOMMENDATION

The City can and must act to protect its most vulnerable residents during extreme heat.

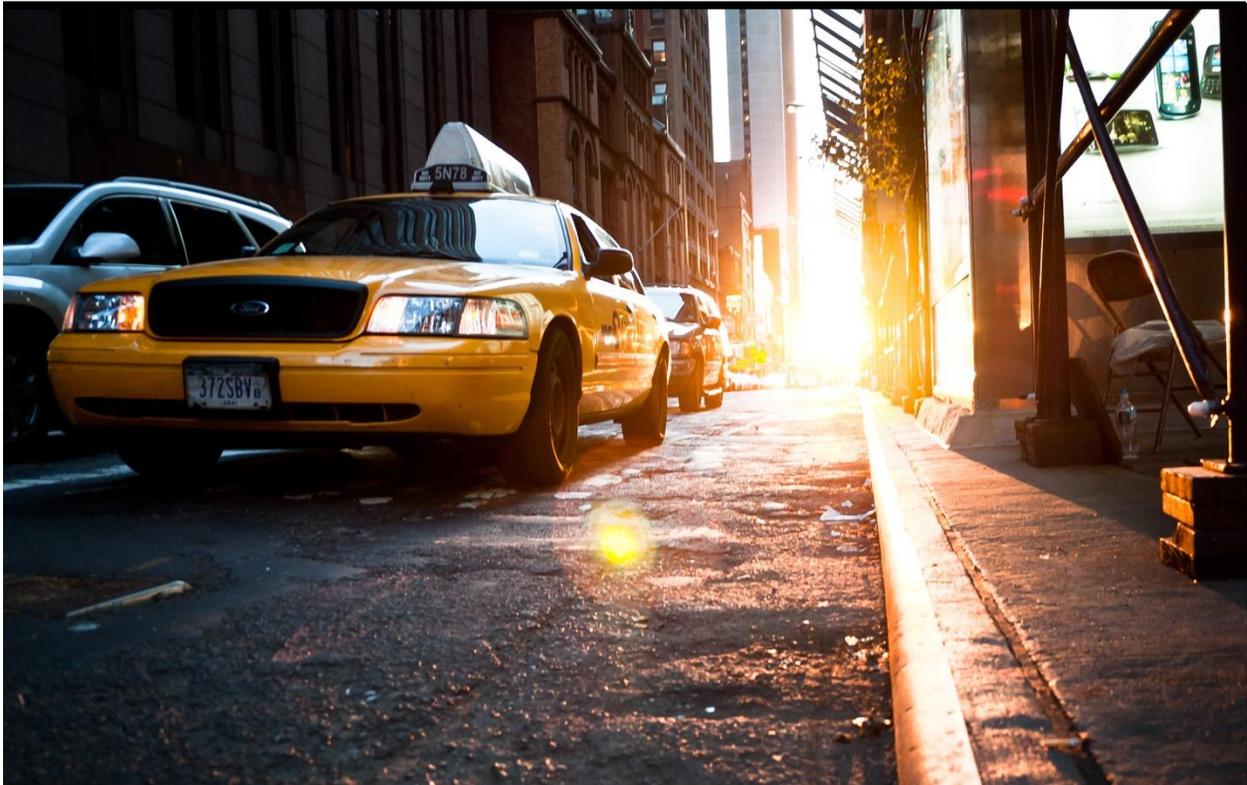
Allowing evictions to occur when it puts New Yorkers at risk of serious harm or even death is inhumane. A very modest first step is for the Department of Investigation to adopt a policy that universally suspends evictions during heat events as defined by any day that the temperature, including the heat index, is projected to be above 90°F. Such a policy is essential to protect the most vulnerable New Yorkers from heat-related illness or even death.

The City has already demonstrated that suspending evictions during extreme heat is feasible as it suspended evictions several times this summer during excessive heat. By establishing a uniform standard that suspends evictions when the heat index exceeds 90°F,

The City can and must act to protect its most vulnerable residents during extreme heat.

New York City can prevent unnecessary illness and death, reduce strain on emergency services and the shelter system, and demonstrate that basic human dignity and public health are paramount.

This policy recognizes that no New Yorker should be forced onto dangerous streets when extreme heat turns housing displacement into a potential death sentence.



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⁶¹ Coalition for the Homeless, “Extreme Heat: Code Red,” accessed June 25, 2025, <https://www.coalitionforthehomeless.org/get-help/know-your-rights/extreme-heat-weather-code-red/>.

⁶² Eric Adams, “Mayor Adams Urges New Yorkers to Prepare for Summer’s First Heat Wave,” *Office of the Mayor of New York City*, June 21, 2025, <https://www.nyc.gov/office-of-the-mayor/news/441-25/mayor-adams-urges-new-yorkers-prepare-summer-s-first-heat-wave>.

⁶³ Visual Crossing, “Historic Weather in 10456 on June 23, 2025,” accessed July 16, 2025, <https://www.visualcrossing.com/weather-history/10456,%20Bronx,%20NY,%20United%20States/us/2025-06-23/>.

⁶⁴ Department of Investigation, “Evictions: NYC Open Data” filtered for Residential Evictions Executed June 23, 2024 from 12:00 a.m. to 11:45 p.m., NYC Open Data, accessed July 14, 2025, https://data.cityofnewyork.us/City-Government/Evictions/6z8x-wfk4/data_preview.

- ⁶⁵ Visual Crossing, Weather Query Builder, feels like max on July 8, 2025 at 1118 Grand Concourse, Bronx, NY 10456, available at <https://www.visualcrossing.com/weather-query-builder/1118%20Grand%20Concourse,%20Bronx,%20NY%2010456/?v=wizard#> (last visited July 16, 2025).
- ⁶⁶ Department of Investigation, “Evictions: NYC Open Data” filtered for Residential Evictions Executed July 8, 2024 from 12:00 a.m. to 11:45 p.m., NYC Open Data, accessed July 14, 2025, https://data.cityofnewyork.us/City-Government/Evictions/6z8x-wfk4/data_preview.
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- ⁶⁸ Department of Investigation, “Evictions: NYC Open Data” filtered for Residential Evictions Executed July 19–22, 2024 from 12:00 a.m. to 11:45 p.m., NYC Open Data, accessed July 14, 2025, https://data.cityofnewyork.us/City-Government/Evictions/6z8x-wfk4/data_preview.
- ⁶⁹ New York City Department of Finance, “Evictions,” accessed July 14, 2025, <https://www.nyc.gov/site/finance/sheriff-courts/sheriff-evictions.page>.
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- ⁷² New York City Emergency Management, “Extreme Heat,” NYC Hazard Mitigation Plan, accessed June 24, 2025, <https://www.nychazardmitigation.com/documentation/hazard-profiles/extreme-heat/> (citing Kristina B. Metzger, Kazuhiko Ito, and Thomas D. Matte, “Summer Heat and Mortality in New York City: How Hot Is Too Hot?” *Environmental Health Perspectives* 118, no. 1 (September 2009): 80–86).
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- ⁷⁷ D.C. Code sec 42-3505.01(k).
- ⁷⁸ See, e.g., Circuit Court of Cook County, *General Order 2024-02: Eviction Moratorium, Office of the Chief Judge*, February 1, 2024, <https://ocj-web-files.s3.us-east-2.amazonaws.com/orders/General%20Order%202024-02%20Eviction%20Moratorium.pdf?VersionId=SrsDGV0qp9fkLyB7YQ0ywUFJ94eX4Oif>.



Testimony by the New York Legal Assistance Group,

Oversight - Protecting Lives in the Cold: Oversight of NYC's Code Blue Operations

Before the New York City Council Committees on General Welfare and Public Safety

February 10, 2026

Speaker Menin, Chair Hudson, Chair Feliz, Council Members, and staff, good morning and thank you for the opportunity to speak to the New York City Council on the oversight of NYC's Code Blue operations. My name is Graham Horn, and I am a Coordinating Attorney with the Shelter and Economic Stability Project in the Public Benefits Unit at the New York Legal Assistance Group (“NYLAG”).

NYLAG uses the power of the law to help New Yorkers experiencing poverty or in crisis combat economic, racial, and social injustices. We address emerging and urgent needs with comprehensive, free civil legal services, financial empowerment, impact litigation, policy advocacy, and community partnerships. We aim to disrupt systemic racism by serving clients, whose legal and financial crises are often rooted in racial inequality.

The Shelter and Economic Stability Project at NYLAG provides free legal services and advocacy to low-income people in and trying to access public shelter in New York City, and those having trouble accessing or maintaining Public Assistance and SNAP (food stamp) benefits. We work to ensure that every New Yorker has a safe place to sleep by

offering legal advice and representation throughout each step of the shelter application process, assist and advocate for clients who are already in shelter as they navigate the transfer process, and seek adequate facility conditions and resources for their needs. We also represent clients at Administrative Fair Hearings, conduct advocacy with the Department of Social Services (“DSS”), Benefits Access Centers and SNAP centers, and bring impact litigation to ensure that our clients are obtaining and maintaining an adequate level of shelter and benefits.

Many of our clients are experiencing unsheltered homelessness. Based on our experiences working with them, we appreciate the opportunity to offer the following comments.

I. Most People Sleeping Outside Want to Come Inside, But Cannot Live in a Congregate Setting

In any discussion about unsheltered homelessness and the adequacy of outreach efforts, the most critical point to emphasize is that people do not choose to sleep outside, rather they are forced to because available shelter cannot accommodate their needs. While sleeping outside, NYLAG’s clients are subject to dangers too numerous to recount in full. Besides the cold they are facing these past few weeks, they are regularly robbed, assaulted, and raped while sleeping. One of NYLAG’s clients witnessed another man he slept outside with have lighter fluid poured on his foot and set on fire. Our clients are woken and harassed by police officers and are often arrested for trespass or other trivial offenses that essentially criminalize homelessness. They are food insecure and

malnourished. Most are in chronic pain from sleeping on the ground. Our clients suffer from skin conditions due to exposure to the elements. Many of our clients have severe dental deficiencies. Almost all of them have other chronic underlying illnesses. Moreover, if they did not suffer from mental illness prior to becoming street homeless, the trauma of sleeping outside and being constantly on alert has caused many of our clients severe anxiety.

The vast majority of the Department of Homeless Services' (DHS') single adult shelter placements are in congregate settings, which can have as many as 100 men sharing a room (or dorm). Almost all of our clients experiencing street homelessness stay outside because they cannot live in congregate shelter due to past trauma or mental illness (or both). These individuals would, and do, come inside when offered a safe-haven or stabilization bed. Safe-haven and stabilization beds make up DHS' low-barrier shelter system. This is a system with private and semi-private rooms that has fewer rules and regulations than DHS' single-adult shelter system. There are far too few single and double room safe-haven or stabilization placements, leaving thousands of people who are willing to come inside without a viable option other than sleeping outside.

Presumably because of this lack of capacity, DHS has created a complicated eligibility structure for safe-haven or stabilization placements. Obtaining a placement in this system can take months or years (if ever obtained), during which time the person experiencing street-homelessness sleeps on the street. During this process, our clients lose hope that they will ever obtain a placement and lose the will to interact with outreach workers.

The clear solution is for the City to significantly increase low-barrier safe-haven and stabilization bed capacity. Although these assignments are more costly, once clients are inside and stabilized, DHS will likely have much greater success helping them transition to permanent housing. Expenditures that assist clients to transition to permanent housing have net long-term savings (especially if the costs of street sweeps and outreach services are considered).

II. People Experience Street Homelessness Are Mistrustful of NYC's Code Blue Outreach

NYC's Code Blue Operations are a part of the efforts that DHS makes to incentivize people experiencing street homelessness to come inside. However, the street outreach efforts DHS makes (through its own outreach workers and contracted non-profit agencies) face challenges in successfully addressing the needs of New Yorkers experiencing street homelessness. This is because the street outreach teams are equipped with very little to offer the people experiencing street-homelessness. Clients often report that DHS and contracted street outreach teams do not hand out winter items, food, coffee or otherwise provide any incentive to speak with them. Unfortunately, many of NYLAG's clients experiencing street homelessness report that they are hesitant to interact with street outreach teams because of past negative experiences that create anxiety and distrust, which can be intensified when outreach workers are paired with police officers. Our clients are typically aware of the location of the single adult intake centers for congregate shelters and choose not to go to congregate shelters.

The additional resources that are available during Code Blue Operations do not adequately address the needs of people living outside. For instance, there is an increase of street outreach workers, but as stated above, most NYLAG clients living outside are very hesitant to interact with street outreach workers. There are additional warming centers, which are much appreciated, but there is much confusion about where the warming centers are and/or how to access them.¹ For instance, on a recent frigid night at the Staten Island Ferry terminal, there were two warming busses parked outside,² yet homeless people, an NYPD officer and terminal employees did not know they were outside. Code Blue Operations must start with a change in the outreach model and a commitment to vastly increase the number of Safe-Haven and Stabilization placements.

III. Code Blue Operations Should Not Include Involuntary Removal

It appears that part of the City's Code Blue Operations includes involuntary removals if person will not agree to come inside on their own.⁴ This weekend a fellow advocate reported to NYLAG that once outreach is connected with a person experiencing street homelessness, if the person does not come inside after multiple engagements, the police will be called, even if the outreach worker does not believe the person meets the standard for involuntary removal, and even if the person has items and a plan to keep themselves warm.

This policy will have a negative effect on the ability of outreach workers to engage with people sleeping outside. If engagement with outreach can be misconstrued as the

threat of involuntary commitment, people will go to even further lengths to avoid interacting with outreach.

Additionally, sleeping outside does not meet the standard for involuntary removal under Mental Hygiene Law Sections 9.41 and 9.39. Mental Hygiene Law Section 9.41 authorizes an individual to be taken into custody, for the purpose of a psychiatric evaluation if that person “appears to be mentally ill and is conducting himself in a manner which is likely to result in serious harm to himself or others.”⁵ While Mental Hygiene Law Section 9.39 clarifies that “[l]ikelihood to result in serious harm” shall mean, in part, “a substantial risk of physical harm to the person due to an inability or refusal, as a result of their mental illness, to provide for their own essential needs such as food, clothing, necessary medical care, personal safety, or shelter”, the presence of mental illness is a prerequisite. Having outreach workers call 911 when a client will not enter shelter mandates the NYPD officers to determine the presence mental illness, which can span a range of conditions and is not, by itself, considered a factor to consider under the Mental Hygiene Law. It is unclear how the NYPD is to determine whether a person has a mental illness.

Living outside is an expression of deep poverty not of mental illness, and the Mental Hygiene Law makes no mention of poverty being a factor to consider when determining whether involuntary removal is appropriate. Often sleeping outside is not evidence of mental illness, but lack of resources and fear of congregate shelter.

IV. Homeless Sweeps Do Not Help People Come Inside and are Considered Inhumane

Mayor Adams' homeless encampment sweeps policies prioritized removing the visibility of people experiencing street homelessness over actually helping people transition inside. Sweeping encampments simply does not encourage entrance into shelter. For example, in the first three quarters of 2024, the City engaged in roughly 2,300 encampment sweeps.⁵ However, data shows only 3% of people whose belongings were disposed of went into shelter.⁶ And not one of those swept was placed in permanent housing.⁷ These sweeps cost the city \$3.5 million⁸ and demonstrated almost no measurable success in bringing people experiencing street homelessness inside.

Moreover, the sweeps are exceptionally cruel and inhumane. NYLAG clients experiencing street homelessness who have been caught up in sweeps have had their belongings taken or destroyed by the police as part of “sweeps”. When an encampment is scheduled to be “cleaned up”, clients have no choice but to carry away what possessions they can hold in their arms. This has led to my clients losing life-saving medications, treasured family mementos, and other precious personal property. Some clients become so distraught during the disposal of their possessions that ambulances need to be called. Given the limited success of the sweeps, the damage they cause to our clients is especially inhumane.

Finally, sweeps operate to sow distrust in outreach by people experiencing street homelessness. Because outreach is most often present during the sweeps, some NYLAG

clients associate interacting with outreach with having their belongings taken. Naturally, they are hesitant to interact with outreach again.

V. The Recent Reversal of Title 31, Chapter 6 of the Rules of the City of New York

The City nearly formalized Title 31, Chapter 6 of the Rules of the City of New York (“the rule”), which limited eligibility for safe haven and stabilization placements to people experiencing street homelessness who have official DHS documentation of at least six months of street homelessness (as measured through engagement with outreach) or six months of intermittent shelter use of DHS shelters. This misguided rule would have prevented people experiencing street homelessness from accessing the low-barrier placements that they so desperately need. We want to applaud the Administration for swiftly scrapping this rule that threw up yet another barrier for people experiencing street homelessness access to low-barrier shelter beds. In the face of limited low-barrier shelter capacity, we urge the Mamdani administration to continue to focus on adding more low-barrier shelter beds that allow people experiencing street homelessness to come inside, as well as helping people currently in these placements to transition to permanent shelter. We urge the Mayor and Council to create legislation to mandate more low-barrier beds and place a limit on arbitrary policies that prevent people sleeping outside from accessing help.

VI. Other Barriers To Accessing DHS Shelter

There are so many other barriers that our clients experiencing street homelessness cite as obstacles to entering and remaining in single adult shelter. The intake procedure to enter DHS shelter can be particularly onerous, taking up to two days, with most of that time

spent waiting in place in crowded waiting rooms. Clients are told if they leave, they will need to start the process over again. Often, clients report inadequate food and an inability to take essential medications, which makes them less likely to enter and remain in shelter. Additionally, clients report negative experiences with staff at intake centers . Some clients experiencing street homelessness are willing to enter congregate shelter if they could participate in the intake process over the telephone, but DHS will not allow this.

Curfew policies and other strict shelter timelines are also prohibitive. Numerous NYLAG clients lose their beds due to missing curfew and having no choice other than to sleep outside or to be bussed to an unknown location. Food policies prevent people from being able to stay inside; many of our clients report that residents are prohibited from bringing outside food into the shelter. As a result, almost all single adult shelter residents report being perpetually hungry because meals in shelter are served during a narrow timeframe, in limited supply, and the portions and quality of the food are inadequate. Additionally, many residents with health issues and disabilities need to eat between meals or when taking medications.

Clients are also prevented from staying in single adult shelter because of the intense policing of shelters and the aggression of shelter staff and security towards residents. We have many clients who are forced into street homelessness because of negative interactions with shelter staff, including clients who have experienced verbal and physical abuse.

Even purportedly “accessible” shelters are in fact inaccessible for clients with disabilities. Clients who use wheelchairs or other assistive devices often report broken elevators and facilities that are impossible to navigate in a wheelchair, even when the shelters are labeled “accessible.” Clients with mental health disabilities report that they are rarely, if ever, accommodated. And congregate single adult shelter is often impossible for homeless transgender or gender non-binary clients who experience extreme harassment from staff and other residents.

Clients experience not being able to obtain shelter transfers by DHS if they are unable to stay in their assigned shelter, although exceptions are made for “safety transfers”, but are hard to obtain without a lawyer’s intervention. We had many clients who experience street homelessness, even though they were willing to stay in DHS congregate shelter, because DHS would not transfer them from their assigned shelter where they had had a traumatic experience.

Finally, clients experiencing street homelessness often have animal companions that are not permitted in shelter. Although emotional support animals are sometimes permitted in shelter, clients must apply through the Reasonable Accommodation process for clients with disabilities, a process that most clients are unaware of and must have medical providers to utilize. Many people experiencing street homelessness will not go into shelter because they will not leave their companion behind.

All of these factors contribute to street homelessness, and must be addressed if this City truly wants to alleviate street homelessness.

We thank the Committees on General Welfare and Public Safety for the work you have done to facilitate services for vulnerable New Yorkers, and for taking this opportunity to continue to improve the conditions for our clients. We hope we can continue to be a resource for you going forward.

Respectfully submitted,

New York Legal Assistance Group

To the Committee on General Welfare,

My name is Ann Marie Foster, President & CEO of Phoenix House New York and Long Island, and I am submitting the following testimony for the Council's code blue oversight hearing: Protecting Lives in the Cold.

Since 1967, Phoenix House New York has helped thousands of people overcome substance and alcohol abuse in order to lead healthy, productive, and rewarding lives. Phoenix House offers a variety of behavioral health services for those with co-occurring mental health and substance use disorders, including residential and outpatient treatment, medical, psychiatric, and dental services, as well as impaired driver programs. Our services are designed to meet the individual needs of adults at various stages of recovery, including military personnel, and veterans. Phoenix House additionally provides educational and supportive services to family members, friends, significant others, and the community.

With Phoenix House on the frontlines of the substance use and mental health crisis, I am urging Mayor Mamdani to accelerate citywide investment in new supportive crisis stabilization centers, which can help save the lives of thousands of unhoused New Yorkers this winter and in the coming months. Nearly three weeks into the historic cold front sweeping our city, [at least 18 New Yorkers have already lost their lives](#), with [3 people dying of overdoses](#) and most showing signs of hypothermia. There are already [nearly 160,000](#) unhoused New Yorkers living on our streets — [10% of whom](#) are additionally suffering from severe mental illness or drug addiction. Warming facilities and shelter beds can only reach but so many residents during this weather emergency, and unlike supportive crisis stabilization centers, these spaces are not equipped to meet the needs of individuals presenting addiction and mental health crisis symptoms. Without additional crisis intervention, the cold snap poses serious immediate risks to their health and safety.

For New Yorkers experiencing acute symptoms, supportive crisis stabilization centers (SCSC) can help save lives by providing 24/7 voluntary, non-clinical assistance to stabilize individuals in the short-term, and connecting them to long-term recovery services. Particularly for community members who have been left out of traditional systems and lack access to care, these centers essentially act as a low-barrier one-stop shop for those in immediate danger of harming themselves or others. Nonetheless, today there is only *one* SCSC within the five boroughs. A single center simply will not suffice for the tens-of-thousands of community members [already forgoing behavioral health treatment](#), for one reason or another.

Perhaps most importantly, supportive crisis stabilization centers can also help halt the trend of assigning law enforcement to crisis cases that specifically call for behavioral health intervention. At this very moment, community members are still reeling from the news of 22-year old [Jabez](#)

[Chakraborty's fatal encounter with police officers](#) in Briarwood, Queens, after his family's attempt to reach mental health workers during a crisis episode. Tragically, his experience — and the mismatch between the care he needed versus what he received — is *not* an isolated incident. New data from precincts participating in the Behavioral Health Emergency Assistance Response Division (B-HEARD) program reveals that police officers still respond to **[86% of dispatch calls for mental health crises](#)**, rather than trained mental health professionals. We also know that **[nearly a third of eligible mental health calls fail to get assigned](#)** to B-HEARD specialists. In the case of Jabez and so many more New Yorkers, building new supportive crisis stabilization centers would help reduce violent interventions and fill in the existing gaps where crises go unaddressed.

Now more than ever, New York City needs to deploy all available tools in our arsenal. The health and future of our community depends on what we do now to make our crisis response system more efficient, and reduce the strain on existing facilities/responders. With the proper investments, supportive crisis stabilization centers can help accomplish this goal and allow providers to save more lives. We must act accordingly to protect New Yorkers through this cold snap and beyond. Thank you for considering my testimony.



**Testimony to NYC Council
Committee on General Welfare
Submitted on Behalf of the Supportive Housing Network of NY
Wednesday, February 11, 2026**

Thank you to NYC Council committees on General Welfare and Committee on Public Safety for scheduling this oversight hearing on NYC's Code Blue Operation. My name is Tierra Labrada, and I am the Director of Policy and Advocacy at the Supportive Housing Network of NY, a membership organization representing nonprofit developers, owners, and operators of supportive housing. Collectively, our members operate more than 40,000 units of supportive housing in NYC.

We want to acknowledge the lives that have been lost this winter. No one should die because they lack appropriate heat or safe shelter from the elements. These tragedies are devastating and unacceptable. The Network, our members, and the supportive housing community share the sentiment of the council that these deaths could be avoided in the future, especially for those whose loss of life was a result of homelessness.

Supportive housing exists to stabilize people who have experienced homelessness and live with a diagnosed behavioral or medical health condition. Supportive housing is a model that works best when programs are fully funded, operating efficiently, and easy to access.

Recent data released pursuant to Local Law 135 has focused attention on vacancies in supportive housing and OMH-licensed housing. We welcome that transparency and worked collaboratively with the bill sponsor and the administration to make this data usable. And, we believe it is important that the Council understand how these units are functioning.

The report shows 2312 units listed as vacant and "online" meaning ready for occupancy, translating to a 94% occupancy rate. Of the 2312 vacant and online units, 65% have a referral in progress, which reduces the actual vacancy rate to just about 2%.

It is also important to understand what types of units are reflected in the data. The report includes units that are licensed by NYS Office of Mental Health (OMH), which operate under a different program model than permanent supportive housing. Licensed OMH housing, which include the Apartment Treatment Program and Community Residence Single Room Occupancy (CR-SRO) program, are technically long-term transitional housing. Some of the challenges with this model include high program fees (up to 70% of a person's income) and a reliance on shared housing where unrelated adults are placed as roommates. We have received feedback from providers that vacancies in these programs can be harder to fill than supportive housing programs with more independent living arrangements and where tenants pay no more than 30% of their income toward rent. We encourage the City and State to work collaboratively, with input from prospective tenants, to adjust this model to be more desirable to the population it serves, reduce vacancies, and ensure people have access to those units.



Additionally, eligibility criteria across supportive housing programs remain complex. The system has evolved over decades with now nearly 50 distinct eligibility criteria. An individual may be approved for supportive housing, but only for a narrow subset of programs. If those programs have little turnover or are no longer being developed, that person may wait indefinitely without ever being referred to a unit. Conversely, there may be programs where many units are available but there are not as many eligible tenants to refer. The Network's inaugural [State of Supportive Housing](#) report highlights this issue.

Supportive housing works, but we have to invest in the system. This means developing more congregate housing for single adults to live independently, streamlining eligibility, and examining whether the licensed model actually meets the needs of the people experiencing homelessness today.

The Network and our members remain committed to collaborating with Council to remove barriers to access and invest in a system that works for everyone. We look forward to continuing this important work.

Please do not hesitate to reach out with any questions.

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Testimony of

Coalition for the Homeless

and

The Legal Aid Society

before the Committees on General Welfare and Public Safety

on

Oversight – Protecting Lives in the Cold: Oversight of NYC’s Code Blue Operations

submitted by

Alison Wilkey, Esq.

Director of Government Affairs and Strategic Campaigns

The Coalition for the Homeless

and

Joshua Goldfein

Staff Attorney

The Legal Aid Society

February 10, 2026

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The Legal Aid Society, 49 Thomas Street, New York NY 10013 www.legal-aid.org 212-577-3300

The Coalition for the Homeless (“Coalition”) and The Legal Aid Society (“Legal Aid”) welcome this opportunity to testify before the New York City Council’s Committees on General Welfare and Public Safety. We are the court- and City-appointed independent monitor of the DHS shelter system and counsel in the historic *Callahan*, *Eldredge*, and *Boston* cases that created the right to shelter in NYC. Accordingly, we are uniquely situated to provide insight about the City’s Code Blue policy.

Immediate Steps the City Must Take to Bolster NYC DHS’s Code Blue Operations

Eighteen New Yorkers lost their lives during the extreme cold of the past two weeks¹, and there is no sign of the cold weather abating – low temperatures may remain below or near freezing for at least another week. While the City’s efforts this past weekend were laudable, additional resources are necessary to prevent further loss of life. The City must immediately implement the following measures: flood the streets with additional outreach workers to offer New Yorkers a way inside from the cold; ensure enough capacity in warming centers, warming buses, and drop-in centers; further expand the availability of Safe Havens and single-room shelter beds; and issue Code Blue protocols for youth shelters.

Additionally, the City should strengthen coordination among outreach teams and emergency service providers so individuals are connected to warming centers and warming buses as they are deployed, and so workers have up-to-date information about the individuals they encounter to support ongoing engagement efforts.

Further, clear communication with all public and private hospitals is needed to ensure frontline and emergency department staff are fully aware of, and complying with, Code Blue policies. Hospitals also must coordinate with the New York City Department of Homeless Services (“NYC DHS”) to ensure that no one without a warm place to go is discharged or released to the streets, regardless of health status.

The Right to Shelter

The right to shelter guaranteed by the New York State Constitution is grounded in the risk of imminent harm, including death, to unsheltered individuals if exposed to the elements. These risks are not theoretical: record evidence in the *Callahan* litigation shows the effects of frostbite even at temperatures above freezing. As discussed above, in the past few weeks, at least 18 New Yorkers have died due to cold exposure this year, many of them unhoused.² We are in the middle of winter and, without additional resources from the City, we fear these numbers will increase. Currently, NYC DHS outreach workers, deployed in force during “Code Blue,” are unable to

¹ See “Cold Deaths in New York Climb to 18 as Frigid Winds Linger” available <https://www.nytimes.com/2026/02/08/nyregion/extreme-cold-weather-deaths-nyc.html>.

² *Id.*

offer clients what they need and want: permanent affordable housing or low barrier shelter placements.

Many New Yorkers do not access available shelter because they do not find it accessible to them or do not feel safe in the traditional NYC DHS shelter system. For single adults, NYC DHS shelters are traditionally congregate facilities where clients lack any form of privacy and, for many, security. Clients regularly report to our staff that safety issues and NYC DHS's failure to accommodate their disabilities are reasons why they do not feel safe entering NYC DHS shelter. For individuals living with mental illness, they often feel especially unsafe sleeping in large dormitories with people they do not know. Despite NYC DHS developing a process for clients to request reasonable accommodations,³ requests for single rooms are rarely approved. In the most recent data we received, only 20% of these requests were granted. Even when granted, it can take weeks or months for NYC DHS to identify a facility with a single room available.

Unlike single adults, adult families (families with no minor children) must undergo an eligibility screening before they can access shelter. In the past few months, Coalition staff has seen at least five adult families wrongfully turned away from the shelter intake process. At least one family spent multiple nights sleeping outdoors as a result of being wrongfully turned away.

Runaway and homeless youth have also been particularly vulnerable during this extreme weather event. There is no guaranteed access to youth shelters and drop-in centers during Code Blue events. As of February 9, 2026, the Department of Youth and Community Development had not issued any Code Blue guidance to runaway and homeless youth shelter providers.

Solutions to Improve Code Blue Outreach and Decrease Unsheltered Homelessness

After decades of mismanagement and prior mayoral administrations' aggressive use of "sweeps" and involuntary removals from public spaces, many unsheltered New Yorkers do not trust the City's outreach workers deployed during Code Blue. Too often, the City has used law enforcement to simply displace unsheltered New Yorkers, without offering them a safe or appropriate shelter placement or, ideally, connecting them with permanent housing.⁴ Unsheltered New Yorkers are often deeply distrustful of outreach workers, and it will take time to build back that trust. The first step to establishing such trust will be offering people what they need and want: low-barrier shelter options and permanent affordable housing.

Low Barrier Shelters

³ See <https://legalaidnyc.org/court-case/butler-v-city-of-new-york/>.

⁴ See <https://comptroller.nyc.gov/newsroom/comptroller-audit-found-that-only-3-people-secured-permanent-housing-out-of-2308-caught-in-mayor-adams-homeless-sweeps/>.

The best long-term solution to solve unsheltered homelessness remains the creation of more permanent affordable housing options, including supportive housing, for homeless and extremely low-income New Yorkers. However, increasing the housing stock takes time, time that unsheltered New Yorkers do not have as the weather remains deadly for people sleeping outside. In the short term, the City should immediately increase the supply of single unit low-barrier shelter beds, such as in many safe havens and stabilization beds. These shelter models are “reduced density” facilities and have fewer rules than the traditional NYC DHS shelter system for single adults. Clients who have had negative experiences in congregate NYC DHS shelters are more receptive to accepting placements in safe haven or stabilization beds, where they have more privacy, few, if any, roommates, more flexible rules, and access to more supportive resources.

Recently, Mayor Mamdani took several steps in the right direction. Last week, he announced the opening of a safe haven site in downtown Manhattan. He also announced the addition of 150 more street outreach workers, accelerated the opening of a second safe haven site in the Bronx, and opened two hotels for unsheltered New Yorkers identified by NYC DHS outreach workers. However, even more beds are needed to meet the demand as the vacancy rate for safe haven and stabilization beds remains persistently near zero. Recently, when advocating for a client sleeping in an abandoned building and living with serious mental illness, Coalition staff were told that no such beds were available.

Supportive Housing

Supportive housing remains one of the best tools available to meet the needs of unsheltered New Yorkers living with mental illness or other disabilities. Not only does supportive housing provide long-term stability for the individuals housed, but it also saves taxpayers approximately \$10,000 per year in averted costs for shelters, emergency rooms, justice involvement, and other government agencies and services. However, access to supportive housing typically requires people to enter shelter and make it through a long and complicated application process. In FY 2024, there were only 1,748 single adult exits from shelters to permanent supportive housing.⁵ Meanwhile, thousands of people continue to sleep unsheltered and remain vulnerable to extreme weather events.

Despite the scale of the need, thousands of supportive housing units are sitting vacant. In June 2025, there were 5,092 vacant supportive housing units.⁶ Of those units, 41% are units contracted by the City, with 56% contracted by the State, and 3% contracted by the federal government. The

⁵ Coalition For the Homeless, “State of the Homeless 2025” August 28, 2025, 22, <https://www.coalitionforthehomeless.org/state-of-the-homeless-2025/>;

⁶ Testimony of Administrator Scott French before the New York City Council, 6/18/2025, <https://legistar.council.nyc.gov/View.ashx?M=F&ID=14568976&GUID=713FC30B-E475-4BA6-95EE-DF82DD9CBAB6>

City should utilize these vacant units to quickly house unsheltered people using a “Housing First” approach. Housing First is a proven model that prioritizes getting people into housing first, without the preconditions and lengthy application process that pose significant barriers, and without requiring unhoused people to first enter shelter. Despite Housing First being invented in NYC and proven successful, the City has not renewed or expanded Housing First programs, apart from a recent small, but successful, pilot that utilized supportive housing units that were ^{7,8}

Expanding this pilot to other vacant and habitable units in the City would provide immediate housing for the most vulnerable New Yorkers.

There are other vacant units the City may be able to access to serve unsheltered New Yorkers. These units may need repairs or alternations, but the City should begin a review of these long-vacant units and address the issues delaying their occupancy. For example, some units are designed to be shared by two people, which are frequently neither appropriate nor desirable for people with psychiatric disabilities. Some units have been online for decades and need renovations. Addressing these needs requires fewer resources than bringing new units online, bringing to bear existing resources to house our unsheltered neighbors.

Coupled with housing placements is keeping at-risk individuals stably housed. Accordingly, the City should require supportive housing providers to assess the needs of tenants in their units before precipitously moving to evict them for non-payment of rent or other reasons that could be addressed through a reasonable accommodation process.

We look forward to working with the Council to address the need for more permanent affordable housing for our clients and to increase the supply of low-barrier shelter options for unsheltered New Yorkers.

About The Legal Aid Society and Coalition for the Homeless

The Legal Aid Society: Legal Aid, the nation’s oldest and largest not-for-profit legal services organization, is more than a law firm for clients who cannot afford to pay for counsel. It is an indispensable component of the legal, social, and economic fabric of New York City – passionately advocating for low-income individuals and families across a variety of civil, criminal, and juvenile rights matters, while also fighting for legal reform.

⁸ “Street to Home: A Housing First Approach to Ending Chronic Homelessness.” Volunteers of America -Greater New York, November 5, 2025. <https://www.voa-gny.org/services/street-to-home-pilot-program/>.

Legal Aid has performed this role in City, State, and federal courts since 1876. It does so by capitalizing on the diverse expertise, experience, and capabilities of more than 2,000 attorneys, social workers, paralegals, and support and administrative staff. Through a network of borough, neighborhood, and courthouse offices in 26 locations in New York City, Legal Aid provides comprehensive legal services in all five boroughs of New York City for clients who cannot afford to pay for private counsel.

Legal Aid's legal program operates three major practices — Civil, Criminal, and Juvenile Rights — and receives volunteer help from law firms, corporate law departments and expert consultants that is coordinated by Legal Aid's Pro Bono program. With its annual caseload of nearly 200,000 legal matters, Legal Aid takes on more cases for more clients than any other legal services organization in the United States. And it brings a depth and breadth of perspective that is unmatched in the legal profession.

Legal Aid's unique value is an ability to go beyond any one case to create more equitable outcomes for individuals and broader, more powerful systemic change for society as a whole. In addition to the annual caseload of nearly 200,000 individual cases and legal matters, Legal Aid's law reform representation for clients benefits more than 1.5 million low-income families and individuals in New York City and the landmark rulings in many of these cases have a State-wide and national impact.

Legal Aid is uniquely positioned to speak on issues of law and policy as they relate to homeless New Yorkers. Legal Aid is counsel to the Coalition and for homeless women and men in the *Callahan* and *Eldredge* cases. Legal Aid is also counsel in the *McCain/Boston* litigation in which a final judgment requires the provision of lawful shelter to homeless families. Legal Aid, in collaboration with Patterson Belknap Webb & Tyler, LLC, filed *C.W. v. City of New York*, a federal class action lawsuit on behalf of runaway and homeless youth in New York City. Legal Aid, along with institutional plaintiffs Coalition and Center for Independence of the Disabled-NY ("CIDNY"), settled *Butler v. City of New York* on behalf of all disabled New Yorkers experiencing homelessness. Also, during the pandemic, Legal Aid along with Coalition continued to support homeless New Yorkers through litigation, including *E.G. v. City of New York*, Federal class action litigation initiated to ensure Wi-Fi access for students in DHS and HRA shelters, as well as *Fisher v. City of New York*, a lawsuit filed in New York State Supreme Court to ensure homeless single adults gain access to private hotel rooms instead of congregate shelters during the pandemic.

Coalition for the Homeless: Coalition, founded in 1981, is a not-for-profit advocacy and direct services organization that assists more than 3,500 homeless and at-risk New Yorkers each day. The Coalition advocates for proven, cost-effective solutions to address the crisis of modern homelessness, which is now in its fifth decade. The Coalition also protects the rights of homeless

people through litigation involving the right to emergency shelter, the right to vote, the right to reasonable accommodations for those with disabilities, and life-saving housing and services for homeless people living with mental illnesses and HIV/AIDS.

The Coalition operates 11 direct-services programs that offer vital services to homeless, at-risk, and low-income New Yorkers. These programs also demonstrate effective, long-term, scalable solutions and include: permanent housing for formerly homeless families and individuals living with HIV/AIDS; job-training for homeless and low-income women; and permanent housing for formerly homeless families and individuals. Our summer sleep-away camp and after-school program help hundreds of homeless children each year. The Coalition's mobile soup kitchen distributed nearly 400,000 hot, nutritious meals to homeless and hungry people on the streets of the city this past year – up from our usual 320,000. Finally, our Crisis Services Department assists more than 1,000 homeless and at-risk households each month with eviction prevention, individual advocacy, referrals for shelter and emergency food programs, and assistance with public benefits as well as basic necessities such as diapers, formula, work uniforms, and money for medications and groceries. In response to the pandemic, we are operating a special Crisis Hotline (1-888-358-2384) for homeless individuals who need immediate help finding shelter or meeting other critical needs.

The Coalition was founded in concert with landmark right-to-shelter litigation filed on behalf of homeless men and women (*Callahan v. Carey* and *Eldredge v. Koch*) and remains a plaintiff in these now consolidated cases. In 1981, the City and State entered into a consent decree in *Callahan* through which they agreed: “The City defendants shall provide shelter and board to each homeless man who applies for it provided that (a) the man meets the need standard to qualify for the home relief program established in New York State; or (b) the man by reason of physical, mental or social dysfunction is in need of temporary shelter.” The *Eldredge* case extended this legal requirement to homeless single women. The *Callahan* consent decree and the *Eldredge* case also guarantee basic standards for shelters for homeless men and women. Pursuant to the decree, the Coalition serves as court-appointed independent monitor of municipal shelters for homeless single adults, and the City has also authorized the Coalition to monitor the municipal shelter system serving homeless families. In 2017, the Coalition, fellow institutional plaintiff Center for Independence of the Disabled – New York, and homeless New Yorkers with disabilities were represented by Legal Aid and pro-bono counsel White & Case in the settlement of *Butler v. City of New York*, which is designed to ensure that the right to shelter includes accessible accommodations for those with disabilities, consistent with Federal, State, and local laws. During the pandemic, the Coalition worked with Legal Aid to support homeless New Yorkers, including through the *E.G. v. City of New York* Federal class action litigation initiated to ensure Wi-Fi access for students in DHS and HRA shelters, as well as *Fisher v. City of New York*, a lawsuit filed in New York State Supreme Court to ensure homeless single adults gain access to private hotel rooms instead of congregate shelters during the pandemic.

**Testimony of Urban Resource Institute Before the New York City Council’s Joint
Committee on Public Safety and General Welfare**

February 11, 2025

Chair Hudson, Chair Feliz, and Members of the Committees on Public Safety and General Welfare, thank you for the opportunity to present testimony on New York City’s Code Blue response during the recent record-cold temperatures we have experienced over the past several weeks. The loss of even one life is unacceptable. Yet every year, dozens of unhoused New Yorkers succumb to the cold. Urban Resource Institute (URI) is the largest provider of shelter services for survivors of domestic violence and their families in the United States, and a leading provider of shelter for unhoused families in New York City. On any given night, URI has the capacity to provide temporary housing to approximately 4,000 people—60 percent of whom are children. The vast majority of our units are apartment-style, fully furnished, and staffed with professionals trained in trauma-informed care and supportive services. Every day, we welcome families who arrive with little more than the clothes they are wearing, their children, and their pets. They come to us scared because they do not know what to expect. When they arrive at a URI shelter, they discover a safe and stable temporary home where staff stand ready to support them as they begin their journey toward healing.

The time to prevent the death of unhoused individuals and families from hypothermia is not during a Code Blue emergency. While we appreciate the City’s deployment of mobile warming units and the expansion of drop-in centers and non-congregate, single-room units, emergency measures cannot be the foundation of our response. The City must invest capital dollars to upgrade or replace outdated and unsafe facilities with modern, dignified buildings. It must also invest operational dollars to ensure that shelter staff are paid a living wage. Far too many frontline human services workers are themselves forced to rely on SNAP and other public benefits, or even live in shelter, because they cannot afford basic necessities. That is neither sustainable nor just. New York City must also invest in expanded public awareness and outreach campaigns that reassure unhoused individuals and families that shelters are safe, supportive, and available to them. Effective outreach builds trust—and trust encourages people to come inside.

Domestic violence remains the primary driver of family homelessness in New York City. More than 40 percent of families in the DHS system have experienced domestic violence. During periods of crisis, including prolonged cold snaps, we often see increases

in domestic violence—patterns similar to what we witnessed during the COVID-19 pandemic. Lowering barriers to shelter entry during Code Blue emergencies through programs such as Safe Haven is essential to reducing fatalities.

Studies have shown that 50 percent of survivors would not leave an abusive situation if they could not bring their pet with them. To reduce barriers to safety, more shelters must be pet-inclusive, like URI's People and Animals Loving Safely (PALS) Program. URI, in partnership with the NYC Department of Homeless Services, piloted the City's first pet-inclusive shelter units for unhoused families. We have since expanded PALS to include our new family shelter, Magnolia Gardens, in Flushing, Queens. URI stands ready to serve as a thought partner as the City works to expand pet-friendly options across the shelter system. The human-animal bond plays a significant role in helping people heal from trauma. For people in crisis—including survivors of domestic violence and individuals experiencing homelessness—pets provide irreplaceable comfort and emotional support. PALS recognizes the necessity of keeping families, both human and animal, together, and provides the resources needed to support them. Access to safety and warmth should not depend on whether a shelter allows pets. We look forward to working with the City so that, by 2030, our social services district becomes fully pet-inclusive.

Finally, we must address the pathway out of shelter. The Mayor recently noted that at least ten of the individuals who died during the recent cold emergencies had some contact with the shelter system. We must ask: What would have happened if those individuals had been able to access permanent housing—whether through CityFHEPS, supportive housing with on-site services, or other long-term solutions—before the next winter, the next crisis, the next Code Blue? Every administration has grappled with Code Blue. This Council and this administration now have an opportunity to shift from reactive emergency responses to a proactive housing and health strategy. Homelessness is, in many ways, a systemic failure—not an individual one. But it is a failure we can fix. By investing in district-level shelter and safe havens, pet-inclusive and trauma-informed care, robust supportive services, fair wages for frontline staff, and real pathways to permanent housing, New York City can prevent future deaths and honor those we have already lost.

Urban Resource Institute stands ready to partner with the Council, the administration, and communities across the city to ensure that no New Yorker has to choose between freezing on the street, riding the subway all night, or entering a system they do not trust. Thank you for your leadership and for your commitment to our unhoused neighbors. I welcome your questions.

New York City Council
Hearing on Public Safety
10 February 2026

Re: Conditions in NYC Shelters and the Importance of OnPoint NYC

Dear Chairs and Councilmembers,

Thank you for the opportunity to submit testimony. My name is Knakisha Candanedo and I am a resident of East Tremont and a constituent of Councilmember and Public Safety Committee Chair Oswald Feliz. I am also part of the community group Friends of Echo Park, a group of community members working to care for our neighborhood park and the people who use it.

For more than a year, we have focused on advocating for human-centered supports and services in and near the park for unhoused people. In partnership with service providers (such as OnPoint NYC), the Parks Department, and elected officials, we have worked to respond to the needs of our neighbors with compassion. I wanted to take this opportunity to share about my experience with the unhoused people in our park who need the city's assistance, and also express gratitude for the important work being done by OnPoint NYC to make sure people living on the streets have access to services.

There have been sweeps of encampments in Echo Park, and I agree with the concerns raised during this hearing about their impact on the park's unhoused community. During these sweeps, personal belongings have been confiscated and thrown away, leaving people feeling harassed and dehumanized. The way these operations are carried out often lacks compassion and dignity, which is deeply disheartening.

I have a family member who is the supervisor of a shelter here in New York, and they have shared why many people are understandably hesitant to enter the shelter system. The conditions in some shelters leave individuals feeling unsafe and disrespected. When people feel treated with dignity, they are much more likely to seek help. Our city must do better to ensure that those who are underserved are met with care, respect, and meaningful support. There are significant improvements that can and should be made within the shelter system alone.

I am especially grateful for OnPoint NYC and the critical services they provide, especially during this period of extreme cold. They were able to remain open 24/7 over the weekend's cold front, and having witnessed OnPoint's impact in my own community, I am confident that their work saved lives. Many unhoused people who would not enter shelters because of negative past experiences were able to find safety and support through OnPoint's services, preventing potential tragedies during this

severe winter weather. Every service offered – whether it’s a warm meal, a shower, or clean clothes – is an immediate intervention, and vital to a person’s wellness and stability. I thank OnPoint NYC and the city for allowing them to remain open, and I sincerely hope their lifesaving work continues. They provide an essential service to our unhoused neighbors who need care, dignity, and support. Thank you.

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: John Esposito

Address: _____

I represent: FDNY, Chief of Department

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Ted Long

Address: _____

I represent: H + H

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Helen Strom

Address: 40 Rector St, 5th Fl NY NY 10006

I represent: Safety Net Project and Safety Net Activists

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: 8/10/26

(PLEASE PRINT)

Name: Jody Rudin

Address: _____ Brooklyn

I represent: Institute for Community Living (ICL)

Address: 125 Broad Street

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: 2/10/26

(PLEASE PRINT)

Name: Shana McCormick - Rethink Food

Address: _____

I represent: _____

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Kristin Miller

Address: 5 Haver Pl.

I represent: HSU

Address: _____

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THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Alisa Wilky

Address: _____

I represent: Coalition for the Homeless

Address: 129 Fulton St.

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Catherine Trepene

Address: _____

I represent: Volunteers of America - Greater New York

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: GRAHAM HORN

Address: 100 Pearl St., 14th Floor NY, NY 10004

I represent: New York Legal Assistance Group

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

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I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Carolyn Norton
Address: Legal Services NYC 40 Worth St.
I represent: Legal Services NYC
Address: 40 W Worth Street NY NY 10013

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

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I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Joshua Goldfein w/ Alison Wilkey
Address: 49 Thomas St NY NY
I represent: Legal Aid Society w/ Coalition for the Homeless
Address: 49 Thomas St / 129 Fulton St

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

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I intend to appear and speak on Int. No. _____ Res. No. _____
 in favor in opposition

Date: _____

(PLEASE PRINT)

Name: TIMOTHY Pena
Address: 257 W. 29th St.
I represent: Veterans Justice Project
Address: _____



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THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: 2/10/26

(PLEASE PRINT)

Name: Erica Strong

Address: 198 East 121st Street NY, NY 10035

I represent: CUCS

Address: 198 East 121st

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Shana McCormick

Address: _____

I represent: Rethink Food

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Van Yu + Erica Strong

Address: _____

I represent: Center for Urban Community Services

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

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I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Jody Rudin

Address: _____

I represent: Institute for Community Living

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

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I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Eric Rosenbaum

Address: _____

I represent: Project Renewal

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

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I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Catherine Trapani

Address: _____

I represent: Volunteers of America

Address: _____



Please complete this card and return to the Sergeant-at-Arms



**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Judith Rosentfeld

Address: _____

I represent: Breaking Ground

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

(PLEASE PRINT)

Name: Graham Horn

Address: _____

I represent: New York Legal Assistance Group

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: 2/1/026

(PLEASE PRINT)

Name: Christopher Leon Johnson

Address: _____

I represent: Self

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

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I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

Name: A.P. LaFare (PLEASE PRINT)

Address: _____

I represent: the community/people

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

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I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: _____

Name: JENNINGS (PLEASE PRINT)

Address: _____

I represent: _____

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

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I intend to appear and speak on Int. No. _____ Res. No. _____

in favor in opposition

Date: 2-10-2026

Name: RICHARD FLORES (PLEASE PRINT)

Address: _____

I represent: _____

Address: _____