

NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Ashwin Vasan, MD, PhD Commissioner

Testimony

of

Jamie Neckles Assistant Commissioner, Bureau of Mental Health New York City Department of Health and Mental Hygiene

before the

New York City Council

Committee on Mental Health, Disabilities and Addiction Committee on General Welfare Committee on Veterans Committee on Housing and Buildings

On

Oversight: Supportive Housing in New York City

And

Int. 1153-2023

December 7, 2023 City Council Chambers New York, NY Good afternoon, Chairs Lee, Ayala, Sanchez, Holden and members of the Committees. I am Jamie Neckles, Assistant Commissioner for the Bureau of Mental Health at the New York City Department of Health and Mental Hygiene (Health Department). Thank you for the opportunity to testify today. I am pleased to be here with my colleagues to explain the Health Department's role in supportive housing in New York City.

The Health Department's mandate is to protect and promote the health and wellbeing of all New Yorkers. Supporting those with serious mental illness and substance use disorders is a critical part of this responsibility. We employ a public health approach to this work, focused on prevention and intervention to avoid crisis, and provide responsive care with health and social supports that are affordable, accessible, effective, and free of stigma. This is why we play a key role in supportive housing in New York City. Supportive housing is affordable, permanent and independent rental housing, that is integrated within a neighborhood and community, and meets the needs of tenants by providing supportive services. Supportive housing offers people who are unhoused and have a mental illness, or substance abuse disorder, a safe, dignified space for health and recovery. Research also indicates that it promotes housing stability, improves health outcomes, and decreases preventable hospitalizations.

We recognize that supportive housing is the ultimate solution to chronic homelessness. We are committed to providing it to those with mental health needs coming out of the City's shelter, foster care, and criminal justice systems. We currently contract for about 11,800 units of supportive housing and are working tirelessly to increase that number. This represents an investment of \$282 million in city and state funding for the current fiscal year We play a pivotal role in making New York a leader in supportive housing nationwide.

Today I will speak briefly about the history of the Health Department's role in supportive housing development, then talk about what we are doing now with the units we have open and operating.

The Health Department has had supportive housing contracts since the mid-1980's. Beginning in the 1990s, more formal agreements and service models were developed in collaboration with the New York State Office of Mental Health. With each agreement, the city's supportive housing portfolio grew; at first in older buildings that were converted into supportive housing programs and more recently with new construction and mixed-use buildings. The current wave of expansion is known as NYC 15/15 and represents a partnership between the city agencies present today – the Health Department, DSS, and HPD. HPD provides the development funding and ongoing rental subsidies. DSS leads the procurement process and manages the Coordinated Assessment and Placement System (CAPS), which determines housing eligibility and manages referrals into units. The Health Department initiates and manages the social services contracts, which includes technical assistance for providers for set-up and maintaining quality support services designed to help individuals and families use housing as a platform for health and recovery.

The Department's programs are available for those who have been unhoused for extended periods of time, including people coming from street outreach and shelters, Department of Youth and Community Development shelters, foster care, and the criminal-legal system. The majority

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of units, about 84%, are allocated for single or two-adult households who have serious mental illness or substance use disorders and were unhoused preceding their move. The remaining units are designated for different household types (such as families and young adults) and people with specific histories that put them at heightened risk. This includes sites catered to young adults aging out of the foster care system and people with high numbers of shelter or jail stays.

What really sets this apart from general affordable housing are the support services. The Department has led the movement over the past 30 years to focus on services that are personcentered and recovery oriented. Our supportive housing programs offer a variety of services to tenants through case management. This includes connection to health and mental health services, medication management, connection to employment and benefits, social activities, accessing tools for smoking cessation and other harm reduction resources, and other support for daily living skills. These supportive services are focused on positively impacting tenants' quality of life and assisting in their personal path of rehabilitation and recovery from mental illness and/or substance use. For those with children, our supportive housing programs provide the necessary supports for maintaining a safe home environment conducive to healthy child development.

I am happy to share some measures of success in supporting our tenants in living healthy lives. 77% of residents are connected to a primary care physician. Among current tenants, the average length of time spent in supportive housing is nearly 8 years, with a range of one to 41 years. This tells us that our tenants are staying housed and connected to services for prolonged amounts of time following homelessness.

The City is committed to expanding the supportive housing supply. Since fiscal year 2021, we have contracted an additional 1,000 units - bringing our total portfolio up to 11,800 units. As we are all aware, even with many new units, there is still more demand than supply of supportive housing. The City's Mental Health Plan centers people with serious mental illness and substance use disorders and identifies housing as a key strategy for improving their health. The Plan, in alignment with the NYC Housing Blueprint and the 15/15 initiative, calls for continued expansion of permanent housing options for New Yorkers with serious mental illness and substance use disorders. The Health Department anticipates opening an additional 684 units by the end of fiscal year 2025. These units will be essential in meeting growing demand for supportive housing and ensuring that New Yorkers with or at risk of serious mental illness and/or substance use disorders have safe, stable, and affordable housing to use as a platform for recovery.

The City's investment in supportive housing reflects the City's commitment to providing this critical resource for addressing homelessness among those with or at risk of serious mental illness or substance use disorders. Over the last decade, supportive housing investment has doubled allowing for new units as well as ensuring that older units are properly preserved and maintained so that supportive housing providers can continue to provide safe, dignified housing with robust support services to a new generation of tenants. Additionally, the Health Department's oversight and technical assistance is designed to improve service quality and accessibility. For example, last year we released, in collaboration with DSS and HPD, guidance

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on the referral and placement process, as well as low barrier admission policies to facility operators, service providers, and tenants.

We know safe, stable, and affordable housing is a critical social determinant of health and a powerful tool for supporting those with mental health issues. The Health Department has demonstrated our commitment to providing affordable, independent, and permanent supportive housing to those who are unhoused and have or at risk of serious mental illness or substance use disorders. I am pleased with the progress we have made in this space, but we still have so much more work to do. We are happy to discuss with Council how we can best support these populations and expand the supportive housing supply.

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

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Testimony of Michael Bosket, Executive Deputy Commissioner, Employment and Support Services Administration, Department of Social Services Human Resources Administration

Before the New York City Council, Committee on General Welfare, Committee on Veterans, Committee on Mental Health, Disabilities, and Addiction, Committee on Housing and Buildings

Supportive Housing in New York City December 7, 2023

Good afternoon. My name is Michael Bosket and I serve as Executive Deputy Commissioner, Employment and Support Services Administration at the Department of Social Services Human Resources Administration (HRA). I would like to thank Chairs Ayala, Holden, Lee, and Sanchez and the members of the Committees on General Welfare; Veterans; Mental Health, Disabilities, and Addiction; and Housing and Buildings for holding today's hearing on supportive housing in New York City. I would also like to acknowledge my fellow panelist, Jamie Neckles, Assistant Commissioner for the Bureau of Mental Health, Department of Health and Mental Hygiene; Emily Lehman, Assistant Commissioner, Division of Special Needs, Department of Housing Preservation & Development; Lamar Wheeler, Senior Director of Housing and Support Services, Department of Veterans' Services

Supportive Housing: Overview, Origins, and Purposes

Supportive Housing provides permanent affordable housing for individuals and families who experienced long-term homelessness and who have varied needs, including complex behavioral health and medical needs.

We know that supportive housing works! Positive outcomes are evident in the lives of the individuals and families that reside in these settings. Within these high-quality living environments, tenants receive the tools and supports necessary to achieve their greatest level of independence. Supportive housing staff, including case workers and clinicians, and community partners collaborate to address the immediate & long-term needs of supportive housing tenants, including health, behavioral health, substance misuse, economic, emotional, or any combination of these needs. By offering a continuum of integrated services to assist vulnerable individuals and families transitioning from homelessness, supportive housing fosters greater stability, independence, improved health and mental health, and dignity.

Our supportive housing efforts continue to be effective, from Fiscal Year 2022 to Fiscal Year 2023, referrals have gone up 38%, viewings buy 51%, and most importantly, 46% more New Yorkers were connected to permanent supportive housing. Approximately 94% of supportive housing units are occupied by long term tenants, comparable to pre-pandemic occupancy levels.

There are two primary types of supportive housing: single site and scattered site. In single-site supportive housing, also referred to as congregate supportive housing, each individual or family has private living and sleeping quarters and may share kitchens, or common rooms, recreation rooms, or other facilities. These sites usually have support services provided in the same building and may be a blend of supportive housing and affordable housing. In scattered-site supportive housing, the units are in buildings that are spread throughout New York's neighborhoods and communities. The tenants usually live at a higher level of independence with most support services provided in their home as needed. The object of both single and scattered site housing it to integrate these tenants into the local community.

In supportive housing, a family or individual pays no more than 30% of their income towards rent, making it truly stable and affordable housing. Participation in services is voluntary and not required to maintain tenancy, however tenants are encouraged to take advantage of the transformative services offered. Support services may include case management; educational, vocational, or recovery-oriented services; support in developing skills for self-sufficiency; individualized service planning; supportive counseling; assistance to access community services and government benefits; referrals to medical and behavioral health care and treatment; medication management; and support obtaining other needed services, such as legal support.

HRA's Office of Supportive and Affordable Housing and Services (OSAHS) is focused on permanent housing solutions for individuals and families who have experienced homelessness. Working closely with other HRA divisions, partner agencies, like the Department of Health and Mental Hygiene (DOHMH) and the Department of Housing Preservation and Development (HPD), and with not-for-profit housing providers, OSAHS helps to vet proposed supportive housing projects and manage the placement process for units already built. This unit serves as a centralized source for referral for more than half of the supportive housing units available Citywide and is focused on filling vacant units as quickly as possible.

So far in CY 2023, we have helped "rent-up" more than 800 new high-quality supportive housing units during CY 2023 and have placed close to 1,000 clients in existing re-rental units. We continue to aggressively expand Supportive Housing capacity and efficiency through the Coordinated Assessment and Placement System (CAPS) improvements, enhanced coordination with partners, and reduction of bureaucratic barriers.

Occupancy and Vacancies

As previously stated, 94% of our supportive housing units are occupied, many by long-term tenants. We are proud of this number which means that more than 30,000 individuals and families who previously experienced long-term homelessness are now in stable supportive housing. These

individuals and families are connected to the resources they need to participate in their lives more fully.

OSAHS uses the Coordinated Assessment and Placement System (CAPS) to make this process as efficient as possible. CAPS was established in October 2020 as a result of a US Department of Housing and Urban Development (HUD) mandate for those receiving federal funding for homeless services to streamline the way people move from homeless services into permanent housing. It is a web-based platform that allows users (which include those completing applications for supportive housing, housing providers, shelters, OSAHS and other placement entities) to centrally access the Coordinated Assessment Survey, NYC Supportive Housing Application, and the Vacancy Control System. Having the entire process from application to determination, referral, placement, occupancy, vacancy, and other unit status has greatly improved the process and timelines from application to move-in.

When reviewing vacancy data from CAPS, it is important to note that vacancies represent only a small share of the supportive housing units. Many of these vacant units have an individual or family identified to move into or "linked" to the unit but who have not yet moved in while they complete the steps to "move-in,". There are additional units that are not ready for a tenant due to repairs needed after another tenant moves out or the unit is sealed. However, working with our partners and providers, the average time to make a unit placement ready is only 19 days.

Legislation

Introduction 1153 would require the Commissioner of the Department of Social Services to produce two monthly reports, in consultation with the NYPD Commissioner, the Commissioner of the Department of Sanitation, and the Commissioner of the Department of Parks and Recreation. Report One would track instances when a city agency worked to remove a person experiencing homelessness from a public space. Report Two would track the number of individuals affected by the removal, the services offered, and if there were involuntary removals or arrests.

As it is currently written this bill presents concerns around the frequency of reporting as well as privacy concerns for those potentially affected by this legislation. Transparency in assisting people experiencing homelessness and delivering the resources they need are important priorities. We would like to work in partnership to further refine this legislation, addressing operational and privacy considerations. Although we cannot offer support of this bill in its current state we look forward to working with the Council and the bill sponsor to address the agency's concerns.

Conclusion

I would like to thank the OSAHS team for the dedication and hard-work they demonstrate every day and to the great client-focused work done by supportive housing providers. They know and understand the impact their work has on the lives of clients in need of supportive housing. They are keenly focused on the life changing work they do, and it is my honor to work with them.



Thank you for your attention, I am happy to take your questions.

Testimony of Emily Lehman Assistant Commissioner for Special Needs Housing New York City Department of Housing Preservation and Development New York City Council Committee on General Welfare, Committee on Mental Health, Disabilities and Addiction, Committee on Veterans, and Committee on Housing and Buildings, joint hearing on supportive housing December 7, 2023

Chairs Sanchez, Lee, Holden, and Ayala, and members of the committees, thank you for the opportunity to testify today on the Department's efforts to create and preserve supportive housing in our city. My name is Emily Lehman, and I am the Assistant Commissioner for the Division of Special Needs Housing at HPD. I am joined today by my colleagues at the Human Resources Administration, Department of Mental Health and Hygiene, and Department of Veterans' Services.

I first want to thank the Council for this opportunity to discuss the critical need for supportive housing as we face historic dual crises of housing and homelessness in our city. Your leadership is essential for expanding supportive housing which in turn will reduce homelessness in the communities you serve.

Supportive housing is one of our main strategies for creating affordable housing. It promotes the administration's goal of moving people out of shelter and into permanent housing and is a key tenet of the Housing our Neighbors Blueprint and Where We Live strategic plans. It is the gold standard for addressing homelessness in our city, and HPD is proud of the work we've done thus far in creating more housing opportunities for formerly homeless households in need of supportive services. This administration believes that supportive housing is a benefit, not a burden. It makes our projects stronger, and that is why we prioritize it throughout our work, including on public sites.

Over the past decade, HPD has financed over 11,000 units of supportive housing. In Fiscal Year 2023, we set records for financing supportive housing and housing for formerly homeless households. HPD's Supportive Housing Loan Program (SHLP) has long been the primary financing tool for the city's congregate supportive housing production. In a typical SHLP project, at least 60% of a building's units are set aside as supportive units and the remaining 40% are filled through the City's affordable housing lottery system. To meet the moment of need for more supportive housing, we are continuing to expand our toolbox. Aside from SHLP, supportive housing can be included as a component in any of our New Construction rental programs. While these projects are mandated to include a 15% homeless set-aside, we are often exceeding that target in projects that include supportive housing. In addition to HPD's programs, we work with our agency partners at the city and state level to ensure that we can produce as much supportive housing as possible.

HPD's supportive housing projects provide amenities such as community spaces and computer rooms while incorporating innovative design elements that make these

buildings vibrant places to live. Additionally, the supportive housing model includes onsite, wrap-around social services for tenants. Most importantly, supportive housing is **permanent** housing providing its tenants with rent stabilized leases and all the same rights and responsibilities as any other tenant in a rental apartment in New York City.

Based on all available research and evidence, supportive housing works. It is a proven solution for individuals and families with long histories of homelessness and other challenges. Some of the populations served by supportive housing includes those with mental illness, substance use disorders, HIV/AIDS, survivors of domestic violence, youth aging out of foster care, justice-involved individuals, and veterans, amongst others. Not only does supportive housing work for New Yorkers and their families, it is also a cost-effective use of public resources. Peer-reviewed research has found that for every unit of supportive housing, taxpayers save more than \$10,000 per year in public resources such as shelters, emergency rooms, jails, and psychiatric facilities. In fact, research shows that supportive housing increases property values in the areas where it is located.

One of the best tools we have today to create supportive housing is the NYC 15/15 program. In 2015, the City set a goal of creating 15,000 units – 7,500 congregate and 7,500 scattered site units – by 2030 and put forth \$1 billion in City capital to fund the program. HPD focuses on congregate supportive housing, which is permanent housing with a mix of affordable and supportive individual apartments. Just like most other affordable housing that HPD finances, every tenant has a rent-stabilized lease and is responsible for paying rent. The 15/15 program serves a range of populations including chronically homeless single adults and families with mental illness or substance use disorders and young adults with high service utilization. In the past 8 years, HPD has financed over 4,000 congregate supportive housing units through the 15/15 program. We have a robust pipeline of future 15/15 projects that we look forward to moving forward with our agency, development, and city council partners.

As public servants we have a duty to serve each and every person in this city. So often our most vulnerable New Yorkers are left behind and we must endeavor to give them the care that they need and the care that they deserve. Supportive housing makes our neighborhoods stronger and more equitable. We are asking the Council to continue standing with us on the front lines of these historic crises of housing and homelessness and be a champion for supportive housing in our city. Thank you for the time and the opportunity to speak today.

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TESTIMONY OF:

Kathleen McKenna, LMSW

BROOKLYN DEFENDER SERVICES

Presented before the

New York City Council

Committees on General Welfare, Mental Health, Disabilities, and Addiction,

Veterans, and Housing and Buildings

Oversight Hearing on Supportive Housing in New York City

December 7, 2023

My name is Kathleen McKenna and I am a Senior Policy Social Worker at Brooklyn Defender Services. BDS is a public defense office whose mission is to provide outstanding representation and advocacy free of cost to people facing loss of freedom, family separation and other serious legal harms by the government. For over 25 years, BDS has worked, in and out of court, to protect and uphold the rights of individuals and to change laws and systems that perpetuate injustice and inequality. We are thankful to the Council and the Committees on Mental Health, Disabilities, and Addiction, General Welfare, Veterans, and Housing and Buildings for holding this critical healing today on supportive housing.

BDS represents approximately 22,000 people each year who are accused of a crime, facing the removal of their children, or deportation. BDS is fortunate to have the support of the City Council to supplement the services we provide as a public defender office in Brooklyn. Through specialized units of the office, we provide extensive wrap-around services that meet the needs of people with legal system involvement, including civil legal advocacy, assistance with educational needs of our clients or their children, housing and benefits advocacy, as well as immigration advice and representation.

Permanent affordable housing is the foundation many New Yorkers need to find stability in their lives. Stable housing helps the people we serve favorably resolve their criminal cases and reunite with their children after ACS involvement, maintain jobs, stay in school, and set future goals. For people experiencing housing instability or homelessness who are living with a serious mental illness or substance use disorder, supportive housing can be a life changing resource.

DEFEND • ADVOCATE • CHANGE

People with serious mental health concerns are disproportionately homeless or housing insecure, which creates additional barriers for them to access the treatment they need.¹ People experiencing homelessness may have difficulties connecting to providers, affording treatment or medication, or accessing transportation to appointments. With a safe and stable home, people can engage in treatment more effectively. When their basic needs are met, people can choose to access medication, healthcare, counseling, and services. It is critical that the city continue to fund and expand high quality supportive housing programs while working to decrease barriers to housing for all New Yorkers.

Barriers to Accessing Supportive Housing

While supportive housing can provide the safety and permanence people need to thrive–and a necessary step to favorably resolve their cases or reunite with their children after ACS involvement–accessing the program is challenging and many find the process cumbersome and opaque.

Application Process

BDS' social work team has dedicated members who have completed the HRA 2010e Application Training and assist people we serve in compiling and submitting the supportive housing application through the PACT system. Even with this team in place, it is still arduous and timely to complete the HRA 2010e application. Supportive housing approvals only remain active for six months, so we often help people we serve resubmit their application multiple times while waiting for an appropriate placement.

In our experience, applications are frequently rejected for minor discrepancies or arbitrary reasons. We have seen denials for minor discrepancies in portions of the application completed by different service providers, such as differing reports of onset of symptoms or start of treatment between the psychosocial summary and the comprehensive psychiatric evaluation. Other applications have been rejected because a psychosocial or psychiatric evaluation is deemed not detailed enough. Reasons for rejection are inconsistent and unpredictable for providers. Obtaining these records is often time consuming and may require multiple visits with a treatment provider, which makes the application process longer and more cumbersome when applications are declined multiple times.

Supportive housing applicants must also prove that they are chronically homeless and do not have alternative housing. While city, state, and federally funded programs have differing definitions of chronic homelessness,² applicants are required to provide documentation of time spent in shelter or safe havens. People who are experiencing street homelessness, facing eviction, couch surfing or doubling up are typically unable to meet the documentation criteria. Additionally, time spent in an intuition, including jails, prisons, hospitals, or inpatient treatment sites, do not qualify as

https://www.coalition for the home less.org/basic-facts-about-home lessness-new-york-city.

¹ Coalition for the Homeless, Basic facts about homelessness: New York City, 20203, Available at

² See eligibility information here

https://www.nyc.gov/assets/nycccoc/downloads/pdf/Supportive_Housing_Types_12921.pdf

homelessness, and an applicant will need to enter or re-enter the shelter system to establish eligibility.

Housing Search

While HRA highly regulates the initial application process, when it comes to searching for an apartment and submitting an application, there is little oversight or regulation. CUCS maintains the only list of supportive housing openings on their website, which is updated weekly. Upon receipt of a HRA 2010e approval, the social worker who submitted the application can begin submitting the approved application packet to housing programs with vacancies. Some agencies will confirm receipt of a packet, but others never respond at all. Because of this uncertainty, we may submit dozens of packets for each person. This makes the process particularly onerous and time consuming,

Applicants are prioritized based on varying criteria and each housing provider may have specific admission criteria. Often, housing providers will only accept "high functioning" people, and those with the most serious need for support being overlooked.

Family housing

Most supportive housing providers in the city can only accommodate single adults. It is critical that the city works to expand supportive housing options for parents, families, and couples. ACS targets and punishes parents for their lack of support. Supportive housing is one way to ensure parents have the support they need while keeping their family together. Expanding supporting housing for families ensures children can remain safely at home. Children may languish in the foster system while a parent awaits a family supportive housing unit. Other families spend years in DHS shelters waiting for appropriate housing.

We have seen many people have HRA 2010e applications approved for a family placement, but then during the housing search placement that placements are unavailable. One person we represent was approved for supportive housing with her child and placed on a waitlist for a family apartment. She waited for an opening for two years before she finally accepted a single-adult placement. Families should not be forced to decide between staying in shelter or separation.

Tenants' Rights

Through the advocacy of supportive housing tenants and the action of this Council, supportive housing providers are required to provide all tenants with the Supportive Housing Tenants Bill of Rights, which enumerates the tenancy rights of people living in supportive housing. Critically, this includes the right to a court proceeding before eviction, free legal defense services, and the prohibition of eviction without a judicial order.

People we serve, however, continue to report that housing providers attempt to evict residents for minor infractions of program rules, like not meeting a curfew multiple times or not getting out of bed on time. The city must ensure that supportive housing providers are upholding the rights of tenants.

One-size fits all approach

While HRA representatives stated before the Council that all programming for supportive housing participants is optional, the people we serve report that programs and services are often mandated in supportive housing, and failure to comply can result in discharge from the program. These blanket policies do not meet the needs of all residents, and can lead to tenants feeling institutionalized or infantilized by providers. In our experience, most congregate supportive housing programs require medication management–with medications stored centrally and dispensed by case workers. This has been retraumatizing for some people who have experienced incarceration and experienced medication withholding or denial.

De-Escalation and policing

The city relies largely on policing and incarceration to address issues related to mental health and substance use. Concerningly, supportive housing providers often default to calling the police when conflict arises or a person experiences a mental health crisis. Supportive housing exists to provide a safe, stable environment for people with mental health or substance use needs to live independently. Criminalizing mental illness is antithetical to this approach. The simple presence of an armed police officer can escalate tension and trigger anxiety and distress for those who are living with mental illness or behavioral health conditions. As public defenders, we have seen firsthand how police interactions play out all too often. Increased police encounters with those living with mental illness do not result in access to care, but instead increased rates of arrest, incarceration, and further decompensation.

Int. 1153 -2023: Requiring monthly reports on removals of individuals experiencing homelessness and the outcomes for those individuals.

In November 2022, Mayor Adams announced a plan to involuntarily remove and hospitalize New Yorkers who were experiencing homelessness and perceived to be experiencing mental illness. Forcibly removing people perceived to be mentally ill from the street to the most restrictive setting is not only inhumane, it is also ineffective in facilitating the goal of engaging people in mental health treatment.

Involuntary removals are inherently traumatic. People are torn from their homes, communities and support systems. For people experiencing homelessness, their belongings are often lost or thrown away. This forcible–often violent–removal creates a traumatic association with the hospital, a place that should be associated with access to treatment and care, not punishment. Involuntary removals create an additional barrier to care for people when they are ready and able to opt into treatment. People we serve who have a history of involuntary hospitalizations have shared with us that they avoid the hospital, even when they recognize they need critical mental or physical health treatment, because of a fear of loss of autonomy, forced treatment, and an association with a past traumatic event. Living with a mental illness is not a crime; New Yorkers must be provided the opportunities and resources to choose care without coercion.

BDS condemns the practice of forced removals and encourages the council to work with city agencies to develop appropriate pathways to housing and care for people experiencing

homelessness or living with a mental illness. We support Int. 1153, which will provide critical data on the practice of homeless sweeps, including the personnel cost to effectuate a sweep, the number of people arrested or involuntarily removed to a hospital, and if any of the participants were connected to permanent housing. We urge the Council to work with city agencies and community stakeholders to ultimately end this practice.

Conclusion

Permanent affordable housing is critical for all New Yorkers. For people living with serious mental health conditions or substance use disorders, supportive housing can offer hope for the future and the ability to engage in care. We urge the Council to work with supportive housing residents, advocates, and the city to ensure supportive housing is available, accessible, and meets the needs of current and future residents.

Thank you for your time and consideration of our comments. We look forward to further discussing these and other issues that impact the communities we serve. If you have any additional questions, please contact me at kmckenna@bds.org.

191 Joralemon Street, 2nd Floor, Brooklyn, New York 11201 FUR THE RECORD

Testimony of Joseph Rosenberg Executive Director, Catholic Community Relations Council Before the City Council Committee on Mental Health, Disabilities and Addiction, the Committee on General Welfare, the Committee on Veterans, ant the Committee on Housing and Buildings Supportive Housing in New York City

December 7, 2023

Good afternoon, Chairs Ayala, Lee, Holden, Sanchez and members of the Committees on Mental Health, General Welfare, Veterans and Housing and Buildings. I am Joseph Rosenberg, Director for the Catholic Community Relations Council representing the Archdiocese of New York and the Diocese of Brooklyn. Thank you for holding this hearing on a program that is a lifeline to so many fellow New Yorkers.

Housing advocates, governmental agencies, not for profits and faith-based organizations all agree that supportive housing is a successful and cost-effective model. It provides affordable housing and social services to those living in substandard conditions and confronting the daily threat of homelessness.

Supportive housing serves not only homeless families and individuals, but also victims of domestic violence, youth aging out of foster care and individuals receiving nursing home care who make the transition to independent living. Veterans and the elderly who struggle with serious mental illness and substance abuse are provided decent and safe housing through these initiatives. It is a humane and economical program, far superior in every manner to the shelter-based model. Mayor Adams' initiative of expediting the construction of 15,000 additional supportive housing units is strongly supported by us. But we urge that even more financing be allocated to this program, not just for the construction of apartments, but also for the fuller array of social services that the supportive housing population requires.

Sheltering the homeless and helping the needy have always been among the primary missions of the Catholic Church. Consistent with that principle, the Archdiocese of New York and the Diocese of Brooklyn through their respective Catholic Charities and housing affiliates have constructed and preserved thousands of apartments for low-income New Yorkers throughout our City. This commitment continues to this day with the Catholic Church being the largest faith-based provider of low-income senior citizen housing in New York City.

Catholic Homes of Catholic Charities of the Archdiocese of New York has developed over 3,300 affordable housing units in Manhattan, the Bronx, and Staten Island, while Progress of People ("POP") of Catholic Charities of the Diocese of Brooklyn has constructed over 4,000 units in Brooklyn and Queens. Both entities, working with federal, state, local housing, and social service agencies, have over a thousand units planned in their respective construction pipelines, including hundreds of supportive housing apartments.

A recent POP affordable senior development with supportive housing units is the Bishop Valero Senior Residence in Astoria. It provides 102 units, all of them for seniors with income below 50% of the Area Median Income ("AMI") financed in part by the Department of Housing, Preservation and Development ("HPD"). Thirty percent of the apartments are reserved for formerly homeless seniors with severe mental illness ("SMI"). The Bishop Valero Senior Residence features on site social services, a resident's lounge, a working kitchen and dining room area, a large exterior landscaped yard, and the Catholic Charities Peter DellaMonica Older Adult Center.

In Morrisania, Catholic Homes has developed 112 units of affordable housing with thirty-five supportive housing studio apartments at the St. Augustine apartments. Financed primarily by HPD and the State Office of Mental Health, the supportive units are for individuals with chronic mental illness who are assisted through on-site services. These are provided by Beacon of Hope, which serves several hundred individuals in its supportive housing programs throughout New York City.

As successful as these projects are, we urge the City to allocate additional funds for the construction of similar developments with sufficient onsite services needed to help these vulnerable residents.

The soaring costs of construction materials, property insurance plus increased labor costs and high interest rates have made the construction and operation of these developments extremely challenging, especially for nonprofit faith-based providers. Our governmental partners need to recognize these difficulties and modify their term sheets and financing tools to address this.

It is imperative that tenants feel safe in their home. Without on-site 24/7 security, many individuals, especially the formerly homeless, can have difficulty transitioning into permanent housing. Security funding is currently provided by HUD in their Section 202 low-income senior citizen developments and similar funding should be provided on a 24/7 basis, especially in supportive housing for seniors such as HPD's Senior Affordable Rental Apartments ("SARA") program.

We also strongly urge that funding be increased for social services for supportive housing residents. The "light touch" social service financing model is insufficient, especially for the formerly homeless as well as for the elderly, who require additional assistance as they age. Sufficient staff funding must include annualized Cost of Living Adjustments ("COLAs") and staff training funds. Programs must also be funded that include such necessities as escorts to psychiatric, therapeutic, and medical appointments, emergency transfers to hospitals, and assisting tenants with obtaining and maintaining Social Security, Public Assistance and SNAP benefits.

The current set asides for the percentage of supportive housing units in affordable housing developments vary according to the State and City housing programs. Supportive housing units can consist of as much as 60% of a building's apartments. Although this creates much needed supportive apartments, it can create difficulties as the size of the buildings increase. For example, we have developed buildings containing as many as three hundred affordable apartments. Complying with State and City mandates requiring as much as 60% of the units being supportive creates financial, social and management challenges in providing sufficient assistance to these tremendous numbers of vulnerable tenants. We therefore ask that both the City and State's housing and social service agencies consider being flexible in determining the percentage of supportive housing units that must be included in larger 100% affordable housing developments.

Thank you.



Testimony of

Coalition for Homeless Youth

on

Oversight: Supportive Housing in New York City

Submitted to

The New York City Council Committees on General Welfare, Mental Health, Disabilities and Addiction and Veterans

By

Jamie Powlovich Executive Director Coalition for Homeless Youth

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Introduction

The Coalition for Homeless Youth (CHY) welcomes the opportunity to submit written testimony focusing on how New York City can improve runaway and homeless youths' access to supportive housing to the New York City Council Committees on General Welfare, Mental Health, Disabilities and Addiction, and Veterans. We greatly appreciate the Council's support in highlighting the needs of youth and young adults experiencing homelessness in New York City.

Who are Runaway and Homeless Youth?

RHY are generally defined as unaccompanied young people who have run away or been forced to leave home and now reside in temporary situations, places not otherwise intended for habitation, or emergency shelters. The federal Runaway and Homeless Youth Act defines the population as being between 12-24 years of age. As of April 2017, New York State redefined RHY to be anyone under the age of 25 years¹.

On a single night in 2022, 3,594 unaccompanied and parenting youth under age 25 were counted as experiencing homelessness in the NYC Point in Time (PIT) count.² In NYC Fiscal Year 2023, 3,182 RHY, were served in DYCD RHY residential programs, including 326 minors.³ 37,125 RHY received non-residential services at a DYCD RHY drop-in center or through street-outreach⁴. In 2021, DHS reported a total of 4,051 unaccompanied or parenting youth between the ages of 18 and 25 entering either single adult or family shelters,⁵ and the Department of Education (DOE) reported that during the 2019-2020 school year, almost 7,500 unaccompanied youth experiencing homelessness attended NYC public schools.⁶

Youth-Specific Shelters and Services Make a Measurable, Positive Difference

The Department of Youth and Community Development (DYCD) has been designated the county youth bureau for NYC and is responsible for serving RHY under the NYRHYA.⁷ While many RHY also seek services within the Department of Homeless Services (DHS) and the Human Resources Administration (HRA) continuum of shelters, homeless youth, advocates, and RHY providers agree that the outcomes for many homeless youth improve with increased access to youth-specific shelters and services. This was proved in a groundbreaking white paper was released by the Center for Drug Use and HIV Research at NYU Rory Meyers College of Nursing in with the Coalition for Homeless Youth. One of the most significant findings of the study is that high quality RHY programs not only meet basic requirements, but "address higher order relational, psychological, and motivational needs… fostering a sense of resilience among RHY" and providing long-term benefits to a youth's functioning.⁸ *In short, well-funded, high quality RHY programs make a positive impact on a youth's ability to stabilize and successfully transition from crisis to independence*. While more research is needed to evaluate the long-term benefits of RHY services, understanding that these programs make a proven difference to the youth they serve gives further support to why we have continued pushing for more shelter beds and services for youth experiencing homelessness.

Mental Health Needs of Runaway and Homeless Youth

Like all other segments of NYC's homeless population, RHY experience harm that disproportionately impacts their health and creates roadblocks to long-term wellness. This is more recently detailed in "*Opportunity Starts with a Home: New York City's Plan to Prevent and End Youth Homelessness (OSH).*"⁹ In the OSH report, it details the myriad of harms that confront RHY, include: increased mental health problems and trauma, substance use, exposure to victimization and criminal activity, and unsafe sex practices. More specifically that almost 50% of youth served at New York State RHY programs reported needing mental health services, and in

¹ <u>https://www.nysenate.gov/legislation/laws/EXC/A19-H</u>

² https://files.hudexchange.info/reports/published/CoC_PopSub_CoC_NY-600-2022_NY_2022.pdf

³ https://www.nyc.gov/assets/dycd/downloads/pdf/FY23_LL86_RHY_Demographics-and-Services_Report-Final.pdf

⁴ Ibid

⁵ https://www1.nyc.gov/assets/home/downloads/pdf/press-releases/2022/NYC-Community-Plan-DIGITAL.pdf

⁶ Ibid

⁷ New York State FY 2018-19 budget included amendments to the NYRHYA that expand the age range for RHY services and youth-centered beds to 25 years old. The amendments took effect January 1, 2018. (SFY 2018-19 Budget, Part M S2006-c/30060c; *see* <u>https://www.budget.ny.gov/pubs/press/2017/pressRelease17_enactedPassage.html</u>.

⁸ Gwadz, M., Freeman, R., Cleland, C.M., Ritchie, A.S., Leonard, N.R., Hughes, C., Powlovich, J., & Schoenberg, J. (2017). Moving from crisis to independence: The characteristic, quality, and impact of specialized settings for runaway and homeless youth. New York: Center for Drug Use and HIV Research, NYU Rory Meyers College of Nursing. *See page* 16.

⁹ https://www1.nyc.gov/assets/home/downloads/pdf/press-releases/2022/NYC-Community-Plan-DIGITAL.pdf

NYC over 90% of homeless youth have reported experiencing trauma, 92% self-reported having anxiety or depression, 69% reported using drugs and 60% specifically self-reported that they had been diagnosed with having bipolar disorder.¹⁰ Furthermore, homeless youth also experience increased levels of criminalization and discrimination due to their intersecting identities. In NYC, over 90% of homeless youth identify as a race other than white (non-Hispanic) and Youth of color and LGBTQ/TGNC youth are also vastly overrepresented in the RHY population¹¹.

In addition, homeless young people reported a distinct challenge in accessing services, including finding it hard to receive a stable level of care due to having to go to multiple programs and appointments across the city to address their needs. This highlights the great need for robust healing-centered mental health supports and services throughout the RHY programs, unfortunately funding for these services continues to fall short of meeting the need.

Supportive Housing Needs of Runaway and Homeless Youth

Without question supportive housing has been a decisive intervention into the continued housing and homeless crisis in New York City. It is a simple truism that absent supportive housing the crisis of homelessness in New York City would be far worse than it currently is. We are deeply grateful for the City's commitment to bringing online more units of supportive housing and look forward to seeing more units expeditiously get off the ground and provide the necessary housing to move people out of shelters, off the streets and into their own homes.

While we acknowledge the strength of New York City's strong, long-term commitment to providing supportive housing, data shows that it is failing at providing permanent housing to homeless young people exiting DYCD shelter programs. City data shows that in FY23 of the 2,395 RHY that were discharged from DYCD Crisis Services and Transitional Independent Living Programs (TIL) less than 2% successfully moved into Supportive Housing¹². Although Supportive Housing supported 34 young people in exiting homelessness in the timeline outlined above, there were countless more that were discharged to the street, the adult homeless system and other non-permanent placements, that did qualify, but never got accepted.

For young people experiencing homelessness, those with disabilities and those exiting foster care, supportive housing can be a lifesaver. Yet, young people face significant barriers if they apply for supportive housing, which makes it even harder for them avoid landing in adult homeless services. For those who do get into supportive housing units, many face the grim prospect of exiting supportive housing and entering back into homelessness.

There are a number of changes NYC can make to its supportive housing systems to help ensure they better meet the needs of applicants and tenants. CHY supports SHOUT's SAFE campaign demands, which we have included as an appendix to this testimony (Appendix 1). Additionally, we make the following recommendations:

Alleviate barriers to timely placement of Runaway and Homeless Youth (RHY) in Supportive Housing

RHY providers encounter barriers when referring youth to supportive housing or in-patient clinical services. The city must improve its coordination through the Coordinated Assessment and Placement System (CAPS)¹³ to ensure that youth that require long-term and permanent housing that supports their mental health needs is improved. To do this, we recommend the following:

1. Baseline Funding for Housing Navigators in DYCD RHY programs

DYCD data shows that homeless youth rarely transition from DYCD shelters into supportive housing or their_own independent housing. However, unlike in DSS shelters or in the foster care system, DYCD does not have baselined funding for housing specialists. The current Housing_Specialists at the DYCD-funded drop-in centers are temporarily funded through federal Emergency Housing Voucher

¹⁰ https://www1.nyc.gov/assets/home/downloads/pdf/press-releases/2022/NYC-Community-Plan-DIGITAL.pdf

¹¹ Ibid

¹² https://www.nyc.gov/assets/dycd/downloads/pdf/FY23 LL86 RHY Demographics-and-Services Report-Final.pdf

¹³ https://www.nyc.gov/site/nycccoc/caps/caps.page

funding with is set to expire at the end of the fiscal year (June 2024). To ensure RHY have the support of experienced staff to support them in exiting homelessness, the city needs ensure funding for the 16 Housing Specialists currently at the DYCD drop-in centers is baselined.

2. <u>Streamline Referrals to Population A Units to all Shelter Systems</u>

Homeless young adults relying exclusively on DYCD resources appear to have a harder time getting referred for interviews than young adults in DHS shelters. DHS controls the interview-referral process for Population A units and DYCD providers are not typically looped into changes in referral process, nor pro-actively alerted when new buildings are opening, or the specific requirements of said buildings. There must be a mechanism put in place to ensure homeless youth providers can help the young people they serve gain access to buildings as they come on line, and understand the often-complicated eligibility requirements of each development.

3. Improve the Standardized Vulnerability Assessment

The current Standardized Vulnerability Assessment (SVA)¹⁴ creates a significant barrier to homeless youth being able to achieve a "High" scoring, and therefore prevents them from being given priority access to safe and supportive long-term housing. The clear majority of RHY are able bodied individuals who do not frequently utilize the systems that would qualify them for priority placement. Youth that we would consider the most vulnerable, and therefore the intended population, do not regularly utilize the systems being tracked at all. In order to make the SAV a successful tool in determining the vulnerability of RHY, it must include a method for service providers to document a youth's "vulnerable" status, and not rely solely on system utilization data. Furthermore, our members report that HRA does not give more than one homeless systems contact to young people who receive services from both DHS and DYCD RHY programming (ie living in a DHS shelter but receiving RHY services at a DYCD Drop-in). They consider this "double counting" homelessness. This means that the city is only prioritizing those individuals who regularly access high-cost services, who are costing the city the most money in supports, which ignores those who do not and are in need.

4. <u>Require and enforce anti-discrimination and appeal policies</u>

Creaming and cherry picking of applicants by providers is a pervasive issue that needs to be addressed. Sometimes young people are denied for supportive housing due to their age, though it's not written that way. Creaming also occurs by screening out applicants through quick, highly-subjective and surface-level claims of issues such as "lack of insight" into his/her or their mental illness, or being "non-complaint" with medication, or because an applicant has a recent history of substance use, or because they are simply deemed too mentally ill. One way of looking at this is that many of those most in need may be least likely to access this resource.

There is a need for oversight of denials and a mechanism to ensure that eligible applicants aren't being inappropriately screened out of permanent housing via questionable assessments. There is also a need for some type of mechanism through which applicants can challenge denials. It is of note that supportive housing denials are not subject to fair hearings or any other administrative procedure of further review. Advocating for a client whose denial appears inappropriate is typically an exercise in futility.

Improve the successful outcomes for Runaway and Homeless Youth (RHY) in Supportive Housing

For young people with disabilities, experiencing homelessness and those exiting foster care, supportive housing is a much needed resource to provide them with stable housing. Unfortunately, once placed they can be faced with negative experiences, which can lead to them exiting supportive housing and entering back into homelessness. To improve successful outcomes for RHY in supportive housing, we recommend the following:

1. <u>Require all providers to have a reasonable accommodation process for tenants</u> Supportive housing providers are sometimes heavy-handed with tenants who suffer from disabilities that impact their daily functionality. For example, some supportive housing landlords are quick to

¹⁴ https://www.nyc.gov/assets/nycccoc/downloads/pdf/SVA_CriteriaFactSheet.pdf

move for evictions over issues where a more appropriate response is supportive and compassionate. Other supportive housing providers move much slower toward eviction and tend to focus on providing supports and assistance rather than a threatening warning letter. We would hope that the city, in its efforts to support the housing of vulnerable people, will encourage best-practices that emphasize the 'support' in 'supportive housing.' One way to address this is to require a reasonable accommodations process for tenants.

2. <u>Create a pathway for tenants in supportive housing to file complaints with the City</u> Although tenants currently have the ability to file grievances with their supportive housing providers, there is no process for them to file reports with the city when they feel that their concerns are not appropriated addressed by the provider, or the severity of the complaint warrants them bypassing the internal reporting process. The City must establish a process for tenants to file complains in order to increase oversight and accountability.

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The Coalition for Homeless Youth

Founded in 1978 as the Empire State Coalition of Youth and Family Services, The Coalition for Homeless Youth (CHY) is a consortium of 65 agencies whose mission is, as a membership organization, to use its collective voice to promote the safety, health, and future of runaway, homeless and street involved youth through advocacy, authentic collaboration with youth and young adults (YYA) with lived expertise and training and technical assistance.

CHY is primarily an advocacy organization, leveraging the expertise and experience of its membership as well as YYA with the lived experience of homelessness to shape the landscape for runaway and homeless youth across New York State. This is achieved by increasing public awareness, coalition building, policy work and public advocacy campaigns for pertinent legislation and funding. Notably, in 2015, CHY was instrumental in the advocacy efforts that resulted in the doubling of the State budget for runaway and homeless youth services. CHY's advocacy also contributed to the development of NYS statutory and regulatory changes that became effective in 2018, permitting localities across the State to extend length of stay and increase age of youth served by RHY programs in their communities. Most recently, we passed state legislation this session that will grant decisionally capable runaway and homeless minors the ability to consent to their own health care, including gender-affirming care. As well as NYC legislation that we maintain gives both homeless youth and youth aging out of foster care access to city-sponsored housing vouchers.

An additional area of focus for CHY is the strengthening of service delivery for runaway and homeless youth, primarily through the provision of specialized trainings and technical support. Until 2019, CHY held the state contract to provide annual web-based trainings, on diverse topic areas, to providers across the state, reaching hundreds of professionals working with homeless and runaway youth. Since 2019, CHY has continued to provide training and technical assistance on a smaller scale due to funding restrictions; however, resuming this service remains a top priority for our membership.

Lastly, and most importantly, as a coalition and voice for a community that is often overlooked, underrepresented and under-resourced, CHY prides itself on ensuring that the majority of our staff have the lived experience of youth homelessness. Our commitment to giving power to those with lived experience is also prioritized through our support of the New York City Youth Action Board (YAB), as well as our annual Youth Advocacy Fellowship Program and new Homeless Youth Peer Navigation Pilot. These initiatives not only expand the way that CHY is authentically collaborating with YYA who have the lived experience of homelessness, but it also awards us the ability to work together with YYA, to give them the tools and supports needed so that they can effectively create change.

SHOUT	S.A.F.E. CAMPAIGN DEMANDS
1	STOP CONTRACTING WITH BAD ACTORS WHO REPEATEDLY BREAK NYC AND NYS HOUSING AND HUMAN RIGHTS LAWS.
2	ENFORCE THE SUPPORTIVE HOUSING GUIDELINES AS BINDING REQUIREMENTS IN ALL NYC/NYS SUPPORTIVE HOUSING.
3	CREATE A MEANINGFUL GRIEVANCE PROCESS FOR SUPPORTIVE HOUSING, INCLUDING WRITTEN RECORDS, COMPLAINT TRACKING, TENANT INCLUSION IN ALL STEPS OF THE PROCESS, AND RETALIATION PROTECTIONS.
4	HIRE ADEQUATE STAFF TO INVESTIGATE TENANT COMPLAINTS AND OVERSEE QUALITY OF HOUSING/SERVICES IN CONTRACTED SUPPORTIVE HOUSING (NOT JUST ONCE EVERY 3 YEARS!)
5	CREATE A "LANDING PAGE" WHERE TENANTS CAN ACCESS INFORMATION ABOUT THEIR HOUSING RIGHTS AND HOW TO FILE A COMPLAINT WHEN THOSE RIGHTS ARE VIOLATED.
6	CREATE PATHWAYS TO EXIT SUPPORTIVE HOUSING FOR TENANTS WHO NO LONGER REQUIRE ONGOING SERVICES BUT STILL REQUIRE A RENT SUBSIDY.
7	CREATE PATHWAYSTO TRANSFER SUPPORTIVE HOUSING PROGRAMS/PROVIDERS WHEN NECESSARY TO ACCOMMODATE FAMILY GROWTH OR OTHER LIFE CHANGES.
в	CONDUCT MANDATORY ANNUAL REVIEW OF ALL PROGRAM DOCUMENTS TO ENSURE THEY COMPLY WITH THE OMH SUPPORTIVE HOUSING GUIDELINES, CONTRACTUAL OBLIGATIONS AND NYS/NYC HOUSING LAWS.
е	REQUIRE PROVIDERS TO CERTIFY ANNUALLY THAT ALL UNITS ARE FREE OF OPEN HOUSING CODE VIOLATIONS AND/OR PROVIDE A CORRECTIVE ACTION PLAN FOR RESOLVING ANY OPEN VIOLATIONS WITH A TIMELINE FOR RESOLUTION.
10	CREATE MANDATORY PRE-DISCHARGE AND PRE-EVICTION REQUIREMENTS, INCLUDING REQUIRED NOTICE TO OMH/DOHMH PRIOR TO COMMENCING ANY EVICTION PROCEEDING. BEGIN TRACKING ALL EVICTIONS AND EXITS FROM SUPPORTIVE HOUSING.

דטנ	S.A.F.E. CAMPAIGN DEMANDS
5	SUPPORTIVE HOUSING PROVIDERS MUST
1	END DISCRIMONATORY REJECTIONS FROM SUPPORTIVE HOUSING APPLICANTS ON THE BASIS OF DISABILITY, LANGUAGE, RACE, GENDER AND SEXUAL ORIENTATION.
2	PROVIDE HIGH-QUALITY REPAIRS AND SERVICES IN ALL SUPPORTIVE HOUSING.
3	STOP RENTING FROM KNOWN SLUMLORDS AND TAKE LEGAL ACTION TO FORCE NEGLIGENT LANDLORDS TO PROVIDE REPAIRS AND SERVICES.
4	STOP EVICTING SUPPORTIVE HOUSING TENANTS. INSTEAD, SUPPORT TENANTS TO RESOLVE ANY ISSUES AND MAINTAIN THEIR HOUSING.
5	STOP RELYING ON SHARED/ROOMMATE HOUSING AS A COST- CUTTING MEASURE, ESPECIALLY WHEN SHARED HOUSING IS A BARRIER TO TENANT SAFETY, STABILITY, & RECOVERY.
6	INSTEAD, ENSURE THAT ALL SUPPORTIVE HOUSING TENANTS HAVE ACCESS TO STABLE AND SAFE HOUSING THAT MEETS THEIR HEALTH AND MENTAL HEALTH NEEDS.
7	RESPECT TENANTS' PRIVACY AND PERSONAL SPACE, INCLUDING NOT ENTERING UNITS, HOLDING/READING MAIL, OR SHARING PRIVATE INFORMATION WITHOUT CONSENT.
8	MEET TENANTS' NEEDS & REQUESTS FOR SOCIAL SERVICES AND SUPPORTS, NOT JUST THE MINIMUM REQUIRED BY AGENCY CONTRACTS, INCLUDING MEANINGFUL REFERRALS TO HIGH-QUALITY SOCIAL SERVICES, HEALTH AND MENTAL HEALTH PROVIDERS.
9	PROVIDE TENANTS WITH CLEAR INFORMATION AS TO THEIR SUPPORTIVE HOUSING & HOW TO REPORT ISSUES WITH REPAIRS AND SERVICES, INCLUDING COPIES OF ALL RELEVANT LEGAL DOCUMENTS
	NOTHING ABOUT US WITHOUT US! SUPPORTIVE HOUSING

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AGENCIES SHOULD NOT ENTER INTO DEALS WITH LANDLORDS WITHOUT INCLUDING TENANTS IN THE DECISIONS.



THE LEGAL AID SOCIETY

Testimony of

Coalition for the Homeless

and

The Legal Aid Society

on

Intro No. 1153

presented before

New York City Council Committees on General Welfare; Housing and Buildings; Mental Health, Disabilities and Addiction; and Veterans

> Will Watts Deputy Executive Director for Advocacy Coalition for the Homeless

> > December 7, 2023

Coalition for the Homeless, 129 Fulton Street, New York NY 10038 <u>www.coalitionforthehomeless.org</u> 212-776-2000 The Legal Aid Society, 199 Water Street, New York NY 10038 <u>www.legal-aid.org</u> 212-577-3300 The Coalition for the Homeless and The Legal Aid Society welcome this opportunity to testify before the New York City Council's Committees on General Welfare, Housing and Buildings, Mental Health, Disabilities and Addiction, and Veterans. As 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, we are uniquely situated to provide insight about the City's removals of unhoused individuals.

Encampment Sweeps

For more than 40 years, the right to shelter has served as the bedrock of New York City's response to mass homelessness, keeping our city from witnessing the emergence of the vast tent encampments seen in so many other major American cities. However, for several years there have been reported increases in street homelessness in New York City, despite the difficulty of ascertaining accurate estimates of this population.¹ The Adams administration seized this opportunity to increase the removal of encampments and unsheltered individuals from public spaces, sometimes involuntarily detaining people for mental health evaluation.

Sweeps negatively impact those who are unhoused and only serve to disperse and traumatize them without providing the critical resources they need to transition into a more stable housing situation. Earlier this year, the Comptroller's Office confirmed that sweeps do not result in unhoused individuals achieving stability (in shelter or housing). The report notes that, of the 2,308 people forcibly removed in NYC during an 8-month period, only 47 remained in shelter months later and only 3 secured permanent housing.² In addition, people resumed sleeping at 31% of the 99 cleared encampment sites surveyed.³ If less than 1% of those subject to sweeps achieved a positive housing outcome and nearly a third of the encampments swept reappeared, it is apparent that the sweeps policy is grossly ineffective at addressing street homelessness.

Beyond ineffectiveness as a policy matter, such removals negatively impact the health and wellbeing of impacted individuals. On numerous occasions, sweeps involve the confiscation or destruction of medications, tents and other personal effects that are critical to health and protection from the elements. Even when conducted in a manner that does not violate constitutional protections, such deprivation of property without the means to easily replace or safely store such items subjects unhoused people to greater risk of harm and increased need to utilize emergency rooms for care. Further, as set forth in a study⁴ published earlier this year examining the impact of sweeps in New York and other cities, sweeps will "result in a significant increase in morbidity, mortality and a shortened life expectancy. . . contributing to 15-25% of

² CITY OF N.Y. OFFICE OF THE COMPTROLLER, AUDIT OF THE DEPARTMENT OF HOMELESS SERVICES' ROLE IN THE "CLEANUPS" OF HOMELESS ENCAMPMENTS – ME23-059A (2023).

¹ Josephine Stratman, *Street Homelessness in NYC Jumps 17% Despite Eric Adams' Efforts to Get People Off The Streets*, N.Y. DAILY NEWS, July 5, 2023, <u>https://www.nydailynews.com/2023/07/05/street-homelessness-in-nyc-jumps-17-despite-eric-adams-efforts-to-get-people-off-the-streets/?clearUserState=true</u>.

³ Id.

⁴ Joshua A. Barocas, MD et. al., *Population-Level Health Effects of Involuntary Displacement of People Experiencing Unsheltered Homelessness Who Inject Drugs in US Cities*, in 329(17) JAMA 1478–1486 (2023).

deaths among the unsheltered population over 10 years."⁵ Clearly, the Adams administration is wrong to suggest this policy is a "humane" and "compassionate"⁶ way to address street homeless.

In addition, when such sweeps are conducted by law enforcement, the result is simply the criminalization of homelessness, compounded trauma and increased distrust in the institutions tasked with protecting New Yorkers. Just this week, unsheltered individuals in the East Village reported being assaulted and arrested by NYPD in connection with sweeps, some of which allegedly occurred without prior notice.⁷

Accordingly, encampment sweeps and involuntary detention should cease and be replaced with policies that accord people the dignity to which they are entitled and the housing that they need. These include:

- Connecting individuals to more low-barrier shelters and permanent housing, resources that unhoused people want and will use;
- Opening at least 3,000 new Safe Haven and stabilization beds in single-occupancy rooms and offer them to all unsheltered homeless individuals, with a focus on expanding the number of these facilities for women and transgender or gender-non-conforming individuals;
- Creating more affordable permanent housing and more supportive housing;
- Increasing drop-in center capacity citywide;
- Reopening all inpatient psychiatric unit beds that had been diverted to COVID-19 care, and assuring that all admissions, whether for observation or inpatient care, include full care management and discharge planning services. Expand access to low-barrier physical and mental health care, including virtual care and street medicine;
- Improving shelter conditions, including density, to make shelters a more desirable alternative to sleeping rough on the streets and in other public places; and
- Prohibiting NYPD from responding to 311 calls requesting assistance for homeless individuals and removing NYPD from all homeless outreach functions. Calls to 311 should only result in the deployment of properly trained DHS contracted outreach workers.

Intro 1153

This local law is necessary for oversight of an activity that we believe is patently inhumane and the wrong approach to addressing mass homelessness. To the extent such efforts occur, it is critical that we understand the manner in which they are conducted, the impact on the people we

⁵ NAT'L HEALTH CARE FOR THE HOMELESS COUNCIL, *Study Shows Involuntary Displacement of People Experiencing Homelessness May Cause Significant Spikes in Mortality, Overdoses and Hospitalizations*, (Apr. 10, 2023), https://nhchc.org/media/press-releases/study-shows-involuntary-displacement-of-people-experiencing-homelessness-may-cause-significant-spikes-in-mortality-overdoses-and-

 $[\]frac{hospitalizations/\#:\sim:text=Today\%20 the\%20 Journal\%20 of\%20 the\%20 American\%20 Medical\%20 Association, opioid\%20 use\%20 disorder\%20\%28 along\%20 with\%20 other\%20 detrimental\%20 impacts\%29.$

⁶ Transcript: Mayor Eric Adams Makes a Social Services Related Announcement (Mar. 30, 2022), *available at* <u>https://www.nyc.gov/office-of-the-mayor/news/169-22/transcript-mayor-eric-adams-makes-social-services-related-announcement</u>.

⁷ Dean Moses, '*Please Leave Us Alone': East Village Homeless Say Surprise Encampment Sweeps Are Becoming More Violent*, AMNY The Villager, Dec. 5, 2023, <u>https://www.amny.com/news/east-village-homeless-encampment-sweeps-violent/</u>.

serve, and the cost allocated to such efforts. Accordingly, we support this measure and would encourage the Council to consider expanding the effort in the following key ways:

- <u>Revise Definition of "Removal"</u>: Reports should not be limited to documenting personal property that provides shelter or a means to rest. Unhoused individuals often possess documents, medications and other personal effects that should be considered part of the personal property identified by the term "removal." As currently drafted, the enumerated list could be construed as a limitation on the types of personal property triggering this reporting requirement.
- <u>Include Non-Personally Identifiable Demographic Information</u>: Critical to oversight of the sweeps being conducted is understanding who is involved and the resources being offered to them. As such, the data on individuals affected by each sweep should be disaggregated by race, gender identity, age, sexual identity and disability status. To alleviate any possibility of personally identifying individuals, this disaggregation could be required only in instances where more than one individual is involved in the removal.
- <u>Include Information Regarding Storage</u>: Current law and DHS procedure provide that the City will offer up to 90 days storage of certain personal property that individuals are unable to take with them in connection with a removal.⁸ However, the proposed bill does not require reporting of whether individuals utilized temporary storage following a sweep, the various costs related to such or whether the individuals involved were offered information about applying for storage grants provided by the Human Resources Administration for any storage needs beyond this initial 90 day period.⁹ These items should be included in the report.

With these additions, the data provided by this bill will allow us to once again demonstrate the ineffectiveness of sweeps. In addition, it will highlight that the financial and human cost of removals far outweigh the costs of investing in other solutions such as those outlined above.

About The Legal Aid Society and Coalition for the Homeless

The Legal Aid Society: The Legal Aid Society ("LAS"), the nation's oldest and largest not-forprofit 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.

The Legal Aid Society 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, LAS provides

⁸ DHS Encampments & Cleanups Procedure, DHS-PB-2022-009 (Aug. 12, 2022).

⁹ HRA Payments to Applicants/Participants for Storage of Furniture and Personal Belongings (Storage Fees), Policy Directive #23-03-OPE (Mar. 2, 2023).

comprehensive legal services in all five boroughs of New York City for clients who cannot afford to pay for private counsel.

LAS'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 LAS's Pro Bono program. With its annual caseload of more than 300,000 legal matters, The Legal Aid Society 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.

The Legal Aid Society'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 300,000 individual cases and legal matters, LAS's law reform representation for clients benefits more than 1.7 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.

The Legal Aid Society is uniquely positioned to speak on issues of law and policy as they relate to homeless New Yorkers. The Legal Aid Society is counsel to the Coalition for the Homeless and for homeless women and men in the *Callahan* and *Eldredge* cases. The Legal Aid Society is also counsel in the *McCain/Boston* litigation in which a final judgment requires the provision of lawful shelter to homeless families. LAS, 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 for the Homeless 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, The Legal Aid Society along with Coalition for the Homeless 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 for the Homeless, 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 mass 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 unhoused 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,

which usually distributes 800 to 1,000 nutritious hot meals each night to homeless and hungry New Yorkers on the streets of Manhattan and the Bronx, had to increase our meal production and distribution by as much as 40 percent and has distributed PPE and emergency supplies during the COVID-19 pandemic. 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 monitor of municipal shelters for homeless single adults, and the City has also authorized the Coalition to monitor other facilities 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 The Legal Aid Society 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 has worked with The Legal Aid Society 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

Coalition for Homeless Youth

on

Oversight: Supportive Housing in New York City

Submitted to

The New York City Council Committees on General Welfare, Mental Health, Disabilities and Addiction and Veterans

By

Zaqanah Stephens Youth Advocacy Fellow Coalition for Homeless Youth

December 7, 2023

I write you today as a passionate advocate and someone with lived experience in the shelter system to address the critical issues affecting the supportive housing in our city. Having navigated the challenges of homelessness firsthand, I understand the profound impact that supportive housing can have on individuals seeking stability and a place to call home.

I firmly believe in the Housing First¹ model, recognizing its potential to reduce the mental and physical toll of homelessness while also delivering cost-effective solutions for our city. However, it is disheartening to observe that the current operation of supportive housing falls short of its intended goals.

I echo my support for the recommendations put forth by SHOUT, urging the City Council to heed the calls from our communities and enact essential changes to this system. It is imperative that the supportive housing framework embraces a Housing First model, which includes addressing discriminatory rejections and ensuring tenants are aware of their rights.

Supportive housing, built on the principles of the Housing First model, not only fosters stability for individuals but also yields fiscal benefits for the city. By redirecting individuals from hospitals, jails, or other costly shelters into their homes, we create a safer environment with access to necessary resources, promoting permanent housing solutions.

Turning our back on supportive housing will have tangible costs for our city. Therefore, it is crucial that we explore ways to protect, empower, and support our citizens, allowing them to grow and sustain their autonomy as contributing members of the community.

I would like to specifically emphasize the following SHOUT recommendations, as crucial if NYC truly wants to improve our Permanent Supportive Housing system:

- 1. Supportive housing agencies should make decisions involving landlords in collaboration with tenants.
- 2. Put an end to discriminatory rejections based on disability, language, race, gender, and sexual orientation among supportive housing applicants.
- 3. Ensure the provision of high-quality repairs and services across all supportive housing facilities.
- 4. Adopt a supportive approach to tenants facing challenges, offering assistance to resolve issues and maintain their housing instead of resorting to eviction.
- 5. Provide tenants with clear information about supportive housing and the reporting process for issues related to repairs and services, including copies of all relevant legal documents.
- 6. Establish mandatory pre-discharge and pre-eviction requirements, including required notice to OMH/DOMH before commencing any eviction proceeding. Begin tracking all evictions and exits from supportive housing.

I sincerely hope that this testimony resonates with the committee, and I trust that together, we can work towards creating a more compassionate and effective supportive housing system for the well-being of our city's residents.

Thank you for your time and consideration.

¹ Understanding & Implementing The Housing First Model, August 13, 2019,

https://joinpdx.org/understanding-implementing-the-housing-first-model/?gclid=Cj0KCQiA67CrBhC1ARIsACKAa8Smv041WJmv0gjV3pc_GY MTREEYuDIFoGyeglDdm31-bgKzV8q6MqUaAhL_EALw_wcB



Testimony Before the New York City Council Committee on General Welfare jointly with the Committee on Mental Health, Disabilities and Addiction and the Committee on Veterans

December 7, 2023

Presented by: Cal Hedigan, Chief Executive Officer Community Access, Inc. chedigan@communityaccess.org

Community Access expands opportunities for people living with mental health concerns to recover from trauma and discrimination through affordable housing, training, advocacy, and healing-focused services. We are built upon the simple truth that people are experts in their own lives.

www.communityaccess.org

Thank you to Chairs Ayala, Lee, and Holden, and the rest of the General Welfare, Mental Health, Disabilities and Addiction, and Veterans Committees, for convening this important oversight hearing regarding supportive housing in New York City. I appreciate the opportunity to testify on behalf of Community Access.

I am fortunate to serve as the CEO of Community Access, a leading provider of supportive and affordable housing in New York City and a tireless advocate for mental health supports that are rooted in human dignity and human rights. Each day, I work alongside a team of more than 350 people who devote time and care towards connecting thousands of people living with mental health concerns with the housing, education, and healing-focused services they need to move forward with their lives. I've seen firsthand the transformative nature of accessible, voluntary, community-based resources.

I testify before you today regarding issues that are facing supportive housing in New York City. Overall, Community Access supports accelerated development of permanent supportive and affordable housing as the only way to address the city's ongoing housing crisis. We stand ready to partner with the City and the State to advance New York's vision of a home for every New Yorker.

To get there, firstly our city must move on from the idea of a right to shelter to the understanding of housing as a fundamental human right – and a vital driver of individual physical and mental health – and we must establish policies and budget priorities that support that understanding.

Critically, we join nonprofits across the board as well as membership organizations – Human Services Council, Nonprofit New York and New York Housing Conference – in urging the City Council to oppose Mayor Adams' hiring freeze and the remaining 10% of his 15% PEGS. Critical housing and homelessness-related agencies on which New Yorkers across the five boroughs depend – including HPD, DHS, HRA, DOB, DCP, and DOHMH – are already seriously under-staffed and under-resourced, creating delays in building and filling desperately needed housing. This cannot continue. They must be insulated from the Mayor's fiscal austerity measures.

As the City moves closer to adopting a low-threshold, Housing First approach to ending homelessness, it must dig deeper to eliminate even more barriers to accessing housing. Right now, there are too many bureaucratic obstacles because of the need to establish eligibility – from homelessness to mental health disability, to living in poverty and being without resources. We must find ways to decrease the amount of documentation that people who are unhoused need to provide during the application process, so that they can access stable housing more immediately and reduce the ongoing trauma of being unhoused. Housing is the foundation for personal safety and well-being, and we need to do more to ensure it is readily accessible when people need it.

In looking at the existing NYC 15/15 program to create 15,000 desperately needed supportive

Housing units while simultaneously ensuring we do not lose a single existing unit, New York City must rethink the original initiative and its unawarded 6,200 scattered site units. The City should adopt the Supportive Housing Network of New York's reallocation plan and institute the following measures:

• Reallocate a majority of the 6,220 unawarded scattered site units into more congregate

supportive housing, preservation of first-generation supportive housing, and affordable housing overlay units.

• Launch a new Supportive Housing Preservation program that merges capital subsidies with NYC 15/15 service and operating subsidies. The maintenance and operating needs of legacy supportive housing programs cannot be overstated. Many of these projects are 30+ years old and in desperate need of funding to address repair and replacement needs of aging buildings and equipment. Today's economic climate, elevated pricing for goods and services, in addition to the mounting rental arrears crisis and revenue reductions are creating a perfect storm that threatens the viability of thousands of supportive and affordable housing units across the city. As we build, we must preserve.

Next, I'd like to call attention to the needs of the people who provide the support in supportive housing. Workers within supportive housing, predominantly BIPOC women, have historically been inadequately compensated for their critical labor. Often wage increases have come at the cost of staff lines as funding has often been stagnant from year to year. And while DOHMH recently made significant increases in their contracts, immense challenges remain. This is difficult work that is made more difficult by high turnover and prolonged vacancies, creating ongoing strains on human resources and impacting service delivery.

Additionally, our city contracts are structured in such a way that we are not able to create enough opportunities for people to stay in direct service work and have their compensation increase based on their depth of experience. As workers come and go, tenants are called upon to build new relationships repeatedly. If justice and equity are a priority for this City Council, then legislators must begin with wage equity for this workforce, so that we can create conditions of stability and tenure in supportive housing and not subject tenants to a revolving door of workers.

Community Access is a staunch supporter of the #JustPay campaign, which calls on the city to:

- Establish an automatic annual cost-of-living adjustment (COLA) of 3.2% for Fiscal Year 2024-2025.
- Make a public commitment of funding for the next three years for a 3% COLA each year.
- Pass prevailing wage legislation to lift human services salaries.

I cannot overstate the importance of investing in this sector to enable providers like us to recruit and retain staff to do this critical work. This must be a budget priority in 2024. In addition, the City must work with the State on a comprehensive, multi-year human services workforce plan to address wages and incentives, recruitment, skills, career pathways, and support, including but not limited to: creating skill enhancement programs, designing robust recruitment strategies, developing career ladders, and providing ongoing personnel support.

The needs within supportive housing have changed over time, but the model has not. We must re-examine assumptions from the early days of supportive housing – rethinking the 60/40 supportive/affordable unit ratio with an eye to greater community integration and moving beyond the "case management" model and incorporating more disciplines within supportive housing staffing patterns.

Many tenants who enter supportive housing come with complex physical and mental health needs, including hypertension and cardiovascular disease, diabetes, and other chronic illnesses as well as unaddressed mental health and substance use issues. Many are disconnected from care and have a mistrust of providers – rooted in decades of discrimination and substandard care. It is critical that we be able to support tenants who are disconnected from care and those who have complex needs. Supportive housing providers need to be able to bring resources to people where they are, in their home – and to do that we need access to inter-disciplinary teams that we can deploy flexibly within our portfolio. These teams might include a variety of disciplines – such as nursing, harm reduction, occupational therapy, peers, social workers, and prescribers. To realize this vision, we need additional funding.

I'd like to leave you with some first-hand testimonies from our supportive housing tenants. A tenant at our Avenue D building said that supportive housing, "has balanced and redirected [her] life to a positive constructive place and has given the strong necessary skills [she needs] in the next chapter in [her] life no matter where it may be," and that she'll be ready thanks to the help and knowledge received in supportive housing. Another tenant said that, "living in supported housing has enabled [her] to pursue interests and grow steadily healthier in an atmosphere that cannot compare to anything else.

I thank you for the opportunity to submit testimony on behalf of Community Access and to your attention to the needs within supportive housing. I look forward to working with Chairs Ayala, Lee, and Holden and the other members of these committees, as well as our agency partners, to advance community-based service options and ensure providers citywide have the resources they need to offer the support our communities rely on.

If you and your staff have any questions, or if Community Access can offer direct support to residents in your districts, please reach out to me at chedigan@communityaccess.org or 212-780-1400, ext. 7709.

FORTHERECORD

For more information please email: jrosenthal@communityaccess.org

Good afternoon,

Thank you to Chairs Ayala, Lee, and Holden, and the rest of the Committees, for convening this important oversight hearing regarding supportive housing.

My name is Jordyn Rosenthal and I am the Advocacy Coordinator of Community Access, one of the most person-centered supportive housing and mental health agencies in the City. I am here on behalf of our organization but I ask you to review our full testimony from our CEO Cal Hedigan. Today, I will focus on two key areas that must be addressed regarding issues facing the supportive housing community in New York City: housing first as a solution to homelessness and staffing.

First, we need to move away from the idea of a "right to shelter" and towards the idea that housing is a fundamental human right and establish policies and budget priorities that support that understanding. This looks like fighting the PEG cuts that will further diminish any progress we make. We need to increase funds to accelerate the development and operation of supportive and affordable housing and reduce funds dedicated to shelter over time. The city needs to fully embrace Housing First as the solution to the homeless crisis we face. There are too many barriers in place to rapidly access housing from not having a low enough threshold for entry including the requirement to document eligibility in cumbersome, time consuming ways. By reducing the amount of documentation we require people to provide, we can house people more immediately and reduce the ongoing trauma of being unhoused.

Second, I'd like to call attention to the high staff vacancy and turnover rates which negatively impact our community and are a direct result of poorly funded city contracts. As workers cycle through our buildings, tenants are required to repeatedly build new relationships which tends to be retraumatizing. If justice and equity are a priority for this City Council, then legislators must begin with wage equity. At a minimum - an annual COLA must be funded for human service workers, beginning with a 3.5% COLA for FY 24/25. Every day, supportive housing is making a difference in the lives of these and countless others, and we need to focus on what else we can do to improve supportive housing and provide even more homes to New Yorkers who need them.

Thank you for the opportunity to testify, and we look forward to working with the City Council to create a more just, and equitable supportive housing system for New York.





New York City Council Committees on Veterans, General Welfare, Mental Health, Disabilities and Addiction December 7, 2023 Submitted by: Julia Pinover Kupiec, Chief Public Policy Officer and Bridget McBrien, Government Relations Director

Thank you for holding an oversight hearing on supportive housing and the opportunity to testify.

The Jewish Board for Family and Children's Services (JBFCS) joins our colleague providers in urging the City Council to address intensifying service needs in supportive housing; supporting the supportive housing workforce; and expanding supportive housing opportunities for those leaving jail or prison and survivors of domestic violence.

I. <u>The High Client Vacancy Rates in Supportive Housing Programs are</u> <u>Unacceptable in Light of the High Numbers of Persons Experiencing Street</u> <u>Homelessness who have a Serious Mental Illness.</u>

The need for supportive housing in New York City is clear. Yet, as of November 2023, JBFCS had 101 vacant units in our system of 1,200. JBFCS is attempting to fill these beds as quickly as possible but, it is not easy. Filling these beds should not be challenging. Why, then, aren't we closer to 100% utilization? The issue lies in City processes which are in desperate need of reform. The main issue is that the City's referral system is slow, cumbersome, and ineffective. We urge the City to take a hard look at the system, and take steps to reform it so that non-profits throughout the city can get people the help they need.

a. Overview of How People Enter Supportive Housing & SPOA

People living with behavioral health challenges are connected to supportive housing in a multitude of ways. Since 2003, the Single Point of Access (SPOA) has been the centralized database to connect eligible applicants with appropriate vacancies in the mental health housing system throughout New York. An applicant may be eligible for SPOA if they have a serious mental illness, are being discharged from other types of behavioral health institutions and are at risk of homelessness. Center for Urban Community Services (CUCS) is contracted to provide administrative support for the NYC SPOA Housing program. Using an extensive database that tracks housing vacancies and services offered by housing providers, CUCS assists individuals and their referring workers in locating a program that most closely meets applicant's needs and preferences. CUCS' team of Housing Consultants reviews each HRA Housing application, consults with the referring worker, and then uses the housing database to generate three housing referrals for each applicant. CUCS also tracks and reports placement information to the NYS Office of Mental Health. In addition, CUCS provides training for referral sources and participates in SPOA case planning meetings.

Referral sources can request a specific residence or make referrals outside the SPOA process. For individuals who are eligible for the Single Point of Access Program, referral sources submit the complete HRA 2010e application packet along with the HRA approval letter to CUCS. SPOA applicants are guaranteed three interviews. The process of determining which housing programs best match an applicant's needs is collaborative and incorporates individual preferences and referral source recommendations. By centralizing and standardizing the process, SPOA is intended to make referrals more efficient and expedient.

Coordinated Entry is a requirement for all Continuum of Cares (CoC) nationwide to streamline the way people move from homelessness into permanent housing, ensuring the most vulnerable are prioritized for scarce resources. It requires each CoC to look at their system, rather than program by program.

b. <u>The Coordinated Assessment and Placement System (CAPS)</u>

In NYC, the CoC developed the Coordinated Assessment and Placement System, or CAPS. CAPS development is an iterative process, relying on the existing network of advocates, shelters, drop-in centers, street outreach teams, housing providers, government agencies, tenants of CoC-funded housing.

The NYC Human Resources Administration launched the new CAPS system in October 2020. CAPS is the re-design of the PACT system to better incorporate the HUD requirements for coordinated entry in NYC. CAPS is a web-based platform that contains the Coordinated Assessment Survey, the NYC Supportive Housing Application, and the Vacancy Control System. Features of the CAPS system include:

- Four Referral Entities use CAPS to make referrals. These are the NYC Administration for Children's Services (ACS), NYC Human Resources Administration HIV/AIDS Services Administration (HRA HASA), NYC Human Resources Administration Office of Affordable and Supportive Housing (HRA OSAHS), and the State Office of Mental Health/Center for Urban Community Services (SOMH/CUCS).
 - NYC HRA OSAHS is the primary referral entity for households in the DHS shelter system or engaged with street outreach teams.
- SOMH/CUCS, which was added to CAPS as a referral entity on 7/1/2022, is the primary referral entity for clients eligible for SMI Singles, ESSHI MH, state-funded NY/NY I & II, NY/NY III Pop B, and NY/NY III Pop C.
- CAPS tracks 33K units of supportive housing. There is an estimated 37K units of supportive housing in operation in NYC and there is a continuous effort to add more units to CAPS.
- Supportive Housing providers can also make internal referrals for their units in specific cases.
- Currently, there is no mandate or operational support for all referrals to be made through CAPS. Therefore, many supportive housing providers conduct an intake of eligible individuals and families through direct referrals that are not captured in CAPS.
- In 2023, CAPS was updated to include new technical features, including a Request a Referral module for re-rental activity, features to enable Homeless service staff to

confirm in CAPS whether a client will attend an apartment viewing, and enable Supportive Housing providers renting up new buildings to set up interview slots in bulk.

• All referrals for OMH housing are requested by completing a SPOA Referral Request PDF form and submitting these requests through CUCS. CUCS then sends the referrals through CAPS.

c. <u>The High Vacancy Rate Does Not Align with the Present Need for Services.</u>

Numerous supportive housing providers around New York City are reporting immediate openings of supportive housing units where a client would share with one or two other people. These openings are being reported in all five boroughs of the City. Housing models reporting these vacancies are primarily for Apartment Treatment Programs and Scatter Site programs. Apartment Treatment programs are OMH-licensed, level II housing with more frequent, intensive services attached while Scatter Site programs are unlicensed Community-Care level housing for those with more independent living skills and are further along in their recovery. Appropriate placement into the five different types of supportive housing may depend on the individuals' prior residence, history of homelessness/institutionalization, or status as an active SSI/SSDI recipient. Other types of unlicensed housing, primarily Scattered Site housing, may be funded by NYC DOHMH contracts, HUD contracts, and follow HRA regulations. All referrals for OMH housing are requested by completing an SPOA Referral Request PDF form and submitting these requests through CUCS. CUCS then sends the referrals through CAPS.

HRA created the CAPS system to simplify the process of maintaining bed rosters and tracking referrals. This goal is necessary and important to meet the vast needs of people seeking supportive housing, but **both technical challenges and long-standing system wide issues have made realizing swift placement into appropriate housing more difficult in the past year.**

Providers have summarized issues working within the CAPS system as:

1. For SPOA referrals, there are severe delays in receiving and responding to referrals that are appropriate for the level of housing.

2. For CAPS referrals, most of the referrals do not attend scheduled interviews and the requirements concerning timeframes further delay re-scheduling or offering the opportunity to other prospective individuals.

3. Prospective tenants are increasingly rejecting shared apartments. Providers have been constrained by NYC rental markets and limited funding streams in being able to offer single-roomed apartments.

Colleague providers of supportive housing report recent examples of these issues:

- "Regarding the no-shows for the CAPS referrals, we can only request referrals one at a time for each unit. Once we request the referrals, they schedule the interviews for 7-10 business days after the request. If they are all no-show, then we have to submit a referral request again and then wait another 7-10 business days for the next interviews."
- "We requested referrals on 10/2/23, interviews were scheduled for 10/13/23 and they were all no-shows. We request referrals on 10/13/23, interviews are scheduled for 10/27/23. So, it can

easily go on a couple of months of us requesting referrals for 1 unit, and no one gets accepted."

• "We have had several intakes who are not eligible (from not meeting chronically homeless status). We notify in advance that the individuals are not deemed eligible but cannot take them off the schedule. We have been informed that we need to continue with interviews."

d. Egregious Examples of the Systemic Failure of these Referral Systems

One provider received 45 referrals in the CAPS system between 8/1/23-10/30/23. 9 people in need of housing accepted the placement, 20 people did not show up for the interview, 8 withdrew, 6 people rejected the apartment placement shown, and 2 clients were rejected by the provider for a listed safety concern. For three months, a supportive housing provider had 45 open beds awaiting placement, but only 9 people completed the CAPS process and were placed into housing.

The same provider also requested 132 referrals in the SPOA/CUCS process between the same timeframe, 8/1/23 - 10/30/23, but only received 43 referrals. Of these referrals, only 4 accepted the placement, 6 were considering the placement at the time of this report, and 7 clients rejected the apartment after viewing it.

Another provider requested 55 referrals from the CUCS via the CAPS system between July 1, 2023- November 14, 2023. They received 55 referrals – a 100% success rate! However, only 5 individuals accepted the offered bed, while 10 others did not show up to a scheduled appointment. The median time for this provider to fill a vacant bed has grown to 197 days.

II. <u>Proposed Solutions: JBFCS urges HRA/DSS and OMH to Consider the</u> <u>Following Issues and Solutions</u>

1. When providers request interviews from CAPS, the turnaround time for new intakes is a minimum of 7 days. Many people looking for housing do not show up for interviews, and having to wait an additional amount of time for more intakes extends vacancies. *We are requesting this timeframe be significantly shortened.*

2. CUCS has advised that each housing provider will receive three referrals for every vacancy reported in the SPOA Referral Request form. This has not come to fruition for supportive housing programs. Providers are not receiving enough referrals to fill vacancies yet are being held to contract thresholds. *We are requesting that CAPS fulfill its obligations to providers by providing three referrals per vacancy reported.*

3. We are again requesting that until the CAPS system can swiftly and efficiently process the number of referrals needed to make it successful, *the system be suspended or that a hybrid system be accepted.* The failure of CAPS to provide enough referrals to agencies is not only prolonging the length of homelessness for vulnerable New Yorkers, but it is also causing a financial strain on agencies that are unable to fill vacancies. In the event that CAPS is not abandoned, we request that staff be granted access to the system more quickly. Gaining access to CAPS is presently a multi-step process that can take 1-4 weeks. For agencies experiencing a

high turnover in staff, this further delays the process as only a limited number of the staff are functionally able to work in the system.

4. We are also requesting that the logistics of these systems be updated and streamlined.

- There are several outdated systems inherent in this system. For example, if a program has multiple vacancies, an external referral form must be manually filled out and submitted via email to CUCS for each bed. CUCS then inputs the data into CAPS. Providers would like the ability to upload referral forms directly into CAPS, and even more preferable, they would like forms to be able to be auto generated by the data in the system, and they would like a simple one click request button to be enabled (as it is presently grayed out for non-profit providers).
- Another example of an outdated system is the SPOA Housing Referral Request form which is a PDF form utilized by OMH-licensed supportive housing programs to request referrals for vacancies listed in CAPS. The PDF form is external to CAPS and contains 16 fields under 4 categories: Site and unit Information; Contract and regulatory Agreement Information; Building/Unit Setup; and Interview Contact Information. Depending on variations in vacancy numbers, unit details, and contractual information, multiple referral request forms are often required to be submitted for a single program. Completed SPOA Referral Request forms are e-mailed and processed by CUCS before new SPOA referrals are screened and added into CAPS by CUCS.
- Yet another example of an outdated technical flaw with this system is that if a client is a no-show to an interview, the no-show is reported to CAPS. This closes out the referral, and providers must request a re-referral manually, creating more work for providers. Conversely, if the housing provider opts not to input the outcome as a no-show to keep the referral open for an additional interview, the housing provider will then be out of compliance with the OMH standard of 2 days. Referrals cannot be transferred between programs; providers must manually request a referral be transferred. Notably, no-shows happen regularly given the populations of clients who are eligible for these services.
- The technology also makes the system inflexible. For example, a housing provider may determine through the course of interviewing a candidate that the candidate may be a better fit for a program different from the one to which they were referred in CAPS. The housing provider cannot move the referral from one program to another in CAPS. Instead, the housing provider must request via email that CUCS re-assign the referral to a different program.
- An agency must notify CUCS via e-mail if a referral is received directly rather than through CAPS for CUCS to send the referral through the CAPS system. This is another duplicative measure that adds additional time and effort to our workflows. Other technical issues include poor communication workflows between the provider & CUCS, multiple emails to non-designated agency contacts regarding an individual referral, and formatting redundancy for rosters.

III. Conclusion

In speaking with our government partners, we are aware of how experienced State and City staff may view these issues. They have cited further issues resulting in placement delays, namely:

- Distrust of the provider community among potential clients when interviewing for placement. Clients may also have a strong preference for a single apartment to support their recovery. Clients may also not want to be placed in a certain borough or with an inappropriate roommate and have the right to find the best placement available to them.
- Multiple admission criteria, some of which are not contractually based. Having multiple admission criteria can limit the number of viable referrals.
- Housing agencies are not pursuing HUD waivers for some admission criteria and may be able to accept more individuals with increased flexibility around admissions.

New York City is living through both a housing and behavioral health crisis. The need to match eligible individuals with appropriate supportive housing beds must be one of the chief concerns of government. As one of the largest supportive housing providers with decades of experience, The Jewish Board calls upon our government partners to address the stated concerns and assist in alleviating delays in both the CAPS and SPOA referral systems. We are grateful that both Governor Hochul's and Mayor Adams' administrations have invested in supportive housing with increased funding. We believe that together, we can address some of the technical challenges present in the referral systems and meet the needs of individuals living with serious mental illness. We urge action that is effective and immediate.

Testimony of Laureena Novotnak, Esq.,

Before the New York City Council Committee on General Welfare Oversight Hearing on New York City Supportive Housing

December 7, 2023

My name is Laureena Novotnak, and I am a senior staff attorney with Mental Hygiene Legal Service in the Appellate Division 1st Department. I am also an active ally-advocate with SHOUT, the supportive housing tenants' association, and I became involved through my previous work as a tenant's attorney. However, the views expressed today are entirely my own, and come from my observations representing patients in New York City's psychiatric hospital units. Specifically, I came to report on the role that supportive housing providers can sometimes play in delaying or even preventing safe discharge of my clients.

All hospital patients, including those receiving mental health treatment, are entitled by law to appropriate discharge planning that prepares for their return to the community.¹ Discharge planning is the responsibility of the hospital, ensuring that continuing health services have been secured, where necessary, before releasing a patient from their care.² When patients are tenants in supportive housing units, that planning can reasonably include conversations with supportive housing providers about meeting a tenant's needs after hospitalization.³

However, I and my colleagues have observed supportive housing providers obstructing patient's discharge by delaying or denying the acceptance of psychiatric patients back into their residences, even after those patients have been medically cleared by their hospital providers. Patients who do not wish to have their supportive housing providers involved in their discharge planning, as is generally their right under law,⁴ have been told they risk losing their housing altogether if they do not cooperate.

In one notable example, a Bronx client was discharged from a psychiatric unit and returned home to her supportive housing residence, only to find that her provider refused to let her into the building or return her key. The client was suddenly homeless, with no means of accessing her belongings or medications. Mental Hygiene Legal Service has no real way of tracking clients after their discharge from the hospital, and we only know of this client's experience because she thought to call my colleague who had represented her during her hospitalization. But since the client no access to her home and no cell phone, my colleague had no way to find her or return her call.

¹ Public Health Law § 2803 [ix]; 10 NYCRR 405.9 [h].

² 10 NYCRR 405.9 [h] [2].

³ See 10 NYCRR 405.9 [h] [3].

⁴ 10 NYCRR 405.9 [h] [6] [i].

The experience of supportive housing tenants can be contrasted with the due process procedures for residents of group homes operated or certified by the Office for People with Developmental Disabilities (OPWDD).⁵ State guidance specifically addresses that OPWDD group homes may not refuse to readmit residents after a period of hospitalization.⁶ If an OPWDD resident encountered barriers returning their group home after a hospitalization, they would be entitled to a hearing with free legal representation from Mental Hygiene Legal Service.⁷ No such due process protections or guidance exist for supportive housing providers.

In summary, the lack of oversight for supportive housing providers regularly and seriously impacts my clients' liberty interests—keeping them hospitalized when it is not the least restrictive means of care. From a patient care perspective, housing administrators without medical training are being permitted to inappropriately insert themselves into important medical decision making. And, in the more extreme scenarios, this an open crack in our city's safety net through which my client's fall and cannot be retrieved.

⁵ See 14 NYCRR 633.12.

⁶ See Leslie Fuld, Deputy Commissioner, Division of Quality Improvement, Office for People with Developmental Disabilities, *Due Process and Inappropriate Discharge from Residential Programs and Services* [Sept. 9, 2020], available at <u>https://opwdd.ny.gov/system/files/documents/2021/03/inappropriate-discharge-memo-update_9.8-1.pdf</u>. [last accessed Dec. 1, 2023].

⁷ See 14 NYCRR 633.12.



Testimony before the New York City Council Committee on General Welfare Regarding T2023-4215: Oversight – Supportive Housing in New York City

December 7, 2023 Presented By Aaron M. Horth

This testimony is submitted on behalf of Legal Services NYC (LSNYC). LSNYC welcomes the opportunity to provide commentary on this important addition to the legislation and is thankful for the invitation to make this submission. LSNYC is an anti-poverty organization that seeks justice for low-income New Yorkers as one of the principal law firms for low-income people in New York City. As the largest civil legal services program in the country with community-based offices and numerous outreach sites located throughout the city's five boroughs, LSNYC has a singular overriding mission: to provide expert legal assistance that improves the lives and communities of low-income New Yorkers. For more than fifty years, we have helped our clients meet basic human needs and challenged the systemic injustices that keep them poor. We ensure low-income New Yorkers have access to housing, health care, food, and subsistence income providing help that benefited 115,000 New Yorkers and their family members.

Thank you for your time. I am an attorney in the LGBTQ/HIV+ advocacy unit at Brooklyn Legal Services, a part of Legal Services NYC. We represent low-income members of the LGBTQ community and people living with HIV. We come before the Committee today to address areas where limited oversight of City- and State-funded supportive housing providers has negatively impacted our clients.

We have numerous clients who have experienced harassment, discrimination, and abuse at the hands of employees of their supportive housing providers. We are greatly concerned about not only these actions but also the responses we receive when we reach out to these supportive

Brooklyn Legal Services | 105 Court Street, 4th Floor, Brooklyn, NY 11201 Phone: 718-237-5500 | Fax: 718-855-0733 | www.LegalServicesNYC.org Hon. Betty Staton, President | Tanya Wong, Project Director Monica Corrine Moran, Esq., Board Chair | Michael L. Williams, Vice Chair



housing providers to address their illegal actions. Supportive housing staff and leadership alike regularly dismiss us and our clients' concerns, take no action to remedy the reported behaviors, and have even expressed their intention to continue harassing and discriminating against our clients. This mistreatment is all the more egregious as supportive housing providers hold themselves out as providing higher standards of care for NYC's most vulnerable populations.

We see serious issues with the financial management of supportive housing providers and with supportive housing providers failing to provide reasonable accommodations. Both issues endanger the tenants that supportive housing providers are paid to house. Generally, the City pays supportive housing providers, who in turn pay landlords. If the provider fails to pass along the City subsidies they receive to the landlord, the landlord sues the providers and the residents for nonpayment, even though the residents haven't failed to pay. For example, 200 out of 300 scatter site housing residents of supportive housing provider St. Nicks Alliance were sued for non-payment of rent last year. In each of these proceedings, St. Nicks had received rent subsidy payments from the City but failed to pass those on to the scatter site landlords. Because of St. Nicks' overwhelming failure, each of these 200 residents faced eviction cases in housing court despite having complied fully with their rental obligations.

In other instances, supportive housing providers have sought to evict tenants with severe mental health issues rather than accommodate them to ensure they maintain stable housing. The following are a few anecdotes from individual experiences of our supportive housing resident clients:

Ms. A is a transgender woman with mental health issues who moved from a Department of Homeless Services (DHS) shelter to a supportive housing program specifically for individuals with mental illness. From the moment she moved in, Ms. A was mistreated because of her transgender identity. High-level staff at the supportive housing provider told her that her transgender identity was offensive to them. The harassment then escalated to include staff sending a series of letters threatening to evict Ms. A without going through the required judicial process. When Ms. A retained LSNYC, we reached out to the provider to advise them that their actions were illegal, but management boldly told us that they often circumvent the court process in evicting people. After these conversations, the provider continued to send notices to Ms. A threatening to evict her, and the notices contained overtly discriminatory language. In one such letter, the provider told Ms. A that she was being evicted because "you have constantly shown the symptoms of your mental health illness." Despite our numerous attempts to demand the harassment of Ms. A cease, the provider has continued their attempts to intimidate Ms. A to get her to move out of the facility, without beginning any legal eviction proceedings.

Another client of ours, Mr. B, is a resident of a supportive housing provider specifically for individuals living with HIV. Mr. B suffers frequent confusion and memory loss due to a brain injury, and was thus happy to be placed in a facility in the neighborhood where he has lived his entire life. However, this became a nightmare when a worker from the program told another community member that he was a resident of this facility exclusively for people living with HIV, and thus illegally disclosed Mr. B's HIV status. Despite our intervention, the provider has failed to take any corrective action to remedy this illegal disclosure or ensure that it does not occur again.

A third client of ours, Mr. C, was placed in a supportive housing facility for young adults. Mr. C. is transgender man who began his transition while living in supportive housing. When Mr. C. informed staff and residents at the facility that he would begin using he/him pronouns and identified as a man, fellow residents made derogatory comments about his transition when he attempted to use men's bathroom facilities, asked inappropriate questions about his genitals, repeatedly outed and misgendered him, and threatened violence against Mr. C. When Mr. C made complaints to staff, they dismissed him, told him the discrimination was brought on by his own actions, and failed to take reports of his complaints. Mr. C began to withdraw from others due to fears for his safety in the facility, and ultimately was hospitalized for depression and suicidal ideation due to his experiences in the facility. Despite these horrific experiences, the provider refuses to take responsibility for its actions.

This lack of accountability is especially concerning given the mandate of NYC Admin Code § 21-149 (b) that all supportive housing providers give to residents a notice of their rights as supportive housing tenants "at the time of the interview, at the time of initial occupancy of a unit, at each lease or program agreement renewal, and upon request." We rarely encounter clients who have received copies of this notice of rights, or who are aware of their rights as supportive housing residents. We believe greater oversight of supportive housing providers, beginning with ensuring tenants actually receive this notice of rights, would help remedy providers' frequent illegal harassment and discrimination against tenants, especially transgender, gender non-conforming, and mentally ill tenants.

We also believe mandatory training for all supportive housing providers and staff would positively impact our clients' experiences. The Know Your Obligations and Human Rights Law training administered by the New York City Commission on Human Rights could provide a good baseline for training, though ideally staff would also receive training tailored toward supportive housing for LGBTQ individuals, people living with HIV, and people living with mental illness.

Thank you for your time.



TESTIMONY FOR A HEARING ON:

Oversight – Supportive Housing

PRESENTED BEFORE:

THE NEW YORK CITY COUNCIL COMMITTEE ON MENTAL HEALTH, DISABILITIES, AND ADDICTION Hon. Linda Lee, Chair

THE NEW YORK CITY COUNCIL COMMITTEE ON GENERAL WELFARE Hon. Diana Ayala, Chair

THE NEW YORK CITY COUNCIL COMMITTEE ON VETERANS SERVICES Hon. Robert F. Holden, Chair

PRESENTED BY:

Dinah Luck, Esq. MOBILIZATION FOR JUSTICE, INC.

December 7th, 2023

MOBILIZATION FOR JUSTICE, INC. 100 William Street, 6th Floor New York, NY 10038 212-417-3700 www.mobilizationforjustice.org

I. Introduction

Mobilization for Justice's mission is to achieve social justice, prioritizing the needs of people who are low-income, disenfranchised or have disabilities. We do this by providing direct civil legal assistance, conducting community education, engaging in policy advocacy, and bringing impact litigation.

Mobilization for Justice works with individuals with mental illness across our projects, but most saliently in our Mental Health Law Project and housing law units. We assist a small number of individuals to apply for supportive housing and a larger number of tenants currently living in supportive housing.

We are very appreciative of the committee's openness to having this hearing and look forward to any questions you might have.

II. Background and concerns about the structure of the current supportive housing system

Historically, a significant number of disabled and poor individuals in New York City have resided in single-room occupancy units. A survey by the Mayor's Office of SRO Housing in 1979, found that SRO residents in hotels were overwhelmingly composed of people who had histories of substance use, had exited incarceration, were elderly, or had been psychiatric patients. Many of these units were lost, directly related to post-fiscal crisis housing policies that encouraged gentrification.¹ The supportive housing system has meant a reconstruction of a large number of the SROs, but with a higher threshold to access than was known in decades past.²

In a mutually reinforcing approach, supportive housing has been framed as *the* panacea for mass homelessness by trade groups and providers, legislators, and government (at city, state, and federal levels). As a result, the supportive housing stock has increased dramatically. New York City's supportive housing system now includes nearly 40,000 beds, of which some 16,000 are in scatter-site units.³ While most of the units are for individuals with serious mental illness, there

¹ Philip Kasinitz, "Gentrification and Homelessness: The Single Room Occupant and Inner City Revival," *The Urban and Social Change Review* (17) 1, 1984, p. 9-14; Brian J. Sullivan & Jonathan Burke, "Single-Room Occupancy Housing in New York City: The Origins and Dimensions of a Crisis," *City of New York Law Review* 17 (1), 2013.

² Shawn G. Kennedy, "New Look for S.R.O.'s: Decent Housing," *New York Times* March 28 1995; Lynette Holloway, "With New Purpose And Look, S.R.O.'s Make a Comeback," *New York Times* November 10, 1996; Nina Siegal, "Checkout Time?; As S.R.O. Owners Make Way for Tourists, Long-Term Tenants Say They're Left in the Lurch," *New York Times* November 22, 1998; Dennis Hevesi, "Building Homes for the Single Homeless," *New York Times* April 25, 1999.

³ The last-available federal report, composed of City-provided data, tallied 35,570 supportive housing beds. That data, from January 2022, is nearly two years old at the time of writing. Many supportive housing units have been built or added since that time. The 16,000 figure is from David Brand's 2022 reporting, see: "It's Like a Slum': Supportive Housing Tenants Cope with Violation-Filled Homes. Provider Blames Underfunding," *City Limits*, <u>'It's Like a Slum'</u>: <u>Like a Slum'</u>: Supportive Housing Tenants Cope with Violation-Filled Homes. Provider Blames Underfunding (citylimits.org).

has been significant growth in the supportive housing stock for youth aging out of foster care, families, and individuals with HIV/AIDS.⁴ With that growth, however, has developed a system where providers have little accountability for how they engage with applicants and tenants and the government does relatively little to ensure that supportive housing tenants do not fall back into homelessness, or that applicants even have a fair shot at entering into the system in the first place. We discuss some of these problems and our recommendations below.

III. Problems at the front end of the system

Fair access to supportive housing in New York City has long been a significant concern for applicants and some advocates.⁵ Yet access to supportive housing continues to be opaque, based ultimately on discretionary calls by administrators, social workers and landlords and without recourse for applicants whose applications or placements are rejected.

Application submission

Applications for supportive housing are submitted to the Human Resources Administration's Placement, Assessment and Client Tracking (HRA's PACT) Unit through the Coordinated Assessment and Placement System (CAPS).⁶ The PACT unit has a staff of consulting, clinically trained social workers who review application packets and make determinations based on the information submitted to them. Applicants are not typically able to self-refer. Rather, a community entity, most commonly a shelter, applies on the applicant's behalf.⁷

The majority of applicants apply based on having a serious mental illness, and the standard PACT reviewers are supposed to use is the State's definition of serious and persistent mental illness in determining eligibility.⁸ Typically, documentation of this is a psychiatric evaluation. Packets also typically include a psychosocial assessment, which is supposed to help drive the service recommendations and requirements in the eligibility determination.

However, for many years, the process by which HRA social workers make decisions has been opaque and discretionary, and often tilts toward denying applicants for questionable reasons. When an applicant is denied, there is no formal mechanism for appeal. An applying agency can

⁴ At this stage it is outdated, but HRA provides a basic overview of supportive housing types: <u>Supportive Housing -</u> <u>HRA (nyc.gov)</u>

⁵ See, for example: Jarrett Murphy, "Housing for NYC's Most Vulnerable Under Scrutiny for 'Screening'," *City Limits* July 5, 2018; Jeanmarie Evelly, "City's Supportive Housing Remains Out of Reach for Most Applicants, Data Shows," September 9, 2022; Emma Whitford, "A Lot of False Hope': City Data Show Ongoing Barriers To Supportive Housing," *City Limits* September 20, 2023; Stefanos Chen, "How a Hotel Was Converted into Housing for Formerly Homeless People," *New York Times* December 11, 2022; Andy Newman, "Nearly 2,600 Apartments for Mentally III and Homeless People Sit Vacant," *New York Times* November 4, 2022; Nolan Hicks, "Enough units to house all NYC's homeless are sitting vacant: survey," *New York Post* March 21, 2022.

⁶ HRA provides a basic overview of the application-submission process: <u>Completing a Successful NYC Supportive</u> <u>Housing Application</u>

⁷ The annual Local Law 3/2022 report provides quantitative details on referring entities, see: <u>https://www.nyc.gov/assets/hra/downloads/pdf/news/HRA-Local-Law-3-CFY2022-08312023.pdf</u>

⁸ The State Office of Mental Health definition of serious mental illness can be found here: <u>Serious Mental Illness</u> (ny.gov)

speak with the reviewer and try to trouble-shoot issues with the application or try to go up the chain of command, but this requires significant resources and bureaucratic knowledge that many community agencies simply don't have. There is no fair hearing process, and no other formal mechanism to challenge a denial or a discretionary service call made by an HRA reviewing social worker. That is different from the process for almost all other government benefits and raises serious due process concerns. The application process itself can be insurmountable for many people. City agencies have recently implemented a policy of "low barrier admissions," but enforcement of it is informal and left to Department of Social Services (DSS) non-legal staff.⁹

The determination also includes a so-called "vulnerability" scoring of applicants based on formulas that attempt to quantify and predict an individual's "vulnerability" to becoming or remaining chronically homeless.¹⁰ City officials have testified that the vulnerability scores are used to prioritize highly-vulnerable applicants, and that those who score at the "high" level are "prioritized" for housing placement.¹¹ However, an internal longitudinal study recently released to our office via a Freedom of Information Law (FOIL) request, available as an appendix to this testimony, documents that HRA's own internal research found that just 13 percent of "high" vulnerability applicants from the largest referral source (shelters) actually accessed supportive housing (Appendix 1).¹²

Once a determination is made, most placement referrals are made by the DSS Office of Affordable and Supportive Housing Services and the Center for Urban Community Services (CUCS). The process by which DSS internally decides who does and does not get referrals is not public, and is remarkably opaque given the breadth of housing slots they are referring to. During the de Blasio administration, DSS testified that a few officials use spreadsheets and look over applications to make referrals based on their assessments.¹³ This creates another opaque and possibly insurmountable barrier for applicants and opens a significant window for questionable and possibly discriminatory housing decisions.

Tenant selection

Supportive housing, conceptually and historically, has been marketed to communities using the arguments that it is better than homeless shelters, and that its tenants will be serviced and surveilled in such a way that they will not cause quality of life concerns in surrounding neighborhoods. As one developer stated to the *New York Times* in 1999, "The bottom line is we

⁹ On the low-barrier admissions policy, see: <u>Low Barrier Admissions Policies for NYC Supportive Housing</u> ¹⁰ For a descriptor of the formula underlying the SVA score, see:

https://www.nyc.gov/assets/nycccoc/downloads/pdf/SVA_CriteriaFactSheet.pdf. It is of note that what exactly an SVA measures "vulnerability" to is not always clear, but City officials have testified that DSS understands it to mean "the highest vulnerability and likelihood for continued homelessness." See DSS's testimony at the 2020 City Council oversight hearing on supportive housing at: <u>The New York City Council - File #: T2020-6924 (nyc.gov)</u>. ¹¹ See: <u>2023-consolidated-supportive-housing-guidance.pdf (nyc.gov)</u>.

¹² This data is from HRA's CAPS CSI committee and is called the "CSI Funnel Report."

¹³ In the 2020 supportive housing oversight hearing, DSS commissioner Jennifer Kelly described the process that was used at that time, which is available in the hearing transcript. It is likely there have been some changes in the interim.

have to operate like a business, a business that provides services to its customers, our tenants. To operate successfully we have to work very closely with the community we're in."¹⁴ Providers have also argued that they must have full discretion in tenant selection to ensure the services they offer align with tenant needs; if they cannot meet an applicant's anticipated service needs, then they must be allowed to deny them access to their housing program. However, the provider's demand for full discretion in the name of appropriate services does not hold up under even slight scrutiny – denials are often based on surface-level, rapid assessments, and the content of the reasons for rejection often amounts to denying someone due to a characteristic of their disabling condition, which is a violation of fair housing obligations. Across the board, there is not even a process for a reasonable accommodation request, which is in itself a violation of various federal, state, and local laws.

Since 2010 there has been a push by the federal government toward implementation of some version of what is labeled a "housing first" paradigm across federally funded supportive housing.¹⁵ This federal push has intersected with policy shifts that have developed in the wake of the Black Lives Matter movements, which have forced official attention toward the ways that racism plays out in government policy. In New York City, organizing by supportive housing applicants, tenants, and allies, along with reporting by critical journalists, have dovetailed with the federal and political developments to create an environment that has, at least conceptually, begun to reign in provider discretion in tenant selection.¹⁶

Applicants for supportive housing must go through an initial "interview" process with providers, where they can be asked virtually anything a provider wants. Often, providers have barred advocates from joining applicants during an interview. New York City does not have a universal format or questionnaire for the interview process. Years of qualitative data, first produced via successive FOIL requests and then in a municipal report on interview outcomes, has documented that providers consistently deny applicants for virtually any reason they want, including for reasons that are clear violations of fair housing laws.¹⁷

There is, in fact, no regulation that specifically targets approvals or denials by supportive housing providers, nor is there any systematic enforcement of fair housing laws on behalf of supportive housing applicants. Rather, City officials have stated in meetings that they "flag" cases where there are "inappropriate" denials and speak with providers to encourage them to reconsider a denial. However, there is no formal process for this, and there is no evidence that the City has involved any of its legal authority or legal staff in these interventions. New York

¹⁴Alan S. Oser, "PERSPECTIVES; The Challenge of Managing Supportive Housing," New York Times May 9, 1999. <u>https://www.nytimes.com/1999/05/09/realestate/perspectives-the-challenge-of-managing-supportive-housing.html?searchResultPosition=63</u>

¹⁵ See USICH's Federal and Strategic Plan to End Homelessness, *Opening Doors*, from 2010: <u>Opening Doors 2010 FINAL FSP Prevent End Homeless.pdf (usich.gov)</u>. Housing First prioritizes placing homeless people directly into housing rather than making shelter or service demands of them beforehand. For a basic backgrounder see: <u>https://endhomelessness.org/resource/housing-first/</u>.

¹⁶ Specifically, we reference here organizing by Supportive Housing Organized and United Tenants (SHOUT). See: <u>SHOUT (shoutnyc.org)</u>

¹⁷ See, for example, aforementioned Local Law 3/2022 data.

City does not track what happens to an individual who is denied supportive housing and whose application subsequently expires.

As the supportive housing process is unique in the discretionary use of clinical information to inform access to housing, it also stands out for the complete absence of any formalized process or procedure for requesting a reasonable accommodation in the application process or upon a provider's denial. Simply put, there is no process for someone to request a reasonable accommodation to make a housing option workable for them and there is no way to appeal a provider's rejection into supportive housing.

In sum, the current supportive housing application process is far more burdensome than is typically acknowledged, is opaque, and is structurally organized in such a way that allows discriminatory behavior to run rampant. While efforts by City officials to enforce a "low-barrier admissions" process are a hopeful sign, the fact is that they are simply nowhere near enough.

IV. Problems experienced by tenants.

As the supportive housing system has grown over the years, our offices have seen increasingly problematic actions toward supportive housing tenants by providers and landlords. Below are examples of the systemic problems our clients are facing.

Use of eviction filings and housing courts

Supportive housing providers have historically relied on the housing courts to enforce lease provisions. The extent of this has occurred, in both holdover and non-pay cases, is alarming.

In the case of holdovers, we often see situations arise where providers find a tenant difficult or in acute need of intensive support, and bring a lawsuit against the tenant in housing court, rather than provide the support the tenant needs. This approach can trigger traumatic responses from tenants who suddenly find their housing at risk after typically having already survived homelessness once, and find themselves in court, for reasons directly related to the disabling conditions that made them eligible for the housing in the first place. Common reasons for holdovers can include clutter, tenant conflicts with neighbors or roommates, tenant discord with provider staff, and other situations where patient and supportive services and mediation may have been successful.

The providers have claimed in the press and will probably claim in this hearing that they only bring housing cases as a last resort and without the intention to actually evict their tenants. Their actions in housing court refute those claims. Providers hire landlord-side law firms that either do not know or do not care that the tenants are in supportive housing. In other words, they typically handle supportive housing cases like any other case. Here is what this often looks like:

- Provider attorneys, acting on the direction of their clients, will default tenants who do not appear;
- Provider attorneys, acting on the direction of their clients, do not inform the court that the tenant has a disability and the relevant apartment is supportive housing;

- Provider attorneys, acting on the direction of their clients, do not give extra time to pay arrears or resolve the underlying problem
- Providers often do not provide any assistance in getting rent arrears paid or otherwise resolving the legal problem;
- Providers do not refer to Adult Protective Services (APS) or move for a guardian *ad litem* (GAL)¹⁸ when necessary; and
- Provider attorneys will seek judgments of possession and warrants of eviction.

MFJ attorneys and social workers have handled countless cases for supportive housing tenants. We regularly have to explain to the providers' attorneys what supportive housing is, what it means, and what unique rules or processes may be in place for a particular tenant. Our explanations rarely have any effect and they carry on, business as usual. When we've asked the providers' attorneys if their clients can help resolve the case—for example by sending a case worker to HRA with the tenant—they almost always refuse. MFJ staff end up stepping in to provide the support services needed to prevent eviction. Unlike supportive housing providers, MFJ is not funded or staffed to provide case work assistance, but we regularly have to fill those roles to the best of our ability.

For example, in 2023 MFJ became aware of a specific supportive housing building that had many non-pay eviction filings. Our staff conducted outreach in several of the buildings to speak with tenants facing eviction filings and inform them of their rights. In one case, a formerly homeless and disabled supportive housing tenant was facing a non-pay filing and he was very scared the marshal may show up at his door. His cash assistance case had been closed and his attempts at re-applying had been unsuccessful. Staff at the supportive housing residence had told him to apply to HRA for help but not offered any other assistance. Our office completed a cash assistance application for the individual and got payment from HRA for his arrears. However, the provider refused to withdraw the case against him. They alleged he owed non-rent fees, such as for a household appliance, which are not even recoverable in a rent proceeding in housing court. However, the provider wanted to keep the non-pay case open until the non-rent fees were paid. In this case, he had inherited an appliance when he moved into the unit and it was broken, so a new one - which he was not allowed to own - was installed, which he was then charged hundreds of dollars for, and which the provider alleged he was in debt to them over. Advocacy by MFJ social service staff with high-level provider staff failed to resolve the issue, and an attorney had to get involved. In this case, the attorney reached out to the provider's attorney who finally agreed to end the litigation against our client.

In another case this year, we met a supportive housing client, an elderly and severely disabled, wheelchair bound man, who had an active marshal's notice on a non-pay case in a congregate supportive housing building. We made multiple visits to his apartment but could not reach him. One day he did respond to a knock on his door and informed us he had been in the hospital for some time. Given the marshal's notice we reached out to HRA officials who agreed to speak with the provider and assist with getting the arrears paid. We only reached out to this client because we saw the marshal's notice in the state filing database - had that not happened he would

¹⁸ Most supportive housing tenants do not need APS services or GAL's, but providers should know when their tenants are unable to defend their cases without assistance. If providers will not provide the needed assistance, they or their attorneys should at least attempt to access any available protections for their vulnerable tenants.

have been unrepresented and, eventually, evicted. And had HRA not agreed to speak with the provider given the extreme circumstances of the situation, the legal case would have continued on. The supportive housing provider failed to adequately assist before it got to this point, instead moving for a marshal's notice.

During the height of the COVID pandemic, MFJ represented a tenant in a Level 2 congregate care facility operated by a major city-contracted supportive housing provider. Level 2 residences are for tenants who need a high level of care with on-site services, such as money and medication management. The provider allowed this high-need tenant to accrue over \$15,000 in rent/program fees arrears, terminated his residency for failure to pay his fees, then brought a holdover proceeding against him in housing court. When MFJ initially appeared in court, we informed the provider's attorney that Level 2 residences must apply for the one-shot deal through a special division of HRA called the Division of Voluntary and Proprietary Homes for Adults (DVPHA)—the tenant cannot apply for the one-shot deal himself. We provided the attorney with the DVPHA contact information and a list of documents they require. The provider refused to apply for the one-shot for six months, during which time this tenant with a serious mental illness had the traumatic threat of an eviction hanging over him. He was terrified of becoming homeless again. Instead, they pushed for trial, stating in an email, "Considering the amount of arrears it may make more financial sense for them to take their chances at trial."

This provider failed in its obligation to assist this tenant with money management and allowed the arrears to accrue to an almost insurmountable amount. It abdicated its responsibility to the tenant and failed to fulfill its obligations as a provider of supportive housing, yet continued to pursue eviction of this vulnerable individual. While courts were closed to all but voluntary conferences, the provider sought court intervention and stated that "Petitioner is prepared to proceed to trial forthwith." This aggressive stance toward a person it is supposed to be supporting and protecting is unfortunately not unusual.

In the case of non-pay cases, we routinely work with individuals who have struggled with paying their rent for any number of reasons people fall behind when they live in poverty (as almost all supportive housing tenants do), and who have found engaging the Department of Social Services' rental assistance bureaucracy unsuccessful or impossible. In many cases, a given supportive housing provider has failed to offer any serious benefit advocacy or support to the tenant who they subsequently litigate against. Some providers and trade groups have argued that such lawsuits are necessary for one shot deals in order to justify the rampant use of housing courts against disabled tenants. However, it is not City policy to require an eviction filing to obtain one shot assistance, and strong benefits advocacy is often all that is needed.

Inhabitable Conditions

Harmful housing conditions pervade the scatter-site system and are present in many congregate units. In the scatter-site system, where providers contract with private landlords, tenants often live in particularly unhealthy conditions.

For example, in 2022, a community organization referred J.D. to MFJ for legal assistance. J.D. was a single mother residing in a scattered site supportive housing apartment operated by a well

known supportive housing provider with her two small children. There were multiple Department of Housing Preservation & Development (HPD) violations in the apartment and across the building, including C-violations for mice/roaches. The building gas connection had been turned off for seven months at the time J.D. was referred to MFJ so she did not have access to cooking gas. Although she was provided with a single electric burner, her supportive housing provider did not provide any other assistance to restore the gas connection, relocate her to safe and habitable housing, or obtain additional financial assistance to address the increased food costs resulting from being unable to adequately prepare meals at home. At the time she was referred to MFJ for legal assistance, J.D. had been planning to return to a Department of Homeless Services shelter with her two children because as poor as they are, at that point, shelter conditions seemed preferable to the conditions in which she was living at her rent-stabilized supportive housing apartment. Due to MFJ's intervention and intensive advocacy within both provider leadership and HRA, MFJ was ultimately successful in helping J.D. be relocated into a new supportive housing unit in a different building specifically designated for families. Although MFJ was able to obtain a good outcome for J.D. she should not have needed legal intervention in order to ensure safe and habitable housing for herself and her children in supportive housing.

J.D.s story is not unique. MFJ regularly advises and/or represents tenants in supportive housing who are living in deplorable conditions in apartments that have multiple serious housing code violations. Providers often take a very passive approach to enforcing their clients' rights to safe and habitable housing. And while supportive housing providers regularly hire law firms to file eviction cases, they almost never hire law firms to help residents get repairs. Providers almost never withhold rent as a tactic to get repairs completed and instead continue to pay public funds to private landlords for inhabitable housing.

This status quo persists because the City fails to exercise appropriate oversight over their contracted providers. City contracts do not require that apartments undergo an inspection before being leased up for use in a City-funded supportive housing program. City contracts do not require specific protocol or procedures for ensuring that supportive housing units are habitable. Even if the contracts contained such provisions, contracts are only effective where there are clear enforcement mechanisms. And in the context of supportive housing, there are next to none.

Roommate Shares and "Warehousing"

As rents across New York City increase, supportive housing providers have increasingly opted to place clients in shared apartments as a cost-cutting measure but without consideration for the ways in which mental health concerns and histories of trauma can make co-living untenable. Tenants in supportive housing are being coerced to vacate their one-bedroom units and transferred into shared apartments with roommates without due process or adequate support.

For example, in 2020, MFJ assisted J.R., who had resided in a one-bedroom rent-stabilized apartment operated as supportive housing by a well-known supportive housing provider. J.R. is a senior citizen who had resided in his supportive housing unit for over fifteen years. His supportive housing provider had just informed him that if he wanted to remain in supportive housing, he would be required to vacate his apartment and move into a shared apartment in a different neighborhood. His provider told him that if he did not agree to move, he would lose his housing and return to homelessness. J.R. reached out to MFJ to learn more about his legal rights.

MFJ was able to advise him that as a rent-stabilized tenant, he had the right to remain in the apartment that had been his home for over a decade and that his provider could not remove him from his apartment without obtaining a court order first. MFJ was also able to remind the provider that J.R. had legal rights and that the state's supportive housing guidelines direct providers to accommodate client choice in housing. Here, MFJ was successful in preserving J.R.'s rent-stabilized tenancy and his one-bedroom apartment but many tenants in supportive housing never have the opportunity to speak to an attorney and end up accepting relocation into shared housing that does not meet their needs because they do not believe they have any other options.

On the other hand, in 2023, MFJ assisted C.D. who was residing in a shared apartment operated by another well-known supportive housing provider. C.D. was diagnosed with PTSD, bipolar disorder, and depression. He had previously been incarcerated and was triggered by living in close proximity with others. He had also been assaulted by a past roommate in his supportive housing program. When he was referred to MFJ, he was having difficulties with his current roommate and his mental health was suffering. His long-term treating therapist had recommended that he be transferred to a studio or one-bedroom unit where he could live without roommates, and he asked his supportive housing provider to transfer him. His provider told him they did not have any studio or one-bedroom apartments available and left him to languish in an unhealthy and at times outright dangerous living situation. MFJ was able to re-submit a reasonable accommodation request on C.D.'s behalf to transfer him to a single occupancy unit and advocate up the chain of command to ensure that the provider leased up a new one-bedroom unit that better met C.D. 's health and housing needs. Furthermore, as a result of MFJ's advocacy, the supportive housing provider finally developed a reasonable accommodation policy which they did not have previously.

Again, J.R. and C.D.'s stories are not unique. MFJ frequently receives calls from tenants in supportive housing attempting to relocate into single occupancy housing or otherwise obtain reasonable accommodations in their housing who encounter roadblock after roadblock in their own self-advocacy efforts.

Overly Restrictive Lease Provisions and Program Rules

By law, tenants in supportive housing are tenants. As such, they are entitled to the same rights and protections as any other tenants in New York City. Furthermore, per the City's own articulation of its supportive housing model, tenants should be offered a standard lease and tenancy in supportive housing should not be subject to any special rules.¹⁹

Despite tenants' rights protected by law and the programmatic imperative of supportive housing to provide "Housing First," supportive housing providers across New York City issue leases with overly restrictive provisions such as limitations on overnight guests, curfews, notification requirements for out of town travel, and limitations on purchasing or otherwise acquiring furniture and household items. Furthermore, supportive housing providers regularly give tenants false or misleading information about their tenancy rights in supportive housing

 $^{^{19}\} https://www.nyc.gov/site/doh/health/topics/housing-services-supportive-housing.page$

Despite MFJ's repeated requests to the City for intervention in such instances, including a request to the City Department of Health and Mental Hygiene (DOHMH) to issue uniform guidelines to providers to ensure consistent practices and policies that comply with the law, the City has failed to take any steps to address overly restrictive rules in supportive housing.

For example, last year, tenant R.S. contacted MFJ seeking legal assistance regarding an overnight guest policy implemented by her supportive housing provider in her rent-stabilized building. Per the guest policy, she needed to notify her provider of her intent to have an overnight guest at least three days in advance AND obtain written permission. This policy significantly interfered with her ability to develop and sustain social and romantic relationships and made her feel like she was residing in an institution as opposed to living in her own home. An MFJ casehandler spent over a year and a half reaching out to the NYC DOHMH to request the City's intervention. MFJ also requested a copy of the City's purported newly developed provider guidelines and / or a copy of the updated provider guest policy but was consistently ignored. The MFJ casehandler then advised the tenant to call 311 to make a complaint about her provider's overly restrictive guest provisions. She made her complaint in May 2023. She received an email in July 2023 from the New York City DOHMH stating that "DOHMH is apprised of your concern and will provide an update to you once the review is completed." To date, she has not received any update or further communication from DOHMH regarding her complaint.

Unfortunately, R.S.'s story is not unique. MFJ has reviewed dozens upon dozens of supportive housing leases and "program rules" which contain similar overly invasive and/or discriminatory, and/or illegal terms. The City continues to turn a blind eye and it's the tenants who are left to bear the consequences.

Lack of resources to sustainably exit supportive housing

Many tenants who reside in supportive housing have lived in it for years and moved beyond the point where they find the social services helpful. Many tenants would like to leave supportive housing and move into their own apartments without a social service component. However, there is virtually no sustainable way to exit supportive housing for many tenants. While some tenants who live in HPD-subsidized Section 8 units can apply to split their voucher and port it after a year, many people in supportive housing do not have this opportunity. As a result, the supportive housing system continues to house many people who don't need the support, don't want them, and would thrive on their own.

V. Recommendations

There are a number of changes the City can make to its supportive housing systems to help ensure they better meet the needs of applicants and tenants. MFJ supports SHOUT's SAFE campaign demands, which we have included as an appendix to this testimony (Appendix 2). Additionally, we make the following recommendations:

1. Require and enforce anti-discrimination policies in tenant selection processes: As noted above, the tenant selection process is rife with creaming/cherry-picking and disability discrimination. There is no current legal monitoring or enforcement of anti-

discrimination protections for applicants into supportive housing. While we applaud DSS's efforts to reign in provider behavior over the past year, DSS has not dedicated any oversight in its legal unit to ensuring applicants do not suffer disability discrimination or other types of discriminatory behavior. DSS should begin using its legal resources to enforce anti-discrimination obligations afforded applicants in municipal human rights and federal housing law.

- **2.** Require a reasonable accommodation process for applicants and inform applicants of it: There is no process for applying for a reasonable accommodation (RA) for supportive housing applicants. This refusal to provide an RA process in a City-facilitated application process is illegal and unacceptable. DSS must develop an RA process for supportive housing applicants and inform them of it.
- **3. Develop an appeal process for applicants**: Currently, there is no formal process by which an applicant denied by a provider can appeal that denial. Given that this is a City-facilitated process, the absence of an appeal process raises serious due process concerns. Provider's can simply deny and then move on to the next applicant. As a result, many tenants experience life-decimating harm by having their homelessness extended, and in some cases possibly losing the only possibility of accessing housing they may get. The consequences of not having any formal appeal process for applicants is severe.
- **4. Embed anti-eviction requirements into contracts**: Supportive housing tenants are, nearly universally, disabled. These tenants have also, typically, experienced homelessness and/or incarceration and/or psychiatric institutionalization all markers for potentially becoming homeless again. Every possible step should be taken by municipal agencies to prevent evictions of supportive housing tenants. Unfortunately, many providers quickly jump to using housing courts to resolve case management or clinical issues, putting many tenants at high-risk of re-entering homelessness.

One key option City officials have is to embed anti-eviction requirements into supportive housing contracts. Such requirements, enforceable via funding, could create very clear reporting and programmatic requirements before bringing a housing court case. If placed in contracts, these requirements could play a key role in safeguarding supportive housing tenants from the unnecessary use of the housing courts, and push providers to provide the clinical and advocacy services that can make this type of housing so successful.

- **5.** Require all providers to have a reasonable accommodation process for tenants and to advertise it: Often supportive housing tenants receive some version of "you should feel lucky you live here" from providers, but they are not informed of the ability to request a reasonable accommodation. Some providers do not have formal RA procedures in place. DSS and DOHMH must ensure that the tenant's right to a request for reasonable accommodations is enforced, by ensuring that all providers have formal RA procedures and inform their tenants of them.
- 6. Make CityFHEPS available to all supportive housing tenants who want to move on and who do not have access to alternative rental subsidies: For supportive housing

tenants who want to leave supportive housing, options are limited. Some people in Section 8 subsidized supportive housing units can apply to HPD, after a year of tenancy, to split their voucher and make it portable. But most tenants cannot do this. The City could - and should - create an access channel for CityFHEPS rental subsidies for all tenants with no access to alternative subsidies. This access would allow current supportive housing tenants the ability to sustainably leave their apartments, and also have the impact of opening up their apartments to tenants who want and need supportive housing.

7. Create a pathway for tenants in supportive housing to file complaints with the City. In order to increase oversight and accountability, the City must establish a mechanism for tenants to file complaints against their supportive housing providers. The complaint mechanism and investigation process should be accessible, transparent, and accountable to tenants. It should be uniform, with articulated timelines, and culminate with a final resolution or determination that is memorialized in writing.

 (4) Vertice N or C placements from the approval contrit, placements are to SH site types, tracked sites only, and linked to units; excludes clients moved in on demographics only. (5) Denominator: Clients Placed in CAPS (6) Denominator: Approved Applications (7) Excludes activity from IAH sites. 	 Applications are not linked back to survey cohort. Referrals on the cohort of approved applications; excludes direct referrals and referrals to non-tracked sites. Of the clients approved, % with 1+ referral in CAPS.
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richara	/c// table upon	reparation date: //s/2023, updated //18/2023	0													
			Single Shelter Family Shelter Homeless	Family Shelter		νo	Youth Services HIV/AIDS		Transitional / Supportive		Substance Use	Inpatient Care	Outpatient	Care	CBO/Others	Total
		Timeframe			Solutions				Housing	Concention						
1 Surveys (N) [7]		1/1/2021-12/31/2021 (Year 1)	18254	0658	2262	1996	1562	1226	2240	1258	431	1185	1504	1092	1546	43146
2 Clients S	Clients Surveyed [7]	1/1/2021-12/31/2021 (Year 1)	15184	7610			1272	1105	1967	1157	396	1092	1313	960	1394	35816
Clients Su 3 PE SH (N)	Clients Surveyed with PE SH (N)	1/1/2021-12/31/2021 (Year 1)	4853	1571			780	1067	1433	961	339	842	1079	668	379	14697
Clients Sc 4 PE SH (%)	irveyed with	1/1/2021-12/31/2021 (Year 1)	32%	21%	60%		61%	97%	73%	83%	86%	77%	82%	70%	27%	41%
		Timeframe	Single Shelter Family Shelter Homeless Solutions	Family Shelter	Street Homeless Solutions	M	Youth Services HIV/AIDS		Transitional / Supportive Housing	Legal / Corrections	Substance Use Services	Inpatient Care	Outpatient Care	Care Coordination	CBO/Others	Total
Clients A 5 [7]	Clients Applied (N) [1] [7]	1/1/2021-12/31/2021 (Year 1)	3472	742	886	33	523	369	1297	238	277	289	1016	566	332	10962
Clients A 6 Clients S	Clients Applied / PESH Clients Surveyed [1]	1/1/2021-12/31/2021 (Year 1)	72%	47%	92%	17%	67%	35%	91%	%06	82%	81%	94%	%58	88%	75%
7 Clients A	Clients Approved [1]	1/1/2021-12/31/2021 (Year 1)	2417	510			414	297	688	744	204	865	636	313	211	8020
SH Application 8 Approval Rate (%)	cation I Rate (%)	1/1/2021-12/31/2021 (Year 1)	92%	87%	%26	%88	97%	%£6	94%	97%	%96	97%	87%	87%	83%	92%
9 % HUD C	% HUD Chronic [6]	1/1/2021-12/31/2021 (Year 1)	51%	78%	71%		10%	45%	13%	5%	7%	4%	10%	14%	15%	34%
10 CAPS Ref	CAPS Referrals (N) [2]	1/1/2021-12/31/2022 (Year 1-2)	5347	738	1484	15	1645	1484	450	137	72	56	345	84	168	12025
% Clients 11 CAPS [3]	% Clients Referred in CAPS [3]	1/1/2021-12/31/2022 (Year 1-2)	70%	67%	%69	45%	49%	89%	17%	8%	21%	3%	14%	14%	24%	44%
Clients P 12 (N) [4]	Clients Placed in CAPS (N) [4]	1/1/2021-3/31/2023 (Year 1-2 plus 1 qtr)	886	210	336	6	79	168	186	77	65	123	123	63	55	2377
% Clients 13 CAPS [4]	% Clients Placed in CAPS [4]	1/1/2021-3/31/2023 (Year 1-2 plus 1 qtr)	37%	41%	42%	27%	19%	57%	21%	10%	32%	21%	19%	20%	26%	30%
14 % HUD C	% HUD Chronic [5]	1/1/2021-3/31/2023 (Year 1-2 plus 1 qtr)	70%	85%	85%	50%	23%	50%	18%	10%	11%	4%	22%	33%	25%	54%
15 % SVA High [5]	[5] dg	1/1/2021-3/31/2023 (Year 1-2 plus 1 qtr)	13%	24%	31%	20%	15%	30%	23%	12%	18%	75%	22%	16%	18%	22%
16 % SVA Medium [5]	ledium [5]	1/1/2021-3/31/2023 (Year 1-2 plus 1 qtr)	53%	41%	41%	83%	38%	44%	55%	23%	71%	21%	43%	54%	56%	47%
17 % SVA Low [5]	ow [5]	1/1/2021-3/31/2023 (Year 1-2 plus 1 qtr)	34%	35%	28%	17%	47%	26%	22%	65%	11%	4%	35%	30%	25%	31%
Clients Approved 18 Distribution	pproved	1/1/2021-12/31/2021 (Year 1)	30%	6%	10%	0%	5%	4%	11%	9%6	3%	7%	8%	4%	3%	100%
Clients Placed 19 Distribution	laced ion	1/1/2021-3/31/2023 (Year 1-2 plus 1 qtr)	37%	%6	14%	%0	3%	7%	8%	3%	3%	5%	5%	3%	2%	100%
Notes:																

Preparation date: 7/5/2023, Updated 7/18/2023

CSI Reporting: Coordinated Entry Funnel, 1/1/2021 - 12/31/2021 Cohort, followed through 3/31/2023 - DRAFT

APPENDIX 1: DSS "Coordinated Entry Funnel" report

APPENDIX 2: SHOUT SAFE Campaign Demands

SHOUT	S.A.F.E. CAMPAIGN DEMANDS
	DOHMH AND OMH MUST:
1	STOP CONTRACTING WITH BAD ACTORS WHO REPEATEDLY BREAK NYC AND NYS HOUSING AND HUMAN RIGHTS LAWS.
2	ENFORCE THE SUPPORTIVE HOUSING GUIDELINES AS BINDING REQUIREMENTS IN ALL NYC/NYS SUPPORTIVE HOUSING.
3	CREATE A MEANINGFUL GRIEVANCE PROCESS FOR SUPPORTIVE HOUSING, INCLUDING WRITTEN RECORDS, COMPLAINT TRACKING, TENANT INCLUSION IN ALL STEPS OF THE PROCESS, AND RETALIATION PROTECTIONS.
4	HIRE ADEQUATE STAFF TO INVESTIGATE TENANT COMPLAINTS AND OVERSEE QUALITY OF HOUSING/SERVICES IN CONTRACTED SUPPORTIVE HOUSING (NOT JUST ONCE EVERY 3 YEARS!)
5	CREATE A "LANDING PAGE" WHERE TENANTS CAN ACCESS INFORMATION ABOUT THEIR HOUSING RIGHTS AND HOW TO FILE A COMPLAINT WHEN THOSE RIGHTS ARE VIOLATED.
6	CREATE PATHWAYS TO EXIT SUPPORTIVE HOUSING FOR TENANTS WHO NO LONGER REQUIRE ONGOING SERVICES BUT STILL REQUIRE A RENT SUBSIDY.
7	CREATE PATHWAYSTO TRANSFER SUPPORTIVE HOUSING PROGRAMS/PROVIDERS WHEN NECESSARY TO ACCOMMODATE FAMILY GROWTH OR OTHER LIFE CHANGES.
в	CONDUCT MANDATORY ANNUAL REVIEW OF ALL PROGRAM DOCUMENTS TO ENSURE THEY COMPLY WITH THE OMH SUPPORTIVE HOUSING GUIDELINES, CONTRACTUAL OBLIGATIONS AND NYS/NYC HOUSING LAWS.
9	REQUIRE PROVIDERS TO CERTIFY ANNUALLY THAT ALL UNITS ARE FREE OF OPEN HOUSING CODE VIOLATIONS AND/OR PROVIDE A CORRECTIVE ACTION PLAN FOR RESOLVING ANY OPEN VIOLATIONS WITH A TIMELINE FOR RESOLUTION.
10	CREATE MANDATORY PRE-DISCHARGE AND PRE-EVICTION REQUIREMENTS, INCLUDING REQUIRED NOTICE TO OMH/DOHMH PRIOR TO COMMENCING ANY EVICTION PROCEEDING. BEGIN TRACKING ALL EVICTIONS AND EXITS FROM SUPPORTIVE HOUSING.

SHOUT S.A.F.E. CAMPAIGN DEMANDS

SUPPORTIVE HOUSING PROVIDERS MUST:

1	END DISCRIMONATORY REJECTIONS FROM SUPPORTIVE HOUSING APPLICANTS ON THE BASIS OF DISABILITY, LANGUAGE, RACE, GENDER AND SEXUAL ORIENTATION.
2	PROVIDE HIGH-QUALITY REPAIRS AND SERVICES IN ALL SUPPORTIVE HOUSING.
3	STOP RENTING FROM KNOWN SLUMLORDS AND TAKE LEGAL ACTION TO FORCE NEGLIGENT LANDLORDS TO PROVIDE REPAIRS AND SERVICES.
4	STOP EVICTING SUPPORTIVE HOUSING TENANTS. INSTEAD, SUPPORT TENANTS TO RESOLVE ANY ISSUES AND MAINTAIN THEIR HOUSING.
5	STOP RELYING ON SHARED/ROOMMATE HOUSING AS A COST- CUTTING MEASURE, ESPECIALLY WHEN SHARED HOUSING IS A BARRIER TO TENANT SAFETY, STABILITY, & RECOVERY.
6	INSTEAD, ENSURE THAT ALL SUPPORTIVE HOUSING TENANTS HAVE ACCESS TO STABLE AND SAFE HOUSING THAT MEETS THEIR HEALTH AND MENTAL HEALTH NEEDS.
7	RESPECT TENANTS' PRIVACY AND PERSONAL SPACE, INCLUDING NOT ENTERING UNITS, HOLDING/READING MAIL, OR SHARING PRIVATE INFORMATION WITHOUT CONSENT.
8	MEET TENANTS' NEEDS & REQUESTS FOR SOCIAL SERVICES AND SUPPORTS, NOT JUST THE MINIMUM REQUIRED BY AGENCY CONTRACTS, INCLUDING MEANINGFUL REFERRALS TO HIGH-QUALITY SOCIAL SERVICES, HEALTH AND MENTAL HEALTH PROVIDERS.
9	PROVIDE TENANTS WITH CLEAR INFORMATION AS TO THEIR SUPPORTIVE HOUSING & HOW TO REPORT ISSUES WITH REPAIRS AND SERVICES, INCLUDING COPIES OF ALL RELEVANT LEGAL DOCUMENTS
10	AGENCIES SHOULD NOT ENTER INTO DEALS WITH LANDLORDS

WITHOUT INCLUDING TENANTS IN THE DECISIONS.



<u>The National Homelessness Law Center's Extended Oral Testimony to the Committee on Housing</u> and Buildings, Committee on General Welfare, Committee on Veterans, and Committee on Mental Health, Disabilities and Addiction

Siya Hegde, Staff Attorney from the National Homelessness Law Center

December 7, 2023, at 1:00PM

Subject: "Intro. 1153 re: the Removals of Individuals Experiencing Unsheltered Homelessness and the Outcomes for those Individuals"

Good afternoon council members and thank you for holding this important hearing. My name is Siya Hegde, and I am a human rights lawyer at the National Homelessness Law Center ("Law Center"), a law and policy organization working to decriminalize and end homelessness and defend human rights and civil liberties. In addition to our support of Intro. 1153, my testimony today amplifies our position that the forced removal of unsheltered homeless individuals from encampments is an unlawful, punitive, and inhumane practice. The Council must implement proposals that shift away from encampment raids and toward compassionate, evidence-based Housing First solutions to solve our city's homelessness crisis. This recommendation is supported by the United Nations' Human Rights Committee's recent statement¹ calling for the abolition of laws and policies criminalizing homelessness at all levels.

New York's Sweeps Directive is an Abject Failure of Public Policy.

Tent encampments may be far less visible in New York City compared to many cities on the West coast, credited largely to our Right to Shelter. Nonetheless, their presence in our city is still concerning as a sign of how unsheltered homeless people are deprioritized by agencies tasked with ensuring their connection to basic, essential social services in the absence of systemic policy solutions to curb the crisis. In recent years, we have seen the rise of several citywide policies that criminalize the poor and unhoused, inviting more law enforcement intervention in moving unsheltered homeless people off the streets rather than into adequate housing. The sweeps directive was rolled out in 2022, authorizing the NYPD to crack down on encampments in public spaces deemed "not meant for human habitation." 12 days in, 239 locations were

¹ See "Law Center Statement on Today's United Nations Report Decrying Ongoing Human Rights Abuses Against Unhoused People," NATIONAL HOMELESSNESS LAW CENTER (Nov. 3, 2023), <u>https://homelesslaw.org/law-center-statement-on-todays-united-nations-report-decrying-ongoing-human-rights-abuses-against-unhoused-people/</u> (citing to United Nations' Concluding Observations "from its recent convening that investigated the United States' compliance with the International Covenant on Civil and Political Rights").

removed.² 5.5 months in, this number had increased nearly ten-fold to 2,331 locations.³ A comprehensive audit by Comptroller Lander's office revealed that only 3 people affected by this sweeps directive were able to secure permanent housing as of January 2023,⁴ and estimated 1 in every 3 encampment locations were re-shuffled as of April 2023.⁵ It is clear from these numbers and the personal, traumatic accounts of those unsheltered people who have testified today that this directive has neither ended street homelessness nor meaningfully reduced the presence of encampments.

On the contrary, the violent, intrusive experience of being shuffled from one encampment to another while being deprived of valuable, personal property is destabilizing. It ensnares unsheltered homeless people in vicious cycles of poverty, exposes them to race, gender, and health-based discrimination, impedes their ability to access vital documents, employment, essential medical services, and stable education, and puts them at risk of more policing and contact with the criminal legal system. Sweeps also erode trust and rapport between homeless people and the entities tasked with ensuring them a safety net, causing many of them to stay outside longer at the risk of their own health and safety.

Intro. 1135 is Critical for Taxpayer Accountability But is Wholly Insufficient. NY Must Focus on Systemic Solutions: Housing, Not Sweeps, Ends Homelessness.

Intro. 1153 would be a critical measure of accountability to ensure that the public knows where its taxpayer dollars are going. But on its own, it is wholly insufficient in capturing the long-term financial impacts of criminalizing and policing unsheltered homeless people. The NYPD's budget for 2023 was over \$5.8B,⁶ while additional costs have been expended by the city to warehouse homeless people. This includes approximately \$136 per day for a shelter bed, over \$1,400 per day for a spot in a detention facility, and over \$3,600 a day to be involuntarily committed.⁷ The city is spending millions of dollars to harass and harm our most vulnerable community members, disposing of their personal belongings, and leaving them to freeze in the middle of the winter. This is fiscally irresponsible and cruel. Instead, implementing a Housing First approach and providing both permanent, supportive housing and wraparound services would cost approximately \$68 per day, and is therefore a proven cost-saving measure to solve homelessness.⁸

It is essential that we as advocates and members of the public know the precise numbers of people affected by these forced removals, offered housing voucher applications, offered direct permanent and

² Samira Asma-Sadeque, "'Fascism works like that': homeless New Yorkers struggle amid police sweeps," THE GUARDIAN (May 11, 2022, 5:00 EDT), <u>https://www.theguardian.com/us-news/2022/may/11/new-york-city-homeless-sweeps-eric-adams</u>.

³ David Brand, "The NYPD Now Decides What Homeless Encampments Get Swept," CITYLIMITS (Sept. 21, 2022), https://citylimits.org/2022/09/21/the-nypd-now-decides-what-homeless-encampments-get-swept/.

⁴ NYC CITY COMPTROLLER BRAD LANDER, AUDIT OF THE DEPARTMENT OF HOMELESS SERVICES' ROLE IN THE "CLEANUPS" OF HOMELESS ENCAMPMENTS 1, 7 (June 28, 2023), <u>https://comptroller.nyc.gov/reports/audit-of-the-department-of-homeless-services-role-in-the-cleanups-of-homeless-encampments/</u>.

⁵ *Id.*, at 8.

⁶ Owen Kotowski, REPORT TO THE COMMITTEE ON FINANCE AND THE COMMITTEE ON PUBLIC SAFETY ON THE FISCAL 2024 EXECUTIVE PLAN AND THE FISCAL 2024 EXECUTIVE CAPITAL COMMITMENT FOR THE NEW YORK POLICE DEPARTMENT 1, 1 (May 18, 2023), <u>https://council.nyc.gov/budget/wp-</u>

 $[\]frac{content/uploads/sites/54/2023/05/NYPD.pdf\#:~:text=NYPD\%E2\%80\%99s\%20current\%20Fiscal\%202023\%20budget\%20is\%20\%245.83\%20billion\%2C,less\%20than\%20the\%20Fiscal\%202023\%20budget\%20adoption.$

⁷ NEW YORK CITY COMPTROLLER BRAD LANDER, "Comptroller Audit Found that Only 3 People Secured Permanent Housing Out of 2,308 Caught in Mayor Adams' Homeless Sweeps" (June 28, 2023),

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

supportive housing placements, and those arrested and forcibly hospitalized because of these sweeps. But from a systemic lens, homelessness should be decriminalized by divesting from police budgeting and police presence and investing in safe, Housing First programs and homelessness prevention services.

Thank you again for this opportunity to testify today. My colleagues and I at the Law Center welcome and encourage continued dialogue with the Council on this issue, as we are here to serve as a resource through our advocacy and expertise around homelessness and poverty. We especially thank the leadership of Council Member Nurse for stewarding Intro. 1153, and for all those council members who attended and participated in today's hearing.



Testimony by the New York Legal Assistance Group (NYLAG)

Before the New York City Council Committee on General Welfare jointly with the Committee on Mental Health, Disabilities and Addiction, the Committee on Housing and Buildings, and the Committee on Veterans on Supportive Housing in New York City and Legislation Requiring Reports on Removals of Individuals Experiencing

Homelessness

December 7, 2023

Chair Ayala, Chair Lee, Chair Sanchez, Chair Holden, Council Members, and staff, thank you for this opportunity to testify on the issues of supportive housing and assisting homeless New Yorkers, including our homeless veteran community. This testimony has been prepared by Deborah Berkman, Supervising Attorney of the Shelter Advocacy Initiative, and Ryan Foley, Supervising Attorney of the Veterans Practice, of the New York Legal Assistance Group (NYLAG). NYLAG is a nonprofit law office dedicated to providing free legal services in civil matters to low-income New Yorkers. The New York Legal Assistance Group uses the power of the law to help New Yorkers in need combat economic, racial, and social injustice. We address emerging and urgent legal needs with comprehensive, free civil legal services, impact litigation, policy advocacy, and community education. NYLAG services military veterans, the homeless, immigrants, seniors, the homebound, families facing foreclosures, renters facing eviction, low-income consumers, those in need of government assistance, children in need of special education, domestic violence survivors, persons with disabilities, patients with chronic illness or disease, low-wage workers, members of the LGBTQ community, Holocaust survivors, and others in need of free civil legal services. The Shelter Advocacy Initiative at NYLAG provides legal services and advocacy to lowincome people in and trying to access the shelter system. 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. We also assist and advocate for clients who are already in shelter as they navigate the transfer process, seek adequate facility conditions and resources for their needs, and we offer representation at fair hearings.

NYLAG serves the diverse needs of veterans through legal clinics within the Bronx and Manhattan VA Medical Centers, including the nation's first legal clinic focused entirely on women veterans, as well as through referral partnerships with veteran-focused communitybased organization. We provide comprehensive services to veterans and their families, regardless of their discharge status and eligibility to use the VA Healthcare System. We staff a legal clinic at the Borden Avenue Veterans Residence and serve large numbers of homeless and housing insecure Veterans.

The two major focuses of NYLAG's veteran-specific work are providing assistance with discharge upgrades, which increases eligibility for benefits, and benefit applications and appeals, to ensure veterans are able access the federal benefits they are entitled to. A less than Honorable discharge means a former servicemember may not be able to access the full range of benefits that their military service would otherwise grant them. Veterans who receive an Other Than Honorable (OTH) or Bad Conduct discharge often find they have a complete bar to VA benefits, including critical resources such as VA disability benefits and access to VA healthcare. Studies have found a direct correlation between mental health issues and less than Honorable discharges, making the lack of access to these benefits for this segment of the veteran population even more dire. Veterans with a PTSD diagnosis are eleven times more likely to

have a less than honorable discharge and veterans who reported military sexual trauma in service are 35% more likely to have a less than honorable discharge.

I- Veteran Homelessness

This combination of lack of access to benefits and severe mental health conditions leaves veterans with a less than honorable discharge in a situation where they are seven times more likely to deal with housing insecurity. A crucial step in increasing eligibility and access for veterans is screening for veteran status and identifying that an individual may be eligible to mental health, disability, housing, and education benefits. NYLAG applauds the City Council for taking steps to increase tracking and recording of this information by city agencies, particularly among the vulnerable homeless population, as well as by encouraging outreach and public education campaigns around the resources and benefits available to the veteran community. However, it is equally as important that we ensure that support is given to the organizations and agencies that with then help veterans navigate the difficult and confusing processes to connect to these benefits, including legal service providers.

II- Supportive Housing

Availability and accessibility of supportive housing is critical to help people experiencing homelessness transition to permanent housing. NYLAG offers these suggestions to further that goal:

A. The City Must Contract for More Supportive Housing

In New York City, four out of every five people found eligible for supportive housing have had to stay in shelter or on the street because there are too few supportive housing units available to meet the current need.¹ The City must contract to provide significantly more supportive housing to have a meaningful reduction of the City's homeless population.

B. The City Must Meaningfully Expand Eligibility for Supportive Housing

In New York City, the vast majority of supportive housing is only available to people who are both homeless and have a serious and persistent mental health condition.² While there is some very limited supportive housing available to people who have other conditions that necessitate assistance, it is extremely difficult for anyone without a serious and persistent mental health condition to obtain supportive housing.³ Only 17% of New Yorkers experiencing homelessness have a "severe mental illness,"⁴ so for the 83% of the New Yorkers experiencing homelessness who do not live with severe mental illness, it is extremely difficult, if not impossible, to transition to permanent housing. This is particularly disturbing because over two-thirds of New Yorkers experiencing homelessness have some mental health needs and could use the services of supportive housing.⁵ According to Coalition for the Homeless, supportive housing is by far the most successful way to end homelessness for individuals and families living with disabilities and other challenges.⁶

Eligibility for supportive housing must be expanded to include people with physical disabilities and other vulnerabilities to meet the needs of the growing homeless population in New York City.

¹ https://www.coalitionforthehomeless.org/supportive-housing-ends-homelessness/

² https://www.coalitionforthehomeless.org/get-help/im-in-need-of-housing/eligibility-for-supportive-

 $housing/\#:\sim:text=To\%20be\%20NY\%2FNY\%20I, and\%20 persistent\%20 mental\%20 health\%20 condition.$

³ Id.

⁴ https://bronxworks.org/wp-content/uploads/2022/02/Improving-Care-Coordination-for-Homeless-Individuals-with-Severe-Mental-Illness-in-NYC-2.8.2022.pdf

⁵ Id.

⁶ https://www.coalitionforthehomeless.org/supportive-housing-ends-homelessness/

C. HRA Should Auto-populate the Supportive Housing Applications with Information it Already Has

In order to create an application for supportive housing, shelter case managers and housing specialists require clients to provide documentation that HRA already has or already has access to get. If HRA mined its own databases to obtain this information (such as immigration status, birth certificates, copies of identity documents and verification of income) the administrative delay of collecting this information from clients (who often have to re-collect it themselves) would be eliminated and applications could be submitted more quickly.

D. Safe-Havens and Stabilization Placement Should Not Require All Residents to Apply for Supportive Housing, Regardless of Diagnosis

Safe-Havens and Stabilization placements (which house clients with a history of street homelessness) insist that all clients residing there fill out an application for supportive housing even if the client does not have a qualifying diagnosis or another basis for eligibility, and even if the client is adamant that they do not want supportive housing placement. This results in a higher volume of applications than necessary and adds to the administrative burden of adjudicating applications. Eliminating this practice will improve the supportive housing application process for those who need it.

E. HRA Must Interview Supportive Housing Applicants in a Timely Manner

This council should implement a rule that all supportive housing applicants should be interviewed within 30 days of submitting their applications.

F. Supportive Housing Providers Should Not Have the Discretion to Reject an Applicant if the Applicant's Diagnosis Fits the Population that the Housing Serves

Currently, supportive housing providers have the discretion to refuse to admit certain applicants, even if those applicants meet the criteria for supportive housing at those locations. The City, as part of its contracting with supportive housing providers, should mandate that those providers accept all referrals that fall within their diagnosis guidelines.

III- NYLAG Supports Int. No. 1153, Mandating Reporting About Involuntary Removals

Reporting about the number and cost of involuntary removals of people suspected of experiencing homelessness is essential to understanding whether the city is targeting those suspected of experiencing street homelessness for unlawful involuntary removal. Indeed, we believe that the City's policy on involuntary removals of people experiencing street homelessness⁷ is a violation of Mental Hygiene Law Section 9.41.⁸

It is no secret that City has prioritized removing the visibility of people experiencing street homelessness. In fact, the City cleared 3,198 "homeless encampments" from city streets between March 18 and the end of October of 2022 in attempt to get people to enter shelter.⁹ However, only 5% of these people entered the shelter system as a result.¹⁰ Instead, in order to

⁷ https://www.nyc.gov/assets/home/downloads/pdf/press-releases/2022/Mental-Health-Involuntary-Removals.pdf

⁸ Simply put, sleeping outside does not meet the standard for involuntary removal under 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. "Likelihood to result in serious harm" shall mean (1) substantial risk of physical harm to himself as manifested by threats of or attempts at suicide or serious bodily harm or other conduct demonstrating that he is dangerous to himself, or (2) a substantial risk of physical harm to other persons as manifested by homicidal or other violent behavior by which others are placed in reasonable fear of serious physical harm.

The City's policy interprets "likely to result in serious harm to himself or others" as "a person who appears to be mentally ill and displays an inability to meet basic living needs, even when no recent dangerous act has been observed" and that if "the circumstances support an objectively reasonable basis to conclude that the person appears to have a mental illness and cannot support their basic human needs to an extent that causes them harm, they may be removed for an evaluation." This analysis is a gross misreading of the text of Mental Hygiene Law Section 9.41, which specifically states that examples of "[1]ikelihood to result in serious harm" include threats of or attempts at suicide or homicidal or other violent behavior.⁸

⁹ https://gothamist.com/news/mayor-adams-homeless-encampment-sweeps-result-in-just-115-people-entering-nyc-shelters

¹⁰ Id.

truly mitigate street homelessness, the City must create shelters with small rooms that are more accessible to clients. Most of NYLAG's clients who are experiencing homelessness would come inside if they were offered such a placement in a safe-haven or a stabilization bed. But the need for such placements far outpaces their availability. DHS must significantly increase safe-haven and stabilization bed capacity to meet the needs of those experiencing street homelessness.

We thank the Council for the work it has 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



Testimony to the Committee on General Welfare; Committee on Mental Health, Disabilities and Addiction; Committee on Veterans; and Committee on Housing and Buildings New York City Council December 2023

Thank you for the opportunity to testify on behalf of the Open Hearts Initiative regarding supportive housing in New York City, and Introduction 1153. Our organization consists of hundreds of community members who live in neighborhoods throughout the city and seek to welcome and support homeless neighbors in their own backyards. By coordinating the donation and distribution of material resources to homeless neighbors; supporting vitally needed services for people experiencing homelessness in their neighborhoods; and pushing for legislative and administrative solutions to prevent homelessness and quicken the pathway for homeless New Yorkers to permanent housing, our chapter members build relationships across housing status and advance stronger and more compassionate neighborhoods. As part of this work, our members have built deep and long-standing relationships with homelessness in New York City–which we foreground in our work and believe is vital for the legislative activity of the Council.

Many of our homeless neighbors have exited homeless shelters and moved into permanent supportive housing, deriving great benefits from the services available at these sites. Just like transitional housing for those in the throes of homelessness, we believe that supportive housing is vital for many of our neighbors experiencing homelessness, allowing them to exit the shelter system for permanent housing while at the same time benefitting from on-site services that maintain continuity of care and ensure continued stability and success. We have advocated for these facilities in our neighborhoods, including The Lirio supportive housing development in Hell's Kitchen and the Just Home project in Morris Park.

At the same time, it is critical that residents of supportive housing have their basic needs met and that deficiencies in service provision be addressed swiftly so that all New Yorkers have a safe and dignified place to call home. All supportive housing residents deserve habitable living conditions and high-quality supports that enable them to navigate mental health and/or substance use challenges while maintaining their housing. Further, city agencies and non-profit provider partners must work closely to ensure that all vacancies in supportive housing apartments are promptly filled. A large number of vacancies in the supportive housing system, as we are currently experiencing, means that homeless New Yorkers have longer lengths of stay in an overburdened homeless shelter system and are delayed on their pathway to the permanent housing and stability that we all deserve.



The hearing also addresses Introduction 1153, by Council Member Sandy Nurse, to provide monthly reports on the occurrence and outcome of what are commonly known as homeless "sweeps." We are supportive of this legislation and recommend that additional data be included in the monthly reports, namely the number of individuals who are offered and who accept temporary shelter placements, disaggregated by the type of shelter–congregate shelter, Safe Haven, and stabilization bed. It is valuable to know the level of acceptance of services, as well as which type of shelter is most commonly accepted by unsheltered New Yorkers, to guide the development and operation of these types of beds. From end-of-line outreach in the subway system during the early COVID pandemic, for example, we learned that stabilization beds had the highest proportion of acceptance in engagements, and Safe Havens had the highest proportion of individuals remaining in their placements after accepting them.

As an organization, we have advocated to welcome and support homeless neighbors at all transitional housing-and countered the exclusionary rhetoric that commonly emerges from neighborhoods upon the announcement, construction, and opening of shelter and other homeless services sites-and we have excitedly supported Safe Havens and stabilization beds because their service model has provided extensive benefits and supports to people exiting unsheltered homelessness and proven effective in moving people from the street to shelter to housing. We need more of these!

We believe that this reporting bill will provide vital information and transparency about homeless sweeps, an opaque and disruptive process that has set us back in our fight against homelessness in New York City. Sweeps are ineffective in directing clients to permanent hosuing–leading from their tendency to break trust and relationships with homeless outreach workers among unsheltered New Yorkers–yet this policy failure has been continuously embraced by the Eric Adams mayoral administration. Such data as will be provided under the legislation-directed reports should form the basis of a coordinated legislative and advocacy campaign to end the practice altogether, and focus the limited resources of our social services and other city agencies on connecting homeless neighbors to appropriate shelters and to permanent housing, rather than punishing them for being poor.

Submitted by: Bennett Reinhardt, Advocacy Coordinator & Neighborhood Organizer



Testimony before the New York City Council

Jointly with the Committee on Housing and Buildings, the Committee on General Welfare, the Committee on Mental Health, Disabilities and Addiction, and the Committee on Veterans

December 7, 2023

Eric Rosenbaum, President and CEO Project Renewal

Project Renewal's mission is to end the cycle of homelessness by empowering individuals and families to renew their lives with health, homes, and jobs.

www.projectrenewal.org

My name is Eric Rosenbaum, I am the President and CEO at Project Renewal, a New York City homeless services nonprofit agency.

For more than 55 years, Project Renewal has provided shelter, housing, health care, and employment services to hundreds of thousands of New Yorkers experiencing homelessness. Thank you to Chair Sanchez, Chair Ayala, Chair Lee, and Chair Holden for convening this hearing and to the entire City Council for its support of our programs.

Today, I am here not only to advocate for necessary changes in the supportive housing system but also to emphasize the urgent need for additional funding to increase the supply of supportive housing in our city.

Permanent supportive housing offers a meaningful solution to addressing the complex issue of homelessness. It provides more than just shelter—it connects residents to essential services like health care, mental health support, job training, and substance use disorder recovery to promote long-term stability and well-being. However, our current system, particularly under the City and State's supportive housing agreements, restricts our ability to serve diverse populations due to its specific subgroup classifications.

Project Renewal, with our broad expertise, is well-equipped to serve diverse clients with overlapping challenges, including individuals, families, and veterans with histories that can include mental health diagnoses, substance use disorder, and incarceration. However, under the current system, when a nonprofit like us wants to develop supportive housing, we must pick a population to serve in that development. The limitations of the current supportive housing system prevent us from helping many who fall outside narrow and predefined categories but who are equally in need of our services.

We join advocates from across the sector in calling for a model that allows organizations like ours to accept any individual with an approved supportive housing application. This flexibility will enable us to utilize our resources more effectively and serve a broader range of individuals in need. Despite the availability of nearly 2,600 supportive housing units, only 16 percent of those approved for such housing were actually placed in an apartment due to the restrictive qualification criteria.

In addition to increased flexibility, there is a critical need to expand the overall availability of supportive housing in New York City. As I address you today, the gravity of New York City's homelessness crisis cannot be overstated. In September 2023, the city's main municipal shelter system housed 87,907 people nightly, including 31,510 children and 22,778 single adults. Throughout City Fiscal Year 2022, 102,656 adults and children used the shelter system.

These staggering numbers reflect a crisis that has escalated to its <u>highest level since the Great</u> <u>Depression</u>. The challenge is compounded by the lack of affordable housing, with the number of apartments available for low- and middle-income residents at a 30-year low as of 2021, and rent costs reaching record highs.

The housing and homelessness crisis requires significant investment and commitment from both the City and the State. By increasing funding and resources for supportive housing, we can make a substantial impact on reducing homelessness in New York City. It is less expensive than high-cost crisis care and emergency systems solutions. Permanent supportive housing not only benefits individuals and families in need, but also contributes to the overall health and stability of our communities.

In conclusion, I urge the Council to recognize the need for more supportive housing and the benefits of allowing greater flexibility in the populations served by individual developments. Together, with support from the City and State, we can work towards a future where homelessness is not a defining characteristic of our city but a challenge we have collectively overcome.

CITY COUNCIL OVERSIGHT HEARING ON SUPPORTIVE HOUSING DECEMBER 7, 2023 AT 1:00 PM HOUSING AND SERVICES, INC. WRITTEN TESTIMONTY

Thank you for the opportunity to submit Housing and Services Inc.'s ("HSI") written testimony.

HSI is a member of the Supportive Housing Network of New York ("the Network") (the statewide advocacy organization for the New York State supportive housing community) and entirely supports the Network's oral and written testimony.

The Network's advocacy points are appended to this written testimony.

HSI wishes to supplement the Network's testimony with its own testimony about how the following topics will impact the lives the 725 households living in HSI projects/programs, the 120 employees of HSI and HSI's ability to service its tenants.

- The remaining 10% of Mayor Adams' 15% PEGS
- The need to reallocate 6,000 currently unawarded NYC 15/15 scattered sites units
- Addressing intensifying services needs in supportive housing
- Investment in the supportive housing workforce
- Expanding supportive housing opportunities for the formerly incarcerated and for survivors of domestic violence

By way of background, HSI has over 38 years of experience as a permanent supportive housing developer and provider. We have 625 tenant households residing in 4 congregate projects and Manhattan and the Bronx and 100 households on an HRA/HASA contracted scattered sites contract in housing units situated in Upper Manhattan and the Bronx. Our congregate projects have two HRA/DHS SRO Supportive Services contracts, two DOHMH services contracts and two HRA/HASA housing and services contracts. All of HSI's congregate projects have significant HPD capital funding.

HSI attended the December 7th 1:00 pm and heard the testimonies of tenants and advocates reporting a lack of transparency, failure to provide the mandated tenants' billing of rights, lack to compliance with rent stabilization laws and other misconduct by supportive housing providers. HSI invites the Committee to tour HSI projects to observe HSI's compliance with its contractual and regulatory requirements and how HSI strives to improve the lives of its tenants.

The remaining 10% of Mayor Adams' 15% PEGS

HSI opposes the proposed hiring freeze and the remaining 10% of the 15% PEGS for HPD, HRA/DHS, HRA/HASA, DOHMH and DOB. Supportive housing is the time-proven most cost-effective way and most compassionate way to end chronic homelessness. Budget cuts to the stable and predictable costs of NYC agencies and providers do not save money but actually increase volatile unpredictable costs for what would be unnecessary EMS calls, hospitalizations, and inquisitions. It has been recently reported by Corporation for Supportive Housing that an unsheltered single adult living on the streets costs NYC approximately \$40,000 in such services annually.

Past austerities have already produced unintended cost increases. In winter 2022, the pandemicbeleaguered and underfunded HRA housing placement process slowed down creating an unprecedented average 10% vacancy rate in city-wide permanent supportive housing. For every vacant unit, a homeless person languishes in the shelter system at an estimated monthly cost of \$4,080 (based on the recent City Comptroller's report). Using an estimated number of 30,000 total NYC supportive housing units, the additional and unnecessary cost to NYC for one month's vacancy of 2,500 units (assuming that approximately 500 of 3,000 units were not ready for occupancy) amounts to an astounding \$10.2 million. Should one prefer to measure the cost by the number of street homeless single adults who could not be placed in shelter because current shelter stayers could not move into permanent supportive housing, the 10% vacancy cost approximately \$8.3 million.

In addition, HSI's two projects dependent upon DHS referrals suffered vacancy losses amounting to at least \$100,000.

<u>Reallocate the 6,000 plus unawarded NYC 15/15 scattered sites units to congregate housing and a new</u> supportive housing preservation program.

The initiation of the NYC 15/15 program was a thrilling event for the NYC supportive housing community. However, as time has passed, the program's initial allocation of 7,500 units to congregate housing and 7,500 units to scattered sites housing has proven to be flawed.

HSI has had very good experience with developing a congregate project with NYC 15/15 and congratulates NYC for the congregate program's success.

However, given the perpetual affordable housing crisis, HSI has found that the NYC 15/15 scattered sites allocation to be unworkable. The affordable housing units suitable for scattered sites programs simply do not exist.

HSI intends to keep its current HASA-contracted scattered sites program that provides a continuum of care with its HASA-contracted congregate project. However, HSI has no intention to attempt to put together a NYC 15/15 scattered sites proposal as the current RFP simply does not reflect market realties.

HSI concurs with the Network's recommendation that funding for the unawarded scattered sites units be primarily reallocated to the NYC 15/15 congregate program and to a supportive housing preservation program.

Addressing intensifying service needs in supportive housing:

HSI has been blessed with over 16 years of continuity in its senior social services management and can provide the long-term view of trends in HRA/DHS general population and HRA/HASA referrals. Even in the years prior to the pandemic, there has been a growing trend of referrals with increasing severe psychiatric disorders that 16 years ago would have been considered inappropriate referrals to unlicensed supportive housing programs. We understand that this trend is the result of shortages in NYS OMHlicensed community residences and other OMH-licensed programs, and of the chronic underfunding of NYS psychiatric hospitals that are designed to meet the greater needs of the severely mentally ill. We also note that the most prevalent characteristic of chronically homeless HRA/DHS referrals is undiagnosed mental illness.

HSI and other unlicensed supportive housing providers have accepted the challenges of serving referrals with ever-intensifying needs but need acknowledgement and additional resources to effectively provide intensive services to support these residents. This is particularly crucial given the context of a nation-

wide failure to address mental illness and the shortage within NYC of even very short-term hospital facilities for individuals in severe crisis.

We understand that Mayor Adams' efforts to force the most vulnerable individuals, who call the streets their home, into hospitals have had little impact due to insufficient supply of beds. These persons are quickly returned to the streets with no improvement in their well-being. We in supportive housing have similar experiences. Recently, a tenant presented a severe safety risk by displaying an open switchblade knife in one of our social services offices. NYPD escorted him to the hospital with the goal of receiving psychiatric care, but the tenant was discharged within hours with no referrals or services in place. This occurred despite sharing our serious safety concerns and clinical recommendations with the emergency room staff.

We concur with the Network's recommendations for:

- The deployment of ACT teams or other similar teams to supportive housing
- Improvement of the referral and replacement processes to ensure the prospective tenants are matched with the level of care they require.
- Increased ability to allow and enable transfers from supportive housing and Level II housing as needed.

Regarding the Network's recommendation for funding on-going de-escalation training, we note that, for the safety of its tenants and staff, HSI already has mandatory de-escalation training for all site staff. Currently, most service contract funding is insufficient to fund these costs. As de-escalation training is a life safety issue, training costs are largely funded by rents which should more appropriately be reserved for building operations, and which are becoming an increasingly unsustainable proposition for HSI.

Invest in the supportive housing workforce:

We strongly support all of The Network's recommendations for:

- Increasing wages and incentives
- Working with New York State for a comprehensive multi-year plan to address wages and incentives

At HSI we struggle to match consumer price index increases for our staff so that they do not actually lose purchasing power by working for HSI. Similar to de-escalation training, the vast amount of our COLAs is not funded by our contracts that usually do not contain meaningful COLAs. Accordingly, the COLAs are funded by rents. This too is ultimately unsustainable.

Most notable are our HRA/DHS SRO Support Services contracts (funded in part by NYS NYSSHP) that have received no meaningful increases in over 20 years despite still binding us to the same 20-year-old level of services.

The lack of COLAs signal to our staff that their work is simply not valued by our society and funders.

Our deepest concerns are for our lowest compensated staff-building maintenance and front staff who work 24/7/365. Our services are a non-starter if our buildings are not clean and safe. The pandemic highlighted the courage, wisdom and compassion of our front-line staff who were there every day to protect and assist our often elderly and medically fragile tenants.

As a permanent supportive housing provider, HSI is a de facto social justice organization. However, our position as such is compromised when we cannot pay just wages due to lack of contract funding.

Expanding supportive housing opportunities for those leaving jails/prison and survivors of domestic violence.

HSI is not a housing provider for survivors of domestic violence that entails a significantly higher level of security. Due to contractual commitments HSI cannot take referrals directly from jails and prisons.

However, HSI fully supports the Network's recommendations for these improvements and recognizes that the current legal system effectively criminalizes the poor and the homeless.

the Network SUPPORTIVE HOUSING NETWORK OF NY

City Council Oversight Hearing on Supportive Housing December 7th at 1PM Network Testimony Talking Points

Intro

Thank you for holding an oversight hearing on supportive housing and the opportunity to testify. I join supportive housing providers in urging the City Council to oppose the remaining 10% of Mayor Adam's proposed 15% PEGS and hiring freeze; advocating for the reallocation of the currently unusable 6000+ scattered site NYC 15/15 units; addressing intensifying service needs in supportive housing; investing in the supportive housing workforce; and expanding supportive housing opportunities for those leaving jail/prison and survivors of domestic violence.

Oppose the remaining 10% of Mayor Adams' 15% PEGS

- We join nonprofits across the board as well as membership organizations Human Services Council, Nonprofit New York and New York Housing Conference – in urging the City Council to oppose Mayor Adams' hiring freeze and the remaining 10% of his 15% PEGS.
- These cuts will have a disastrous impact on the city's supportive housing system and the already strained agencies charged with overseeing mental health and housing programs and projects, delaying development timelines and putting housing opportunities and services for New Yorkers in need out of reach.
- Critical housing and homelessness-related agencies in which New Yorkers across the five boroughs depend – including HPD, DHS, HRA, DOB, DCP, and DOHMH – are already dangerously under-staffed and under-resourced, creating delays in building and filling desperately needed housing. This cannot continue. They must be insulated from the Mayor's fiscal austerity measures. Failing to do so will unnecessarily put individuals in desperate need of safe, reliable housing coupled with on-site, voluntary services at risk – especially as the mounting migrant crisis has added strain on the homeless services system.
- If the remainder of these cuts trickle down to city-contracted nonprofits, many agencies may be forced to shut-down critical programs, closing the doors on so many New Yorkers in-need who rely on its services.



 Mayor's Adams' PEGS pointed to increased costs to serve the newest New Yorkers and insufficient federal and state aid as justifications. The agency and sector-wide cuts represent a \$9.6 billion reduction in the current fiscal year, rising to \$10.4 billion by fiscal year 2027. Analyses by Fiscal Policy Institute, Independent Budget Office and Nonprofit New York indicate that the PEGS far outstrip the cost of welcoming and supporting the newest New Yorkers. The City's request for 15% cuts across all agencies amounts to a \$10 billion reduction in one year. We join the City in calling for additional federal relief, but warn that these cuts are counterproductive to addressing the homelessness crisis.

Keep the promise of NYC 15/15 and reallocate 6000+ currently unawarded units

- NYC 15/15, a promise to create 15,000 units of supportive housing over 15 years, envisioned an even split between new development of congregate, single-site residences, and scattered site units rented on the private market with mobile case management services. Due to many difficulties with the scattered site model, eight years into NYC 15/15, only 17% of scattered site contracts have been awarded versus 80% of congregate awards, leaving 6,220 unawarded units untapped for homeless households. On top of this, infrastructure of first-generation supportive housing, created in the 1980's is crumbling and in dire need of preservation.
- For the CIty to actually fulfill the promise to create 15,000 desperately needed supportive housing units through NYC 15/15, while simultaneously ensuring we don't lose a single existing unit, it must rethink the original initiative and its unawarded 6,200 scattered site units, by adopting the Supportive Housing Network of New York's reallocation plan and instituting the following:
 - Reallocate a majority of the 6,220, unawarded scattered site units into more congregate supportive housing, preservation of first-generation supportive housing, and affordable housing overlay units, prioritizing congregate depending on the fiscal opportunity of the City.
 - Launch a new Supportive Housing Preservation program that merges capital subsidies with NYC 15/15 service and operating subsidies.
 - Enhance and align all service and operating rates. This ensures tenants receive consistent service levels and providers have uniform contracted rates, irrespective of housing type.

Address intensifying service needs in supportive housing



- Since the pandemic, the crisis of mental health and the proliferation of more addictive and deadly drugs, with overstretched staff and underfunded models, our community has been pushed to the brink. In order to meet the evolving needs of tenants and provide staff with needed supports, we recommend the City:
 - Increase on-site support by creating a clinical, rapid response, Interdisciplinary Assertive Community Treatment (ACT) team program (or similar) to be specifically deployed in housing portfolios and allow providers to apply to manage teams that are dedicated to their own portfolio and/or other housing providers portfolios;
 - Fund an ongoing de-escalation training for all supportive housing staff in order to prevent and address serious incidents;
 - Improve referral and placement processes to ensure that prospective tenants are matched with the level of care to ensure they can live independently;
 - o Allow and enable transfers from supportive housing and Level II housing as needed.

Invest in the supportive housing workforce

- Low and non-competitive wages, insufficient reimbursement of services, unreasonable staffing models and supervision options, and lack of meaningful support for supportive housing staff who encounter trauma all contribute to an acute labor crisis. Statewide, the Network found a chronic staff vacancy rate of over 20% causing strain on programs and negatively impacting tenants. We call on the City to:
 - Increase wages and incentives and #JustPay our human services workforce and fund an annual COLA.
 - Work with the State on a comprehensive, multi-year human services workforce plan to address wages and incentives, recruitment, skills, career pathways, and support, including but not limited to: create skill enhancement programs, design robust recruitment strategies, develop case management career ladder, and provide ongoing personnel support.

Expanding Supportive Housing Opportunities for Those Leaving Jail/Prison and Survivors of Domestic Violence



- 54.3% of the population in the New York City Department of Corrections (DOC) system, has a Brad H designation, meaning they are identified as needing mental health treatment upon release. To allow the thousands of people returning from jail or prison access to supportive housing, the administration should:
 - Revise their definition of "chronic homelessness" to allow stays in jail or prison of more than 90 days to count towards homeless time, to account for those currently left out of NYC 15/15 eligibility.
 - Reallocate the Justice Involved Supportive Housing (JISH) funding that was set aside in 2019 to allow for fewer beds/units at higher rates. JISH is currently the only pipeline for people leaving jail/prison to go directly into supportive housing. However, the rates for services are far too low, discouraging providers from applying. Those who are currently operating JISH programs are not willing to increase this portfolio because they have been forced to operate without sufficient funding, leading to doubling up occupants and filtering services dollars into paying for rents. By reallocating the budgeted money and re-releasing the RFP, the city has an opportunity to increase the current number of JISH units and allow providers to provide the robust services this population needs in order to stabilize and succeed in housing and the community.
- The city should also interrogate ways to ensure that supportive housing options are available for survivors of domestic violence.

Thank you so much for this opportunity to testify.

TAKEROOT JUSTICE

Testimony of TakeRoot Justice

By: Jenny Akchin, Esq.

Before the New York City Council Committee on General Welfare

Oversight Hearing on New York City Supportive Housing

December 7, 2023

My name is Jenny Akchin and I am a housing staff attorney at TakeRoot Justice. TakeRoot Justice provides legal, participatory research and policy support to strengthen the work of grassroots and community-based groups in New York City to dismantle racial, economic and social oppression. In that capacity, I work closely with and am also a proud supporter of the Supporting Housing Organized and United Tenants (SHOUT), a supportive housing tenant- and applicant-driven organization demanding dignity and rights, and holding providers and the state and city agencies who oversee them accountable for ensuring supportive housing is safe, stable and truly supportive for all tenants.

I first want to thank Chairperson Ayala and the Committee on General Welfare for creating the opportunity for tenants to speak to their lived experiences in supportive housing. For too long, agencies and providers have ignored, dismissed and diminished tenant experiences in supportive housing, resulting in the systemic issues that you are hearing about today. It is only by listening to and believing tenants, and by embracing their leadership, that New York City will be able to solve the many deeply entrenched problems plaguing supportive housing.

Intro No. 1153

TakeRoot Justice strongly supports Councilmember Nurse's bill mandating reporting on the city's practice of "sweeping" or "removing" people experiencing homelessness from public spaces, as a first step towards ending this inhumane and counterproductive process altogether. TakeRoot Justice affirms the rights of people experiencing homelessness to congregate in public spaces, to live free from harassment and abuse, and to have the right to safety of person and property.

While this reporting bill is an essential first step in documenting the scope, futility, and irreversible harm caused by NYC's practice of homeless removals, TakeRoot Justice calls for the New York City Council **to end the practice of removals and sweeps altogether**. Instead, the city must prioritize a "Housing First" approach to meet the housing needs of unsheltered New Yorkers, beginning with the over 4,500 currently vacant units of supportive housing which could immediately be put into use as permanent housing for those currently residing in public spaces.

S.A.F.E. Campaign: Pressing Issues and Opportunities for Meaningful Reform

In April of 2023, SHOUT launched its "S.A.F.E. Campaign" platform (attached) calling for major changes to the operation and oversight of NYC supportive housing. Notably, the campaign included two sets of reforms—one for supportive housing providers themselves, and a separate set for agencies who oversee and regulate supportive housing providers. This approach reflects an astute awareness that while provider misconduct or negligence is the direct cause of tenants' troubling experiences in supportive housing, the root cause is a widespread lack of agency oversight, investigation, or enforcement of its own protocols.

Unfortunately, after substantial attempts to share these proposals with DOHMH, the agency has not responded to SHOUT's requests for a since May 1, 2023.

TakeRoot Justice wholeheartedly endorses the S.A.F.E. Campaign platform, and hopes that the City Council will be a receptive partner in beginning to address these issues with DOHMH, the city's largest supportive housing-contractor, as well as HPD and DSS.

Below is a summary of a few of the most pressing issues emerging in TakeRoot's work with supportive housing tenants.

Supportive Housing Evictions:

This year, TakeRoot Justice was among several legal services providers who flagged hundreds of nonpayment evictions by several of the city's most prominent providers—including Breaking Ground, CAMBA, HELP Social Services, Bridging Access to Care, and St. Nick's Alliance. The vast majority of these evictions stemmed from a lapse in tenants' public assistance benefits or failure of a supportive housing provider to pay its own rent obligations—in other words, issues directly relevant to the providers' obligations under their services contracts with city agencies. Nonetheless, the city agencies overseeing supportive housing seemed completely unaware of the evictions and to date have taken no systemic actions to address the issues at scale. It is unacceptable that legal services providers and impacted tenants are raising the alarm bell on hundreds of preventable evictions while the agencies overseeing supportive housing are unaware.

TakeRoot Justice endorses the recommendations of SHOUT's S.A.F.E. campaign-including comprehensive eviction/exit reporting requirements and contractually binding pre-termination processes—which would significantly ameliorate this problem. By taking proactive steps to track evictions, intervene to support tenants, and hold providers accountable for their obligations to maintain secure and stable housing, DOHMH can prevent hundreds of unnecessary eviction proceedings each year and ensure that supportive housing is truly supportive for those who need it.

Substandard Housing:

One of the most troubling issues plaguing supportive housing in New York City is the widespread placement of supportive housing tenants in housing units that are unsafe and uninhabitable. This stems in large part from the supportive housing industry's extensive reliance on landlords with a track-record of negligence in providing available units of scattered site supportive housing. Indeed, New York City supportive housing providers have built long-standing relationships with some of the most notorious landlords in New York City—including Moshe Piller, Isaac Herskowitz, and Joseph Popack, the same owners that the city formally cut ties with through the phase-out of the cluster-site shelter program between 2016-2021. Even after the city decided these landlord were too negligent to lease from directly, the city continues to funnel money to the same bad actors through their contracted supportive housing providers.

This approach has the inevitable result of placing tenants in housing directly threatening to life, health, and safety. In the past year, I have advocated with tenants placed in units without heat or hot water, with active leaks posing risk of electrical fire, with collapsing ceilings or holes in walls, with mold, rat, and rodent infestations, without working elevators, or without even a lock on the front door.

Even after placing tenants into situations that providers know or should know are immediately hazardous, providers are unwilling to proactively take steps to advocate for repairs—leaving tenants to languish for months in conditions directly hazardous to their physical and mental health. In some cases, providers actively contribute to the issue by advising tenants not to call 311, for fear of damaging the providers' relationships with the city's most infamous landlords.

TakeRoot Justice endorses SHOUT's S.A.F.E. campaign in calling for immediate agency and provider interventions, including discontinuing rental relationships with known slumlords, and requiring inspection and/or certification as to the condition of apartments prior to leasing, and on an annual basis. TakeRoot Justice also supports the creation of an inter-agency task force tasked with, among other issues, commencing systemic housing code inspections and corrective action across all of NYC supportive housing.

Roommate-Shared Housing:

One of the most concerning trends in New York City contracted supportive housing is the increased reliance on roommate-shared housing across all supportive housing programs. The roommate-shared model <u>has no therapeutic benefit</u> for tenants, and serves only as a "cost-saving" approach for providers. But after years of expansion of roommate sharing models in supportive housing, it is extremely clear that the human costs of this model far outweigh any monetary savings.

The harm of the roommate-shared model should be obvious—providers with full knowledge of their tenants' health and mental health diagnoses are routinely placing tenants in shared-living situations which actively exacerbate their symptoms. This includes placing tenants with mental health diagnoses that require access to private and controlled space in shared situations that are active stressors to them, or placing tenants in recovery from substance use disorders in shared housing with tenants who are actively using drugs or alcohol. Increasingly, we hear from both tenants and social workers that this model intentionally pairs tenants deemed more capable of living independently with a roommate with higher social services needs that render them unable to safely reside alone—essentially involuntarily putting one tenant in the position of being a caretaker for another.

No tenants should be forced to live in a situation that forces them to act as a proxy for their supportive housing provider against their will, nor should the city be funding a model that is counterproductive to tenants' recovery and which places tenants in situations harmful to their mental health and well-being. The city <u>can and must</u> phase out this model beginning in 2024.

Illegal Lease and Program Documents:

I would like to begin by affirming that supportive housing tenants are legally and in all other respects <u>tenants</u> of their homes, and entitled to the same rights and privileges as any other tenants in New York City or State.

It should not be a radical statement that someone who has lived and paid rent in their home for years is a tenant, and yet across the supportive housing industry, we see providers and agencies alike treating supportive housing tenants as "program participants," "licensees," or "permanent subtenants of their providers, depriving them of basic rights to stability and security in their homes, and creating a permanent feeling of precarity that is particularly damaging for people who have experienced chronic homelessness.

Treating supportive housing tenants as anything other than tenants by virtue of their participation in a social services program connected to their health or mental health disability is also fundamentally an issue of disability discrimination—denying a tenant access to the same rights and privileges in their housing as any other tenants, solely due to their known or perceived disability status. By extension, any action by a provider or city agency that denies tenants equal rights and privileges in their housing amounts to government-sanctioned discrimination at a citywide scale.

Despite these legal rights, NYC supportive housing providers continue to provide tenants with false or misleading information about their rights in supportive housing, with no intervention or correction by DOHMH and other supportive housing regulatory agencies. These include:

- Falsely designating long-term tenants in NYC supportive housing as permanent "subtenants" of their supportive housing programs, with no rights of tenancy;
- Misinforming tenants in rent-stabilized housing that they are not rent-stabilized tenants, in violation of state law and DHCR guidance, see, <u>Emergency Tenant Protection Act</u> §5, ¶ 10-11; <u>New York Code Rules and Regulations</u> tit. 9 § 2500.9 (f)(2), (j);
- Prohibiting family members from residing with supportive housing tenants, in violation of New York Real Property Law 235-f;
- Prohibiting supportive housing tenants from having guests in their homes, or placing onerous limits on the number of guests permitted to visit, the visiting hours, or the frequency of visits, in violation of tenants' common-law right to have guests;
- Placing curfews on supportive housing tenants, and/or their guests;
- Prohibiting tenants from purchasing their own furniture;
- Imposing charges on supportive housing tenants for straightforward repairs and services, including appliance replacement or light bulb changes, in violation of the Multiple Dwelling Law and Housing Maintenance Code;
- Denying supportive housing tenants keys to their own buildings;
- Advising supportive housing tenants that they do not have the right to call 311, to initiate court proceedings, or, in extreme cases, to participate in eviction cases impacting their units, because they are not the tenants of their own homes.

These illegal rules and practices, taken comprehensively, lead many supportive housing tenants to believe that they do not have the essential rights and privileges of tenancy in New York State. Beyond the legal rights that tenancy affords them, there is a deeper and more troubling implication, in that tenants do not feel stable and in-control of their own homes, even after years of permanent residence. Most supportive housing tenants who work with TakeRoot Justice believe that they are in fact not tenants

TakeRoot Justice endorses the SHOUT S.A.F.E. Campaign's demand for issuance of guidance on uniform lease and program documents, as well as annual audits of providerissued documentation to ensure compliance with all applicable local and state laws and contract requirements. By establishing clear and lawful form notices and guidance for providers, DOHMH can take a first step in ensuring that tenants are receiving comprehensive, accurate information that is consistent with New York State and local law.

Moving On From (and Between) Supportive Housing:

The city must do more to support tenants who wish to move on from supportive housing, or to move away from their supportive housing providers to a more appropriate program. No tenants should be forced to accept services that they do not need—particularly when there are tenants who desperately want and need supportive housing services.

Yet at the moment the city's only program aimed at helping tenants relocate from supportive housing, HPD's "Moving On" program, aims to move just 50 tenants out of supportive housing and into permanent non-supportive housing by 2025, at a cost to the city of \$800,000. Not only is this deliverable troublingly unambitious (particularly in relation to the program cost), but the "opt-in" nature of the program means that providers who elect not to participate can effectively block tenants who wish to move on from accessing the program altogether. There is no other housing program that permits a landlord to "opt out" of allowing its tenants to access a third-party housing benefit sought by their tenant, and supportive housing should not be an exception.

TakeRoot Justice seconds SHOUT's recommendation that HPD revise the program guidelines to allow tenants in any program to access "Moving On," regardless of provider participation, and to expand the scope of the program to at least 100 relocations in the first year.

Additionally, the city must look at ways to enable tenants to transfer between providers, particularly where there are clear breakdowns between the tenant and provider that are contrary to the tenant's health or mental health needs. Currently, the only way for a tenant to transfer between supportive housing programs is to complete a new 2010E assessment and application, and to enter the "new admissions" queue for supportive housing through HRA, where they can wait years to be connected to a new and more suitable provider.

Troublingly, many tenants are told that they must re-enter homelessness to be assigned to a supportive housing program. Year after year, a number of tenants choose to go back to shelter or street homelessness, rather than to maintain housing in a program where they feel unsafe or disrespected. This is a shameful result of a system that fails to offer tenants in supportive housing any meaningful choices for relocation when their programs fail to meet their needs, and which fails to take seriously tenant concerns when they are raised to city oversight agencies (discussed below).

TakeRoot Justice endorses SHOUT's recommendation that NYC agencies overseeing supportive housing create meaningful and expedient mechanisms for tenants to transfer between supportive housing programs without re-entering homelessness.

Lack of Meaningful Complaint Resolution Process:

At this time, NYC DOHMH fails to offer tenants any meaningful option to make complaints about or request interventions into provider misconduct. Unlike nearly every other housing oversight agency at the state or city level, DOHMH <u>does not advertise any mechanism to make complaints about its supportive housing programs.</u> When tenants are referred to DOHMH through 311 calls, DOHMH has no formal mechanism for responding to and tracking resolution of those complaints. Tenants do not receive any record of their complaint, do not get a tracking number or notes, and often are not even formally provided an outcome/resolution report from the agency. According to numerous DOHMH staff members working in supportive housing programs, to even review the results of their own complaints, supportive housing tenants must submit a FOIL request for the agency records.

This pattern of creating barriers between the agency and tenants adds to the sense that agency does not understand itself as accountable or responsive to the tenants in its contracted programs. By continuing to firewall itself from tenant insight and feedback, agency leaders will only continue down a path of ignoring the major and systematic issues unfolding daily in supportive housing.

TakeRoot Justice endorses SHOUT's recommendation that DOHMH revise and strengthen its approach to tenant complaints, including providing tenants with documentation of their complaints, conducting a meaningful investigation with tenant input and verification, issuing a written resolution of the complaint to all parties, and monitoring compliance. SHOUT has prepared a model grievance process to share with the agency that could be implemented immediately, and TakeRoot Justice strongly encourages DOHMH to engage with SHOUT's proposal.

Conclusion:

Supportive housing in New York City faces real, urgent and systemic issues which have too long been ignored by the agencies tasked with stewarding it. DOHMH, HPD and DSS cannot continue the pattern of willful blindness and lack of meaningful interventions that have led us to this point. Instead, they <u>can and must</u> undertake meaningful and systematic efforts to revise their approach to supportive housing from the ground up.

It should be a major red flag to any agency overseeing supportive housing that their contracted providers are being credibly accused of placing tenants in substandard and hazardous housing; of evicting hundreds of tenants for preventable reasons; of spreading misinformation and imposing illegal rules on their tenants; of forcing tenants to live in situations that are untenable for their known health and mental health conditions; and of preventing tenants from accessing programs that would permit them to move on to more suitable situations.

The S.A.F.E. campaign offers a roadmap for the agencies to begin to take a different course. TakeRoot urges the City Council to stand with SHOUT in holding all NYC agencies to their obligations to serve tenants by ensuring that supportive housing is safe, stable, and truly supportive of the tenants who rely on it.

SHOUT S.A.F.E. CAMPAIGN DEMANDS

SUPPORTIVE HOUSING PROVIDERS MUST:

STOP DISCRIMINATING AGAINST SUPPORTIVE HOUSING APPLICANTS ON THE BASIS OF DISABILITY, LANGUAGE, RACE, GENDER AND SEXUAL ORIENTATION.

PROVIDE **HIGH-QUALITY REPAIRS AND SERVICES** IN ALL SUPPORTIVE HOUSING.

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STOP RENTING FROM KNOWN SLUMLORDS AND TAKE LEGAL ACTION TO FORCE NEGLIGENT LANDLORDS TO PROVIDE REPAIRS AND SERVICES.

STOP EVICTING SUPPORTIVE HOUSING TENANTS. INSTEAD, SUPPORT TENANTS TO RESOLVE ANY ISSUES AND MAINTAIN THEIR HOUSING.

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STOP RELYING ON SHARED/ROOMMATE HOUSING AS A COST-CUTTING MEASURE, ESPECIALLY WHEN SHARED HOUSING IS A KNOWN BARRIER TO TENANT SAFETY, STABILITY, AND RECOVERY.

INSTEAD, ENSURE THAT ALL SUPPORTIVE HOUSING TENANTS HAVE ACCESS TO **STABLE AND SAFE HOUSING THAT MEETS THEIR HEALTH AND MENTAL HEALTH NEEDS.**

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RESPECT TENANTS' PRIVACY AND PERSONAL SPACE, INCLUDING NOT ENTERING UNITS OR ACCESSING MAIL WITHOUT PERMISSION OR SHARING PRIVATE INFORMATION WITHOUT CONSENT.

MEET TENANTS' NEEDS AND REQUESTS FOR SOCIAL SERVICES AND SUPPORTS, NOT JUST THE MINIMUM REQUIRED BY AGENCY CONTRACTS. THIS INCLUDES MEANINGFUL ASSISTANCE WITH REFERRALS TO HIGH-QUALITY SOCIAL SERVICES, HEALTH AND MENTAL HEALTH PROVIDERS.

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PROVIDE TENANTS WITH CLEAR INFORMATION AS TO THEIR SUPPORTIVE HOUSING & HOW TO REPORT ISSUES WITH REPAIRS AND SERVICES, INCLUDING COPIES OF ALL RELEVANT LEGAL DOCUMENTS

NOTHING ABOUT US WITHOUT US! SUPPORTIVE HOUSING AGENCIES SHOULD NOT ENTER INTO DEALS WITH LANDLORDS WITHOUT INCLUDING TENANTS IN THE DECISIONS. **S.A.F.E. CAMPAIGN DEMANDS**

DOHMH AND OMH MUST:

STOP CONTRACTING WITH BAD ACTORS WHO REPEATEDLY BREAK NYC AND NYS HOUSING AND HUMAN RIGHTS LAWS.

ENFORCE THE SUPPORTIVE HOUSING GUIDELINES AS BINDING REQUIREMENTS IN ALL NYC/NYS SUPPORTIVE HOUSING.

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SHOUT

CREATE A MEANINGFUL GRIEVANCE PROCESS FOR SUPPORTIVE HOUSING, INCLUDING WRITTEN RECORDS, COMPLAINT TRACKING, AND TENANT INCLUSION IN ALL STEPS OF THE RESOLUTION PROCESS

HIRE ADEQUATE STAFF TO INVESTIGATE TENANT COMPLAINTS AND TRULY MONITOR THE QUALITY OF HOUSING AND SERVICES IN ALL CONTRACTED SUPPORTIVE HOUSING PROGRAMS.

CREATE A PUBLIC-FACING "LANDING PAGE" WHERE TENANTS CAN ACCESS CRITICAL INFORMATION ABOUT THEIR HOUSING RIGHTS AND HOW TO FILE A COMPLAINT WHEN THOSE RIGHTS ARE NOT RESPECTED.

CREATE PATHWAYS TO EXIT SUPPORTIVE HOUSING FOR THOSE INDIVIDUALS WHO NO LONGER REQUIRE ONGOING SUPPORT SERVICES BUT STILL REQUIRE A RENT SUBSIDY.

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CREATE PATHWAYS FOR TENANTS TO TRANSFER SUPPORTIVE HOUSING PROGRAMS/PROVIDERS WHEN NECESSARY TO ACCOMMODATE FAMILY GROWTH OR OTHER CHANGED LIFE CIRCUMSTANCES.

CONDUCT MANDATORY ANNUAL REVIEW OF ALL PROGRAM DOCUMENTS AND POLICIES TO ENSURE THEY COMPLY WITH THE OMH SUPPORTIVE HOUSING GUIDELINES, THEIR CONTRACTUAL OBLIGATIONS AND NEW YORK STATE AND CITY SUPPORTIVE HOUSING GUIDELINES & HOUSING LAWS.

REQUIRE PROVIDERS TO CERTIFY ANNUALLY THAT SUPPORTIVE HOUSING UNITS ARE NOT SUBJECT TO ANY OPEN HOUSING CODE VIOLATIONS AND/OR PROVIDE A **CORRECTIVE ACTION PLAN** FOR RESOLVING ANY OPEN VIOLATIONS WITH A TIMELINE FOR RESOLUTION.

CREATE MANDATORY PRE-DISCHARGE AND PRE-EVICTION REQUIREMENTS, INCLUDING REQUIRED NOTICE TO OMH/DOHMH PRIOR TO COMMENCING ANY EVICTION PROCEEDING. BEGIN TRACKING ALL EVICTIONS AND "VOLUNTARY" EXITS FROM SUPPORTIVE HOUSING

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Testimony of The Corporation for Supportive Housing Regarding A Bill Requiring monthly reports on removals of individuals experiencing homelessness and the outcomes for those individuals.

Int. No. 1153

Hello, and thank you for the opportunity to testify. My name is Emma Cathell, and I am a Program Manager at the Corporation for Supportive Housing (CSH). CSH works to advance affordable housing aligned with services as an approach to help people thrive. We do this by advocating for effective policies and funding, equitably investing in communities, and strengthening the supportive housing field. CSH is deeply committed to sustaining and increasing access to permanent housing solutions, especially for people who are highly impacted – like those involved in the homeless, justice, and emergency health systems. We have a 30-plus year track record of innovation and investment in New York City, as a nonprofit and Community Developmental Financial Institution (CDFI) that partners with city agencies, affordable housing developers, and other nonprofits.

We advocate for passage of requiring monthly reports on (1) the removals of individuals experiencing homelessness from a public place and (2) the outcomes for those individuals; and we advocate that these reports be made publicly available.

Recording this data, and making the reports publicly available, would assist City supports in responding to individuals experiencing homelessness on the streets. If the City does not have an accurate picture of what is going on, then how can agencies, advocates, and providers appropriately get involved? If the removal procedures are taking place, it is not only the morally right, but the procedurally right, thing to do to report *and* publish it. Making the report publicly available would be going one step further in transparency and would assist countless departments in understanding the problem(s) and planning for solutions to get these New Yorkers off the streets and crisis systems housed.

It is not a secret that housing providers, advocates, and city representatives feel there is a lack of publicly available data on people in crisis in the city, and especially data pertaining to people experiencing homelessness. We often have to compute educated estimates and projections, which can be seen as exaggerations or, worse, may not even cover the entire problem. This greatly impacts our City's ability to be smart with resources and to plan and prevent homelessness. With real data, we can see trends, and we can, as a City, make a real difference.

For example, the recent passage of Local Law 3 of 2022 – which requires the Department of Social Services (DSS) on an annual basis to produce a detailed report on supportive housing data contained in the Coordinated Assessment and Placement System (CAPS) and to post the report publicly as well as send to the Council Speaker – has already made an impact in prompting more accurate conversations and technical assistance opportunities to get more New Yorkers housed and out of the streets and crisis systems.

As an organization that has seen how supportive housing can be an effective and life-changing resource for individuals with mental and behavioral health diagnoses, I must add that a critical resource that could provide New Yorkers without homes who are recently released (or soon to-be-released) from Rikers permanent housing with wraparound services through the NYC program, **Justice Involved Supportive Housing (JISH)**.

Due to a lack of increased funding that matches the elevated services and staffing costs, JISH has yet to be scaled since 2019 to its intended 500 units. However, without a lack of publicly available information, experts in this field have only been able to estimate the number of individuals in need a resource like JISH, which is currently projected at 2,500. To allow for transparency and understanding of JISH funding, we request JISH funding be made to scale and to become its own line-item in the DOHMH budget, given its importance of closing Rikers.

Having a lack of available housing and scaled-up services is the real source that this monthly reporting bill would address. For this reason, we would also like to **push back against the PEG Plan and efforts to reduce staffing at already starved city agencies that are critical to housing operations.** City agencies that are critical to ensuring that housing programs are able to operate are already under resourced and under staffed. We can't expect that we can continue to move the needle on getting folks into housing, administer awards and payments, and support the pipeline of getting people off the street and into the most appropriate housing if these agencies are unable to reliably perform their duties and functions because they don't have what they need to do so. Further cuts will all but guarantee that these pain points only worsen.

Finally, I would be remiss if I didn't acknowledge the disproportionate number of black and brown men and women who are experiencing homelessness and are not able to access the housing and services they need. We are talking about those who are falling through the cracks. Therefore, knowing the statistics and shedding list on exactly *who* is being removed is also a social justice issue. **These reports will allow City leaders to move matters along based on data, not based on assumptions.** Historically racist systems and practices have perpetuated generational cycles of poverty and over representation of minority populations in crisis systems. This comes at a high cost, both literally and figuratively- the costs of maintaining crisis systems, high emergency department use, as well as the cost of housing someone in jail or prison is far higher than the investment it would take to get folks housed. These are the costs for tax payers. The other "costs" are paid by folks experiencing homelessness themselves: they are far more likely to have unaddressed physical and behavioral health issues, at higher risk for infections, complications, and being subject to violence.

Without the recording and reporting on the removals that take place, NYC City agencies, officials, council members, hospitals, providers, shelters, and advocates would not have the accurate information to respond, plan, and prevent accordingly. In fact, continuing business as usual only guarantees that we will continue to perpetuate harm and penalize people without access to homes and adequate services. We have an evidenced-based resource that addresses this (supportive housing), now we need more funding and publicly available data to actuate it. Reporting and publishing on matters related to homelessness is the first step in the direction to house individuals and decrease the amount of mental and behavioral health episodes. It puts us in the right direction to service these individuals so their needs are met and so our communities are thriving and safer for all. Thank you for your time.



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Written Testimony for the New York City Council Oversight: Supportive Housing in New York City Joint Meeting with the Committee on General Welfare, the Committee on Veterans and the Committee on Housing and Buildings December 7, 2023

Dear Members of the New York City Council,

On behalf of The Doe Fund, we're grateful for the opportunity to provide testimony today. We're proud to be a resource and a partner to New York City in addressing its homelessness crisis.

As The Doe Fund's Director of Supportive Housing, I oversee case management and other critical programmatic services to tenants across our portfolio of **616 permanent supportive units** (we have nearly **200 more in development** over the next two years). These apartments serve at-risk populations: seniors; veterans; people with severe physical disabilities and mental illnesses; HIV/AIDS; histories of addiction, homelessness and justice-involvement.

People like Lisa, who has lived in one of our supportive housing units for more than ten years. Lisa became homeless at 17 to escape abuse from her drug dealer stepfather. She spent the next 30 years on and off the streets, caught in the throes of addiction, doing whatever she had to do to survive. Eventually, she was able to get clean, get her degree, and work as a nurse for five years — only for a severe, chronic medical condition to bring her career to an end, lead to her relapse, and drive her back into homelessness.

I first met Lisa in 2012, when she came to The Doe Fund with nowhere else to go. Since that day, Lisa has been sober, housed, and cared for ever since. She is now thriving as an ordained minister, and although she is one of hundreds of Doe Fund success stories I've personally witnessed thanks to our supportive housing, her recovery has been a uniquely rewarding life experience to me.

Lisa's recovery — and countless others — has been made possible by the City's commitment to supportive housing. And people like Lisa are those most at risk if Mayor Adams's proposed cuts are put into place. That is why we urge you to **oppose the 15% cuts to PEGs** (including repealing the 5% cuts already in effect) **and the hiring freeze**. We urge you to **fully fund the Supportive Housing Loan Program and other critical HPD programs** that create more housing for those experiencing homelessness. And we urge you to **invest in the supportive housing workforce** so we can address the needs of people like Lisa.

These cuts would not only be devastating to those in supportive housing, but also those on the front lines serving them. The Doe Fund employs 110 staff members to provide case



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management, addiction recovery, and other essential services. What happens when providers can no longer fund these roles? The Mayor's cuts will *exacerbate* joblessness and homelessness at a time when the supportive housing workforce is already in a labor crisis, thanks to low wages and insufficient reimbursement of services from the City.

So we finally call on you to **increase wages and incentives for our human services workforce**, to fund an **annual COLA increase** for these workers, and to develop accountability systems to ensure timely reimbursement by city agencies.

For Lisa and the thousands of others for whom supportive housing is the singular lifeline to stability, thank you for your time.

Regards,

Yarmila Gabron, LMHC Vice President of Supportive Housing The Doe Fund

My name is Joelle Ballam-Schwan and I'm with the Supportive Housing Network of New York, a membership and advocacy organization representing the developers and operators of supportive housing.

Supportive Housing Network of NY

We join nonprofits across the board in urging the City Council to oppose Mayor Adams' hiring freeze and the remaining 10% of the 15% PEGS. These cuts will have a disastrous impact on the city's supportive housing system and the already strained agencies charged with overseeing mental health and housing programs and projects, delaying development timelines and putting housing opportunities and services for New Yorkers in need out of reach. Critical housing and homelessness-related agencies – including HPD, DHS, HRA, DOB, DCP, and DOHMH – must be insulated from PEGS.

The city must also keep the promise of its NYC 15/15 initiative and reallocate the thousands of currently unawarded units. NYC 15/15, a promise to create 15,000 units of supportive housing over 15 years, envisioned an even split between new development of congregate, single-site residences, and scattered site units. Due to many difficulties with the scattered site model, including underfunding and low-quality apartments, eight years into NYC 15/15, only 17% of scattered site contracts have been awarded versus 80% of congregate awards, leaving 6,220 unawarded units untapped for homeless households. On top of this, infrastructure of first-generation supportive housing is crumbling and in dire need of preservation.

For the City to see NYC 15/15 through while ensuring we don't lose a single existing unit, it must rethink the original plan and adopt the Supportive Housing Network of New York's reallocation plan, and:

- Reallocate a majority of the unawarded scattered site units into: more congregate supportive housing, preservation of first-generation supportive housing, and affordable housing overlay units, prioritizing congregate depending on the fiscal opportunity of the City.
- Launch a new Supportive Housing Preservation program that merges capital subsidies with NYC 15/15 service and operating subsidies.
- Enhance and align all service and operating rates to ensure tenants receive consistent service levels and providers have uniform contracted rates, irrespective of housing type.

Additionally, post-pandemic, with the crisis of mental health, the proliferation of more addictive and deadly drugs, overstretched staff and underfunded models, our community has been pushed to the brink. We urge the City to work to address unmet service needs in supportive housing and invest in the supportive housing workforce, including increasing wages and incentives and #JustPaying our human services workforce and funding an annual COLA.

Last but not least, we call on the City to expand supportive housing opportunities for those leaving jail/prison by improving the Justice Involved Supportive Housing program (JISH) and revising the definition of chronic homelessness to allow stays in jail or prison over 90 days to count as homeless time, to account for those currently left out of NYC 15/15 eligibility.





The city should also interrogate ways to ensure that supportive housing options are available for survivors of domestic violence.

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Thank you so much for this opportunity to testify.



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Testimony of Urban Justice Center - Safety Net Project

> Hon. Diana Ayala Committee on General Welfare Thursday, December 7th, 2023

40 Rector St, 9th Fl, New York, NY 10006 Tel: 646.602.5600 | Fax: 212.533.4598 urbanjustice.org | @urbanjustice Thank you, Deputy Speaker and Committee Chair Ayala for the opportunity to testify before you today regarding Intro 1153, a bill that imposes reporting requirements on DSS regarding the removal of homeless people from public space. This testimony is submitted by The Urban Justice Center's Safety Net Project ("SNP"). My name is Karim Walker and I am an Outreach Worker and Organizer at SNP and I work with street homeless New Yorkers every day.

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SNP provides direct services to hundreds of homeless New Yorkers every year, to ensure safe shelter, to defend their rights, and to secure permanent housing. SNP also encompasses an organizing group called the Safety Net Activists, which is a group of community members with lived experience of poverty and homelessness. Almost all of our members are current or former SNP clients who also found a space in SNP where they could engage with other community members in policy initiatives and campaigns. Most of our membership base are or have been homeless.

I am here today to speak about the City's practice of conducting homeless sweeps and the need for further transparency around the way the City forces street homeless individuals out of public sight. SNP works with many street homeless clients who have been swept by the City, forced to leave their homes and had all of their personal belongings tossed in the back of a sanitation truck and compacted. We support them to uphold their rights, to deal with trauma of sweeps, to replace their belongings, to replace important documents, and more.

For those of you who aren't familiar with this practice, sweeps are an inter-agency initiative involving the Department of Homeless Services, Department of Sanitation, the NYPD, the Parks Department and the Department of Transportation, where the City forces street homeless people to relocate while they throw all of their personal property away. The City performs 5,000 sweeps every year, which averages out to roughly 100 sweeps per week, across each of the five

boroughs. This bill would ensure the public is made aware of the volume and frequency of sweeps.

SNP staff, myself included, are often present at sweeps to help prevent the seizure and destruction of our clients' personal belongings. We have seen firsthand the terrible impact that sweeps have on people living on the street.

We are currently working with clients at an encampment in Manhattan who are being swept by the City on a weekly basis, without any prior notice, and having all of their property destroyed, including belongings they need to stay warm in below-freezing temperatures such as tarps, tents and blankets. This has been an incredibly traumatizing experience for our clients. We are also working with a wheelchair-bound client who is recovering from multiple surgeries and has experienced over twenty sweeps, often without notice, in the last 12 months. Repeated sweeps have slowed their physical recovery and inflicted serious psychological harm as they live in constant fear that the City is going to return and destroy all of their belongings.

The City purports to carry out sweeps to connect homeless people with social services, including housing. We know for a fact that sweeps do *not* facilitate access to permanent housing for street homeless individuals. The New York City Comptroller's Office released an audit report this past summer, which found that between March and November 2022, the City conducted 2,308 sweeps and placed 119 people in shelter. Of those 119 people, only three obtained permanent housing because the City destroys critical personal documentation, such as birth certificates and state identification cards, that they need to submit housing applications. Sweeps also destroy any sense of mutual trust between street homeless people and outreach workers and prevent them

from working together to access the kind of services that this highly vulnerable population truly needs.

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Among other things, this bill would require agencies involved in sweeps to report the interagency cost of each sweep. This information will provide us with a critical advocacy tool in our work with homeless New Yorkers. We know that in 2022, DHS spent \$61.4 million on street homeless outreach, including sweeps, but we do not know precisely how much each sweep costs across the different agencies. This bill also mandates that the City report on outcomes of agency interactions with homeless people, including involuntary hospitalizations and arrests. Making this information publicly available is crucial to holding City agencies, in particular the NYPD, accountable for escalating sweeps in a way that place inappropriate restraints on people's liberty. Sweeps are violent and dehumanizing. At best, sweeps shuffle people from one place to another, at worst, they place people in life-threatening situations as they deprive people of items that they need to survive outdoors, endangering both their physical and mental health. Our clients have lost life-sustaining medications, warm clothing, bedding, social security cards, family photos and other sentimental belongings during sweeps.

Instead of making affordable permanent housing available to homeless people by, for example, implementing legislation that would improve access to CityFHEPS vouchers, the City is spending millions of dollars on removing homeless people from public spaces. Contrary to the City's messaging regarding sweeps, they clearly serve two key purposes: to push homeless folks out of sight and punish them for being visible in public.

We urge City Council to pass this bill and ensure that there is greater transparency around this harmful practice. Sweeps are ineffective, a waste of taxpayer's dollars and have an incredibly destructive impact on the lives of the very people they purport to help.

Thank you for your time today. We are available to respond to any further questions about our testimony.

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Safety Net Project

Testimony of Urban Justice Center - Safety Net Project

Hon. Diana Ayala Committee on General Welfare Wednesday, November 15th , 2023

40 Rector St, 9th Fl, New York, NY 10006 Tel: 646.602.5600 | Fax: 212.533.4598 urbanjustice.org | @urbanjustice Thank you, Deputy Speaker and Committee Chair Ayala for the opportunity to testify before you today regarding oversight in Supportive Housing. This testimony is submitted by The Urban Justice Center's Safety Net Project. My name is ______ and I am the _____ at SNP

The Urban Justice Center's Safety Net Project assists thousands of individuals each year with anti-eviction defense legal services, public benefits, and homeless advocacy with the Department of Homeless Services agency, assisting homeless New Yorkers to navigate crises and access permanent housing. SNP also co-organizes the Safety Net Activists, who advocate on benefits and homelessness issues and is led by people with lived experience. We are proud members of The Right to Counsel Coalition and SHOUT (Supportive Housing Organized and United Tenants), New York City's first tenant led Supportive Housing Coalition and testify in support and solidarity today of their SAFE Campaign demands for a supportive housing system that is truly safe, affordable, and fair for everyone.

Supportive Housing is an evidence-based model of housing and a solution to homelessness for people with disabilities, that provides permanent housing attached to rental assistance subsidies, paired with supportive services to improve housing stability, including case management and access to psychiatric supports. It is a lifeline to the thousands of New Yorkers with disabilities languishing in shelter and on the streets in a broken and discriminatory rental market. The Safety Net Project works with significant numbers of people each year who are both applying for and living in supportive housing. While supportive housing is a needed and evidence-based intervention, it is rife with discriminatory practices of creaming that screen out the most vulnerable tenants during the interview phase. The supportive services that providers are purported to provide are often nonexistent, paternalistic, and punitive, resulting in clients having unaddressed apartment repairs and being forced into eviction proceedings. We hear from our clients time and time again that "supportive housing is not that supportive." New York City is currently experiencing its worst homelessness crisis since the Great Depression and NYC must exhaust every effort to move homeless people into permanent housing. This requires fundamental changes to Supportive Housing at both the front and back ends.

The interview process for tenancy with supportive housing providers opens the door for biased rejections that result in creaming of the most vulnerable applicants who will ultimately continue to languish on the street and in shelter, with no meaningful process for appealing a discriminatory denial. We work with clients on the street and in shelter every day, who although eligible for supportive housing, are denied based on the very symptoms that make them eligible. Per the Fiscal Year 2023 Local Law 3 Report on Supportive Housing, only 185 applicants on the street were approved for supportive housing, and *only 26 of those individuals were accepted into a housing program.* At a time of unprecedented street homelessness, and aggressive antihomeless initiatives, including street sweeps and involuntary removals targeting the thousands of individuals facing unsheltered homelessness, Department of Homeless Services, OMH, DOHMH and their contracted providers must implement a truly housing-first model with an overhaul of the interview process to meet people where they are at and to provide them with immediate access to the housing they have already been found eligible for through an often bureaucratic and intrusive application process. When an applicant has already been found eligible, it is unnecessary and explicitly cruel to have them proof their deservingness and "appropriateness"

for housing through an interview with strangers who already have access to all their application materials, including psychiatric evaluations, psychosocials, homelessness documentation and income information.

Since January, 2022 when the federal eviction moratorium ended, Breaking Ground, one of the largest supportive housing providers in NYC, filed to evict 345 of its tenants, mostly for rental arrears. During that same time period, CAMBA also petitioned to evict more than a quarter of its tenants in a Brooklyn supportive housing building. The Safety Net Project regularly represents supportive housing tenants in eviction cases, and we also step in to help them address rent arrears when their housing providers fail to assist them in navigating the bureaucracies of the Human Resources Administration and the one-shot deal process. The failures and dysfunction of these systems are often what cause tenants to accumulate rent arrears. Instead of assisting tenants facing the consequences of these systemic failures, supportive housing providers often pretend that by simply advising tenants to go to HRA, they are "supporting" the tenant. However, without the support necessary to successfully navigate these processes, tenants are left alone to face the consequences. Then, instead of getting the support they need, they get sued! Supportive housing is supposed to be just that, supportive. Our office often assists tenants in applying for OSDs for rental arrears, helping them complete applications, submitting documents, requesting HRA cancel or reissue checks that have not been cashed for their rental portion by providers, and completing public assistance applications and recertifications that keep tenants' benefits and rental assistance active. Rather than provide this support, supportive housing providers use their power to punish tenants in eviction cases, and then have the temerity to blame their tenants for this. Evictions are harmful and traumatic. They are not the answer, nor have they ever been. Providers must support tenants to resolve arrears and maintain their housing.

Supportive housing is only effective when it centers and meets the needs of applicants and tenants to obtain and maintain housing.

We have attached demands from SHOUT for a supportive housing system that is truly safe, affordable, and fair for everyone, which we fully endorse and support. We are available to respond to any further questions about our testimony.

SHOUT S.A.F.E. CAMPAIGN DEMANDS

SUPPORTIVE HOUSING PROVIDERS MUST:

1	END DISCRIMONATORY REJECTIONS FROM SUPPORTIVE HOUSING APPLICANTS ON THE BASIS OF DISABILITY, LANGUAGE, RACE, GENDER AND SEXUAL ORIENTATION.
2	PROVIDE HIGH-QUALITY REPAIRS AND SERVICES IN ALL SUPPORTIVE HOUSING.
3	STOP RENTING FROM KNOWN SLUMLORDS AND TAKE LEGAL ACTION TO FORCE NEGLIGENT LANDLORDS TO PROVIDE REPAIRS AND SERVICES.
4	STOP EVICTING SUPPORTIVE HOUSING TENANTS. INSTEAD, SUPPORT TENANTS TO RESOLVE ANY ISSUES AND MAINTAIN THEIR HOUSING.
5	STOP RELYING ON SHARED/ROOMMATE HOUSING AS A COST- CUTTING MEASURE, ESPECIALLY WHEN SHARED HOUSING IS A BARRIER TO TENANT SAFETY, STABILITY, & RECOVERY.
6	INSTEAD, ENSURE THAT ALL SUPPORTIVE HOUSING TENANTS HAVE ACCESS TO STABLE AND SAFE HOUSING THAT MEETS THEIR HEALTH AND MENTAL HEALTH NEEDS.
7	RESPECT TENANTS' PRIVACY AND PERSONAL SPACE, INCLUDING NOT ENTERING UNITS, HOLDING/READING MAIL, OR SHARING PRIVATE INFORMATION WITHOUT CONSENT.
8	MEET TENANTS' NEEDS & REQUESTS FOR SOCIAL SERVICES AND SUPPORTS, NOT JUST THE MINIMUM REQUIRED BY AGENCY CONTRACTS, INCLUDING MEANINGFUL REFERRALS TO HIGH-QUALITY SOCIAL SERVICES, HEALTH AND MENTAL HEALTH PROVIDERS.
9	PROVIDE TENANTS WITH CLEAR INFORMATION AS TO THEIR SUPPORTIVE HOUSING & HOW TO REPORT ISSUES WITH REPAIRS AND SERVICES, INCLUDING COPIES OF ALL RELEVANT LEGAL DOCUMENTS
10	NOTHING ABOUT US WITHOUT US! SUPPORTIVE HOUSING AGENCIES SHOULD NOT ENTER INTO DEALS WITH LANDLORDS WITHOUT INCLUDING TENANTS IN THE DECISIONS.

SHOUT	S.A.F.E. CAMPAIGN DEMANDS
	DOHMH AND OMH MUST:
î.	STOP CONTRACTING WITH BAD ACTORS WHO REPEATEDLY BREAK NYC AND NYS HOUSING AND HUMAN RIGHTS LAWS.
2	ENFORCE THE SUPPORTIVE HOUSING GUIDELINES AS BINDING REQUIREMENTS IN ALL NYC/NYS SUPPORTIVE HOUSING.
3	CREATE A MEANINGFUL GRIEVANCE PROCESS FOR SUPPORTIVE HOUSING, INCLUDING WRITTEN RECORDS, COMPLAINT TRACKING, TENANT INCLUSION IN ALL STEPS OF THE PROCESS, AND RETALIATION PROTECTIONS.
4	HIRE ADEQUATE STAFF TO INVESTIGATE TENANT COMPLAINTS AND OVERSEE QUALITY OF HOUSING/SERVICES IN CONTRACTED SUPPORTIVE HOUSING (NOT JUST ONCE EVERY 3 YEARS!)
5	CREATE A "LANDING PAGE" WHERE TENANTS CAN ACCESS INFORMATION ABOUT THEIR HOUSING RIGHTS AND HOW TO FILE A COMPLAINT WHEN THOSE RIGHTS ARE VIOLATED.
6	CREATE PATHWAYS TO EXIT SUPPORTIVE HOUSING FOR TENANTS WHO NO LONGER REQUIRE ONGOING SERVICES BUT STILL REQUIRE A RENT SUBSIDY.
7	CREATE PATHWAYSTO TRANSFER SUPPORTIVE HOUSING PROGRAMS/PROVIDERS WHEN NECESSARY TO ACCOMMODATE FAMILY GROWTH OR OTHER LIFE CHANGES.
8	CONDUCT MANDATORY ANNUAL REVIEW OF ALL PROGRAM DOCUMENTS TO ENSURE THEY COMPLY WITH THE OMH SUPPORTIVE HOUSING GUIDELINES, CONTRACTUAL OBLIGATIONS AND NYS/NYC HOUSING LAWS.
9	REQUIRE PROVIDERS TO CERTIFY ANNUALLY THAT ALL UNITS ARE FREE OF OPEN HOUSING CODE VIOLATIONS AND/OR PROVIDE A CORRECTIVE ACTION PLAN FOR RESOLVING ANY OPEN VIOLATIONS WITH A TIMELINE FOR RESOLUTION.
10	CREATE MANDATORY PRE-DISCHARGE AND PRE-EVICTION REQUIREMENTS, INCLUDING REQUIRED NOTICE TO OMH/DOHMH PRIOR TO COMMENCING ANY EVICTION PROCEEDING. BEGIN TRACKING ALL EVICTIONS AND EXITS FROM SUPPORTIVE HOUSING.



Testimony New York City Council Committees on General Welfare, Mental Health, Disabilities, and Addiction, & Veterans Oversight Hearing on Supportive Housing in New York City Thursday, December 7, 2023 | 1:00 PM

Good afternoon, Deputy Speaker Ayala, Chair Lee, Chair Holden, and members of the Committees. My name is Nicole McVinua, and I am the Director of Policy at Urban Pathways. Thank you for holding an oversight hearing on supportive housing and the opportunity to testify.

Urban Pathways is a nonprofit homeless services and supportive housing provider serving single adults. Last year, we served over 2,000 unique individuals through a full continuum of services that includes street outreach, drop-in services, safe havens, and supportive housing in Manhattan, Brooklyn, Queens, and the Bronx.

Of those, 703 people were served by extended-stay OMH licensed residences and Permanent Supportive Housing funded by DOHMH, HRA, and HPD. Our supportive housing programs provide independent apartment units to people living with a serious mental illness or substance use disorder in a mix of congregate apartment buildings with voluntary on-site services and scattered site units with services provided through home visits. Individuals pay 30% of their income towards rent. We also offer a wide range of additional programming to meet the needs of our clients, including our Total Wellness, Employment, and Advocacy Programs.

I join supportive housing providers in urging the City Council to oppose the remaining 10% of Mayor Adam's proposed 15% PEG and hiring freeze; invest in the human services workforce; address intensifying service needs in supportive housing; and expand supportive housing opportunities for those leaving jail and prison.

Oppose the remaining 10% of Mayor Adams' 15% PEG

We are deeply concerned about the Mayor's 15% PEG and the disastrous impact that the remaining 10% cut will have on supportive housing, homeless services, and the myriad of

nonprofit human services and social programming that the people we serve and our communities rely on. At a time when housing and community services are needed more than ever, these cuts will harm the entire system through both the nonprofit providers that perform the services, and the city agencies that develop new projects and programs, make referrals, and administer city benefits.

I want to be very clear that **nonprofit organizations cannot do the same amount of work with less funding. If 10% cuts are passed down to city-contracted nonprofit providers, Urban Pathways will be forced to reduce services, resulting in serving fewer people.** There is also a distinct possibility that we could be forced to close the doors of a program altogether.

Critical housing and homelessness-related agencies on which New Yorkers depend – including HPD, DHS, DOHMH, HRA, DOB, and DCP – are already dangerously understaffed and under-resourced, creating delays in building and filling placements in desperately needed housing. Meanwhile, people are waiting in shelters for supportive housing placements as a direct result of this understaffing.

This cannot continue. **These agencies must be fully waived from the hiring freeze.** Failing to do so will continue to unnecessarily put individuals in desperate need of safe, reliable housing atrisk – especially as shelters are overwhelmed with the continuing arrival of asylum seekers. The City must be doing everything in its power to move people from shelters into housing to alleviate pressure on the system.

Additionally, the understaffing at HRA has caused a major backlog in benefits that many of the people we serve and across the city rely on to meet their day-to-day expenses, including SNAP and Cash Assistance. At a September 27th hearing on benefits delays, the Administration testified that they had over 1,500 overdue SNAP cases and over 30,000 overdue Case Assistance cases, as of August 31st. This understaffing has real life consequences for those who cannot eat or access basic necessities due to delays in benefits administration and who spend anywhere from 4 to 8 hours on hold on the HRA benefits helpline only to not have their case resolved.

While Mayor Adams' PEG pointed to increased costs to serve the newest New Yorkers and insufficient federal and state aid as justifications, analyses by Fiscal Policy Institute, Independent Budget Office, and Nonprofit New York indicate that the PEG far exceeds the cost of welcoming and supporting the newest New Yorkers. The City's request for 15% cuts across all agencies amounts to a \$10 billion reduction in one year. We join the City in calling for additional state and federal relief, but warn that these cuts are counterproductive to addressing the homelessness crisis. The Administration must consider the long-term impact on the health and safety of our City and its residents if they continue to cut essential services.

Invest in the human services workforce

Well before budget cuts, the City has long paid poverty-level wages to the contracted human services workforce that are nearly 30 percent less than government employees' salaries for equivalent work. Years of this type of underinvestment has created the current crisis of understaffing being faced by providers that is putting workers and the people we serve at risk. Many in our workforce have to work a second job to make ends meet.

At Urban Pathways, we currently have a 22 percent staff vacancy rate across the organization. We also experience high rates of turnover, so the vacant positions are not consistently the same. The administrative burden of constantly needing to hire staff is detrimental to the budget and functioning of our organization. The dedicated staff we retain are suffering from burnout and are overburdened by the additional work they must take on due to the high number of vacancies. The lack of meaningful wage increases and no true cost-of-living adjustments over multiple years is also demoralizing to our workforce, providing 24/7 care to people most in need, while multibillion dollar wage investments are made in other sectors, including the NYPD, teachers, and city employees.

One of the biggest concerns that I hear repeatedly from our residents of supportive housing programs is that that there is not enough staff and too much staff turnover. People who have resided in a program for 5 years have often had as many case managers. This is detrimental to the quality of services our clients receive. It undermines their progress and recovery since each time they get a new case manager it erodes trust, requires them to reshare their often traumatic story, and the employee must get caught up with their case; and it has a negative impact on the safety of our programs, as new staff constantly coming into the facility does not allow for quality relationships amongst staff and residents that create community safety for all.

We call on the city to:

- #JustPay our human services workforce with increased wages, by funding a cost-ofliving adjustment (COLA) of 3.2% for Fiscal Year 2024-2025, and making a public commitment of funding for the next three years for a 3% COLA each year.
- Work with the State on a comprehensive, multi-year human services workforce plan to address wages and incentives, recruitment, skills, career pathways, and support, including but not limited to: create skill enhancement programs, design robust recruitment strategies, develop case management career ladder, and provide ongoing personnel support.

We need to make the human services workforce a thriving, marketable sector to work to hire and maintain compassionate staff needed to provide the highest quality services.

Additionally, **city agencies must provide timely contract registration and on-time payments to providers.** Our HRA contract for a supportive housing program for veterans has experienced consistent delays in payment.

Address intensifying service needs in supportive housing

Since the pandemic, the crisis of mental health and the proliferation of more addictive and deadly drugs, compounded by overworked staff and underfunded models, has stretched the supportive housing community to the brink. We need more resources and better communication to effectively respond to the needs of the people we serve.

In order to meet the evolving needs of residents and provide staff with needed supports, we recommend the City:

- Increase on-site support by creating a clinical, rapid response, Interdisciplinary Assertive Community Treatment (ACT) team program (or similar) to be specifically deployed in housing portfolios and allow providers to apply to manage teams that are dedicated to their own portfolio and/or other housing providers portfolios.
- Improve referral and placement processes to ensure that prospective tenants are matched with the correct level of care to ensure they are successful.
 - Clients who need a higher level of care should not be referred to Permanent Supportive Housing, unless the proper wraparound services are set up to ensure they have all the supports needed.
 - In the inverse, many people that can live at the most independent level of housing are also referred to the higher level of care programs through CAPS. Clients that can live at the most independent level of care in Permanent Supportive Housing should not also receive referrals to Level II licensed housing, as beds are extremely limited for those with higher level of care needs.
 - Client choice for their preferred borough should also be considered in matching clients to housing to ensure that they can remain where they have connections or established services.
- Allow and enable transfers between Permanent Supportive Housing and Level II housing, as needed, both if people need a higher level of care and if they are determined to be ready for and would like to move to a lower level of care.
 - Individuals in Level II licensed housing cannot currently move into city-funded Permanent Supportive Housing because they no longer meet the requirement for chronic homelessness. When an individual is ready to move to a lower level of care but wants the continued supports provided in Permanent Supportive Housing, they should be able to be referred directly in order to open up a bed for someone

waiting in shelter who needs that higher level of care. Currently, we have individuals residing in higher levels of care that no longer need it because there are limited options for moving on easily.

- Support better communication between the hospital system and supportive housing providers.
 - It is difficult to support a client when they are hospitalized and return without communication to the supportive housing program as to their discharge plan, which is often the case. It would be helpful to create a clear system for communication between housing and hospitals, while respecting client privacy.
- Fund an ongoing de-escalation training for all supportive housing staff in order to prevent and address serious incidents.

Expand supportive housing opportunities for people leaving jail and prison

54.3% of the population in the New York City Department of Corrections (DOC) system, has a Brad H designation, meaning they are identified as needing mental health treatment upon release. To allow the thousands of people returning from jail or prison access to supportive housing, the administration should:

- Revise the definition of "chronic homelessness" to allow stays in jail or prison of more than 90 days to count towards homeless time, to account for those currently left out of NYC 15/15 eligibility. Currently someone could have been homeless for years before being incarcerated, only to be considered no longer chronically homeless after 90 days of being in jail or prison, leaving them to go to shelter for a year upon release before being eligible for supportive housing. This puts people at higher risk of recidivism and not receiving needed services.
- Reallocate the Justice Involved Supportive Housing (JISH) funding that was set aside in 2019 to allow for fewer beds/units at higher rates. JISH is currently the only pipeline for people leaving jail/prison to go directly into supportive housing. However, the rates for services are far too low. As a JISH provider, we are not able to increase our portfolio because operating costs are insufficient. Reallocating the budgeted money and rereleasing the RFP, the city has an opportunity to increase the current number of JISH units and allow providers to provide the robust services this population needs to stabilize and succeed in housing and the community.

Thank you for the opportunity to testify. We look forward to working with the City Council to ensure supportive housing and other essential nonprofit services remain available to all New Yorkers who need them.

For questions or more information, please contact:

Nicole McVinua, Director of Policy nmcvinua@urbanpathways.org 212-736-7385, Ext: 233

TESTIMONY BEFORE THE CITY COUNCIL COMMITTEES ON VETERANS, GENERAL WELFARE, HOUSING AND BUILDINGS AND MENTAL HEALTH, DISABILITIES AND ADDITION REGARDING BILL TO TRACK HOMELESSNESS (INT. NO 1153)

Good afternoon, Chairwoman Ayala, Chairman Holden, Chairwoman Lee, Chairwoman Sanchez and to the honorable members of the committees. Thank you for the opportunity to testify in front of you today. My name is Olivia Lazan, and I am the Project Coordinator of the Veterans Assistance Project at the City Bar Justice Center, which is a nonprofit, civil legal aid affiliate of the New York City Bar Association. The Veterans Assistance Project (VAP) provides veterans living at or below the poverty line in New York City with pro bono legal assistance on issues related to their claims for disability benefits from the U.S. Department of Veterans Affairs (VA). In recent years, VAP has provided legal assistance to more than 3,000 veterans in New York City.

Today, I want to discuss the proposed bill and the potential positive effects it could have for people experiencing homelessness, and in particular, veterans. Throughout my time at the Veterans Assistance Project, I have spoken to countless veterans, many of whom are living with Post Traumatic Stress Disorder (PTSD) and other conditions while experiencing housing instability.

As of January 2022, the most recent Point in Time count by the Department of Housing and Urban Development, there were 482 veterans experiencing homelessness in New York City, with 478 in the NYC shelter system and 8 veterans unsheltered. However, a number of veterans VAP assists would not have been included in either count as these numbers omit those couch surfing, staying in cars or hotels, staying the night in hospital emergency rooms, or currently in the process of eviction.¹ The true number of veterans experiencing homelessness was likely higher.

In my role, I perform frequent intake interviews with veterans to help identify their legal needs. Through doing so, I have seen how many veterans are not provided with adequate support upon leaving the military service. Many veterans emerge not even aware of what benefits they could be owed, or what symptoms of PTSD look like. I don't have a statistic to describe that, because, unfortunately, support provided to veterans upon leaving the service is not tracked.

And for many veterans, bad record keeping is a familiar battle. Millions of veterans' military service records were destroyed in a series of fires, making it neigh impossible for them to receive needed benefits. Time and time again, we allow our veterans to fall through the cracks.

Let me provide just one snapshot example. VAP assists an Army veteran in his 20s who emerged from his time in service with several life changing conditions. After breaking a vertebra and his pelvis in a training exercise, his mental health began to decline, but his therapy sessions were discontinued by the Army due to a supposed "lack of need." During a break, the young adult veteran admitted himself to a hospital as he was suicidal and experiencing a state of psychosis. He

¹ <u>Unsheltered Homeless Veterans (va.gov)</u>

needed serious treatment that the Army had not been willing to provide, but when he returned to the service, he was cited as absent without leave, discharged other than honorably, and denied benefits. The veteran emerged from the Army as a young man with a broken back, pelvis, schizophrenia and no potential for veterans benefits or support. He experienced months of homelessness while living in a dissociative state. For many veterans that VAP assists, homelessness is directly tied to a lack of mental health support for veterans – often, as in this case, where there also is a direct connection between a veteran's mental health needs and their service to our nation.

In February of last year, Mayor Adams initiated a plan to remove all people experiencing homelessness from the subway system.² That same month, a memorandum from the New York State Office of Mental Health (OMH) entitled "Interpretative Guidance for the Involuntary and Custodial Transportation of Individuals for Emergency Assessments and for Emergency and Involuntary Inpatient Psychiatric Admissions," gave police officers discretion on removals of any person who "appears to be mentally ill" and displays an "inability to meet basic living needs," even when no recent dangerous act has been observed.³ These developments have a huge potential to impact veterans such as the young Army veteran I just mentioned, who are living with PTSD or other mental health conditions.

Last month, Mayor Adams said the city had, on average, involuntarily hospitalized 137 people a week since May. Without more specific information, it was unclear how many of them were experiencing homelessness, how many were veterans, and how many were admitted to hospitals or discharged.

The statistics that *are* available show that over the first four months of the subway initiative just 2% percent of 83,591 subway "engagements" by police and outreach teams led to a person checking into a shelter.⁴ In contrast, over just the first month of the initiative, police made 719 arrests, issued 6,828 summonses and ejected nearly 2,000 riders, according to data released by the city in March 2022. During the year prior — from January through November 2021—before the plan was implemented, there were 5514 arrests and 69755 summonses.⁵ In 2022, the same months saw a 46.8% increase in arrests and 56.0% increase in summonses. These numbers have only continued to rise, with these numbers increasing by 56.5% and 52.4% respectively in 2023 and appearing in striking contrast to statistics from 2021.⁶ This year, from January to October, there have been over 11,000 arrests and 149,000 summonses in the subway system.

With these dramatically increasing numbers, it is more vital than ever to ensure that we have increased information about people facing police removal. The proposed bill would track removals, including involuntary removals and related arrests.

² <u>Mayor Adams faces pushback from advocates for homeless after unveiling next phase of subway safety plan - CBS</u> <u>New York (cbsnews.com)</u>

³ <u>New York plan for forced 'removal' of mentally ill tests limits of the law | Reuters</u>

⁴ Few Homeless New Yorkers Moving from Subways to Safe Havens, As Enforcement Continues (citylimits.org)

⁵ <u>102826 (mta.info)</u>

⁶ <u>rpt MTA</u>

Careful documentation of removals as suggested in the proposed bill would increase the ability of city agencies and advocates to make sure no one experiencing homelessness, including veterans, falls through the cracks. I have spoken to several veterans facing housing instability that were unfamiliar with the HUD-VASH program. Tracking which specific resources are provided is essential to ensure people without housing are receiving the resources they deserve, especially for their housing and mental health. Additionally, a detailed record of costs incurred, and time spent is helpful when determining if revenue collected on behalf of the public is spent on services that benefit them. Additionally, the proposed bill should help support the decision-making process for future policy, which is especially important given these increased levels of police engagements and removals.

From the perspective of the City Bar Justice Center's Veterans Assistance Project, the proposed bill would be a positive step forward in terms of transparency about the treatment of people experiencing homelessness. However, veterans experiencing homelessness have unique circumstances that should be specifically addressed. Without determining if someone is a veteran when making a removal, an individual experiencing homelessness may not be offered the correct resources or benefits. According to the type of outcomes report the bill would ensure, a result could be to state that the individual received a voucher. But more specific language or procedure regarding offering housing vouchers may also be helpful, particularly for veterans, who could need to be made aware of different programs or vouchers, such as HUD-VASH. This could also be an opportunity to track if any veteran specific mental health resources were processed.

This bill is a step towards increased transparency for New Yorkers experiencing homelessness, but we owe it to our veterans to consider them particularly, and make sure they don't fall through the cracks.

Thank you very much to the council members for your time and your consideration.



New York City, December 6th, 2023: VOCAL-NY is a grassroots organization with over 20 years of experience fighting to end homelessness, the war on drugs, mass incarceration, and the HIV/AIDS epidemic. We greatly appreciate the opportunity to testify today, and share our perspective on the state of Supportive housing in the City of New York, as well as Intro 1153 which would provide critical information on encampment sweeps.

VOCAL-NY has long said that supportive housing is one of the most critical resources we have to save and uplift people from the dangerous and undignified position of homelessness. Members of our organizations who were able to gain a permanent place to live, and receive high quality services through supportive housing have had dramatic changes to their lives for the better. Their stories are proof that supportive housing is a worthy investment, because it allows some of the most talented and capable New Yorkers to contribute their full selves to their communities.

In recent years, however, we have seen disturbing reports from our members about the current state of supportive housing programs around our City and State. We have lost leaders to overdose, despite the fact that the supportive housing units they lived in were supposed to include access to services to prevent exactly this tragedy. We have watched as providers reject applications from people who have a clear need for support services, while filling units with individuals and families who simply need affordable homes and have nowhere else to turn.

It is critical that we work to address these flaws in our supportive housing system. The expansion of supportive housing we have seen since 2015 is one of the most significant victories in the fight to end homelessness in our City. Even the international community recognizes New York's supportive housing program as one of the most robust investments in a Housing First model by a municipality of our size. We have a duty to fund and regulate supportive housing so that it lives up to this promise.

For the last few years, the group "Supportive Housing Organized and United Tenants" or SHOUT has been doing the work necessary to articulate a series of demands that can help regulate and improve these programs. VOCAL-NY strongly recommends that the New York City council work with DOHMH and institute the following demands, developed by SHOUT Tenants;

- 1. Stop contracting with bad actors that knowingly violate housing and human rights laws
- 2. Enforce the supportive housing guidelines as binding requirements in all supportive housing
- 3. Create a meaningful grievance process that includes written records, complaint tracking, and a mechanism for oversight by the residents themselves.
- 4. Hire the staff necessary to address resident grievances and ensure that services can actually be provided

- 5. Create a "landing page" where residents can get educated on their rights and the process by which they can file a formal grievance
- 6. Create pathways to exit supportive housing for tenants who no longer require the support services being offered, but do require a rental subsidy
- 7. Create pathways to transfer from one supportive housing residence when necessary to accommodate for family growth or other life changes
- 8. Conduct a mandatory review of all program documents to ensure they comply with the OMH supportive housing guidelines, contractual obligations, and City and State law
- 9. Require providers to certify annually that all units are free of code violations or provide corrective action plans, including a timeline, to address those violations.
- 10. Create mandatory pre discharge or pre eviction requirements, including requiring notice to DOHMH prior to proceeding with an eviction or discharge. DOHMH must have the ability to track all evictions and discharges from supportive housing.

These demands will create critical oversight of supportive housing developments, helping to ensure that these developments are useful tools in our continued fight for permanent and dignified homes for all New Yorkers. Supportive housing residents are not fundamentally different from any other kinds of tenants in any other kinds of housing, and every housing model must look to the residents inorder to understand how buildings function and how they can be repaired and improved.

We urge the City Council to adopt the demands of the SHOUT tenants, and work with DOHMH to ensure that we are giving residents of supportive housing the resources they need to live long lives of dignity and security.

We also wanted to discuss Intro 1153, which would provide meaningful data on the practice of so-called "encampment sweeps", and what the outcome of those sweeps are. In its 20 year history, more members and participants at our organization have been harmed by these sweeps than we can count, and intro 1153 is a critical step in countering the false narratives about what this practice achieves.

Intro 1153 would require 2 monthly reports by DSS incoordination with NYPD, Parks, and Sanitation. The first report would give critical information about how and why sweeps happen, including, but not limited to; whether they are led by NYPD, the number of homeless people affected, and the cost to the city. The second report would look at the outcomes for the homeless individuals who have been moved from the street, including whether they were arrested, referred to hospitals or mental health specialists, or offered housing vouchers.

Countless Mayoral administrations have defended the practice of encampment sweeps, arguing that not many people are impacted by them, and those that are are connected to essential life saving services. Given this reasoning, City Hall should welcome a bill that would conclusively show how many people are actually connected to services because of encampment sweeps. But analysis of efforts by the Adams Administration to clear people off of the subways, show that

despite the prevailing narrative about sweeps, an embarrassingly low number of people actually accessed DSS services as a result of the practice.

We believe comprehensive reporting on sweeps will show just how destructive and ineffective this practice actually is, and give us the data we need to convince the current and future Mayors that it is better to focus our cities resources on policies of compassion and care, not policing and incarceration. For that reason, we urge you to pass intro 1153 into law without delay.

Thank you for allowing us time to speak with you about these urgent issues.

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Thursday, December 7, 2023

My name is Elan Cohen. I'm a PhD candidate in clinical psychology at Adelphi University. Prior to my doctoral training, I worked for 5 years in New York City's community mental health system as a paraprofessional. My research and clinical practice focus on the intersections of trauma and psychosis in the context of public psychiatric services. Problems with housing, and supportive housing, especially, feature prominently in my daily work. Supportive housing tenants often represent an assemblage of the most vulnerable and marginalized members of our city. As such, meeting SHOUT's demands is not only necessary to protect an individual tenant's legal rights—it is an invitation to reevaluate and treat New York City's dire psychosocial condition. I sincerely hope the City will accept this invitation.

The first demand, to stop discrimination in housing applications, is an invitation to address the City's shameful legacy of structural inequality in housing. Decades of psychosocial research consistently shows that structural inequality and discrimination are implicated in the etiology of psychiatric distress. Discrimination in the application process undermines the City's mission and evokes vulnerabilities that many New Yorkers share. None of us—psychiatrically diagnosed or otherwise—get to choose the environment into which we a born. Yet we all depend on access to housing to achieve psychological health.

SHOUT's demand to provide high-quality repairs and services when needed, speaks to another basic psychological need—to have our suffering heard and responded to by persons in positions of power and authority. In New York City, proper housing maintenance is allocated to those who can afford it. It is unavailable to those who cannot. This economic arrangement does not work for persons who are excluded from the wage labor economy due to psychiatric disability. From a psychological perspective, a history of willful misrecognition or denial of basic human needs is another risk factor for severe psychiatric distress. By neglecting to make repairs and provide maintenance services, the City undermines its mission in the provision of supportive housing, recapitulating factors that precipitated severe psychiatric distress.

The demand to stop evicting supportive housing tenants calls upon another basic psychological need. We each depend on being born into a world that desires our belonging. Our capacity to negotiate and resolve interpersonal conflict is contingent on this fundamental guarantee. Unfortunately, many persons with psychiatric disabilities have endured histories of rejection, removal, and exclusion from family and community. This is recognizable in the frequency by which recipients of foster care become supportive housing tenants. The threat of eviction raises the stakes of interpersonal conflict precisely because it evokes traumatic scenarios that, for some, were implicated in the formation of psychiatric suffering.

The demand to respect tenant's privacy and personal space is another invitation to address the City's basic psychological needs. As a psychotherapist who specializes in trauma and psychosis, I know that respecting a patient's boundaries is critical in the process of recovery. This is because trauma and psychosis are often linked through exposure to intrusive, unbound forces. The maintenance of appropriate boundaries not only reestablishes the possibility of safety, but it also engenders the capacity to distinguish self and other. Existing in a world with recognizable interpersonal boundaries makes it possible to emerge from the painful isolation that characterizes

certain forms of severe psychiatric distress. When supportive housing agencies operate with boundaries and restraint, they demonstrate that one individual's needs can be mediated and addressed without violating another's.

The demands to (1) render transparent, accessible information about supportive housing with a public-facing "landing page"; (2) to create meaningful grievance and investigation processes; and (3) to conduct mandatory reviews of program policies and documents bear great psychosocial importance. The lives of supportive housing residents and psychiatric service users are sometimes shrouded by shame, stigma, and privately held distress. Many persons with psychiatric disabilities have experienced conditions of abjection and dehumanization. It requires incredible bravery to advocate publicly from that position. The effort to elevate the privately held distress of supportive housing tenants to the public sphere bravely counteracts painful legacies of shame and dehumanization.

Finally, SHOUT's demand that the City creates an exit pathway from supportive housing is consistent with a recovery and human rights-oriented approach to psychiatric services. It speaks to a long-standing problem in social welfare policy—that access to basic human needs, such as housing, is contingent on a diagnosis of permanent mental disability and the internalization of a static social identity. This forces individuals to weigh the advantage of achieving their psychosocial recovery goals against the disadvantage of losing economically necessary supports. In some cases, I have seen patients thwarted in treatment because getting better would put them and their family members in a financially precarious position. SHOUT's demand here has implications beyond just supportive housing tenant's legal rights. It invites the City to revise social welfare policy in terms that transcend the contradictions of capital and care.

From: Sent: To: Subject: Attachments: HH RR <i2needhelpnowpt2@gmail.com> Friday, December 1, 2023 7:36 PM NYC Council Hearings; Testimony [EXTERNAL] WHY VETERANS KILL THEMSELVES? & POLICE BRUTALITY ROBERT HOLDER.docx

HOW ARE YOU?

WHY DO VETERANS OR PEOPLE KILL THEMSELVES?

THIS DOT GOV WEBSITE SPEAKS ABOUT SICKNESSES AND HOW TO FIX IT.

ROBIN WILLIAMS WAS A T.V./MOVIE ACTOR AND HE KILLED HIMSELF.

HE WAS ON MEDICATION. I AM SENDING YOU THE NEWS ARTICLES AND

THE DOT GOV WEBSITE.

ROBIN WILLIAMS WAS ON MEDICATION

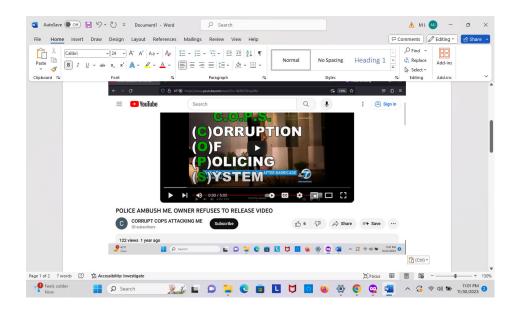
BUT FIRST I WOULD LIKE TO SHARE THE VIDEOS

OF WHAT POLICE DID TO ME.

THERE IS A TOTAL OF 4 VIDEOS

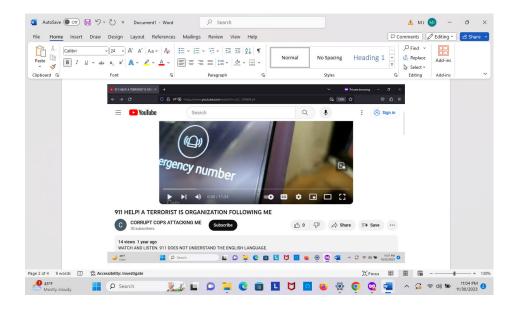
1 POLICE BRUTALLY ASSAULTED ME, ERASED VIDEO EVIDENCE https://www.youtube.com/watch?v=WJRDT8nqc0M

CAUSE BODILY INJURES AND



2

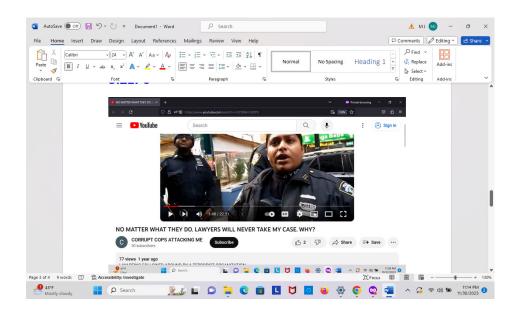
THE 911 OPERATORS WAS TRYING TO PUT WORDS IN MY MOUTH. THINGS I NEVER SAID. https://www.youtube.com/watch?v=o5_-OIW6Fy4



#3

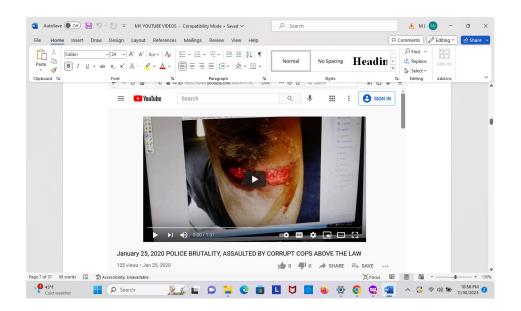
THE POLICE MADE UP STORIES

https://www.youtube.com/watch?v=QYQWm3iZEP0



#4

ALTHOUGH POLICE ERASED THE VIDEO. THEY WERE CAPTURED ON ANOTHER RECORDING DEVICE. https://www.youtube.com/watch?v=izR38QO0oOM THIS VIDEO SHOWS MY ARM



I ALREADY FILED COMPLAINTS WITH THE CIVILIAN COMPLAINT REVIEW BOARD AND THE QUEENS DISTRICT OFFICE. SO FAR NOTHING IS HAPPENING

I NEED HELP WITH GETTING POLICE REPORTS AND BODYCAMS WHICH POLICE ARE REFUSING TO RELEASE.

POLICE HAVE VIOLATED MY CIVIL RIGHTS

AND THEY ARE TRYING TO COVER THIS UP

THE INFORMATION I AM REQUESTING FOR 2022 AND 2018.

1) AIDED CARD

2) SPRINT REPORT

3) BODYCAMS

4) MEMO BOOKS OR MEMO LOGS

5) (EDP) EMOTIONAL DETURBED PERSON REPORT

6) 911 RECORDINGS

7) All officers' names and badge numbers that were involved in the incident.

All bodycam footage from every officer involved.

8) All dashcam footage from each vehicle on scene.

Any 911 or non-emergency call recordings related to the incident.

9) Recorded dispatch and radio traffic. I am requesting 15 minutes of record before and after the incident.

10) All written reports from every officer that was present.

I am requesting copies of the officer's Field Interview Notebooks as well.

11) Finally, any video, audio, picture or notes taken on an officer's personal device during the incident.

THIS HAPPENED ON MARCH 5, 2022

LOCATION & TIME

9502 Roosevelt Ave Fl 2, Jackson Heights, NY, 11372

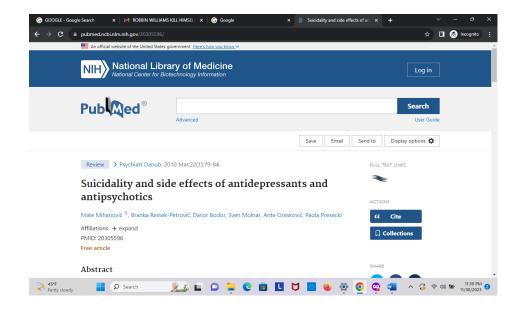
4 PM

NOW WHY VETERANS AND PEOPLE KILL THEMSELVES?

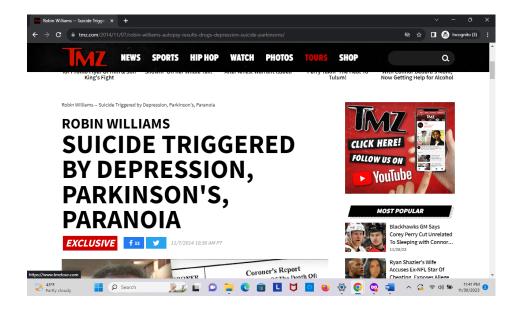
THE IS **PUBMED.GOV** WEBSITE

https://pubmed.ncbi.nlm.nih.gov/20305596/

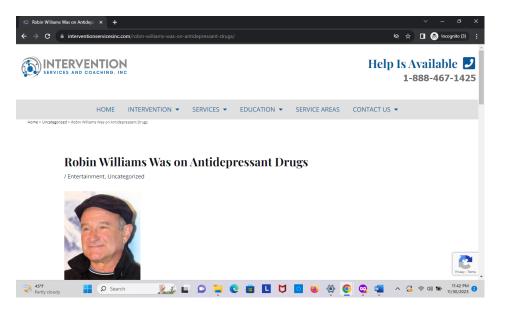
Suicidality and side effects of antidepressants and antipsychotics



https://www.tmz.com/2014/11/07/robin-williams-autopsy-results-drugs-depression-suicide-parkinsons/



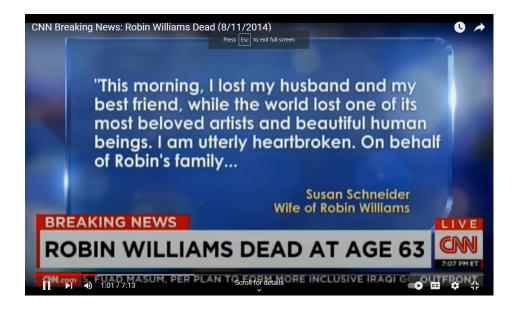
https://interventionservicesinc.com/robin-williams-was-on-antidepressant-drugs/



https://www.youtube.com/watch?v=PkVuYpH_Y1w



https://www.youtube.com/watch?v=DT8K3nTS4hw



THIS INFORMATION CAME FROM THE GARY NULL SHOW IT COMES ON

99.5 FM MON-FRI AT 12 PM.

WHAT I AM SAYING DO NOT BELIEVE HIM BUT DO RESEARCH.

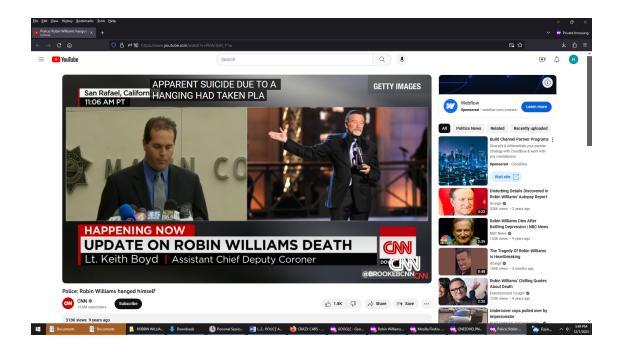
DO STUDIES AROUND THE WORLD AND SEE WHICH COUNTRIES HELP OUT THEIR MENTAL PATIENTS THE MOST.

GARY NULL MENTIONS STUDIES AROUND THE WORLD.

https://www.youtube.com/watch?v=rQKUuchZw4g



https://www.youtube.com/watch?v=PkVuYpH_Y1w



Katrina Corbell, Peer Advocate Member of SHOUT

It knocked VOCAL's socks off that all SHOUT has done has been unpaid, both tenants/applicants and support allies, solely through an attempt to end suffering and hardship. At the least. Kind of like an OWS era icon (maybe older and we just repopularized it? Thinking of ACT-UP stories and more, too!), a kid on the street with a hat out or cup out with a sigh saying "Keep Your Money, We Want Change." Of course, I saw it at a window display at an art gallery and chuckled at the cost they were selling it for.

The initial seed behind it reminds me of what a lot of us are doing. Sure, nice to get thermals or a coffee once in a while. But our intent, desire to end as much suffering for others while getting to also end or at least expose some systemic abuses and neglects that have been around for ages, that's some of the change we have been begging for. Our two cents.

A recent night I was locked out, due to a designer coin purse (according to FabFitFun at least) breaking, hence key ring falling off and needing to reestablish a new pattern of keeping metal keys and key ring with door key in credit card style pouch. An example of when being in Supportive Housing should have helped. Instead, there is a gap with no staff on site. Security is supposed to be here at 8. This night's substitute showed up close to 10 pm and said he had to wait for a supervisor. For over 3 hours I had to listen to him be on phone calls with his girlfriend of 6 years (building has thin walls, and floors/ceilings) as it led to him slamming the phone hard and making threats that re traumatized me as a domestic violence victim/survivor. I knew the things said were not to me, but hearing such violence from someone in a role to protect, and knowing the statistics of DV within policing industries made me feel overwhelmed. And I was cold. It is December. I realized the metro north was likely quieter if not safer and definitely more comfortable than the subway or bus and as it was 1:30 I had enough time according to Google maps to get to a close station for the last train. By taking it to the last stop, I waited 30 minutes for the first train back to the city, getting back to my area, Fordham, around 6am. By then the security guard, whose shift lasted until 8am, was already gone. No clue what happened, ie if shift supervisor ever showed and witnessed the behavior I did? Did he take off to the girlfriend he was threatening? Did he just ditch work like he showed up late?

Luckily staff came early so I was able to be let in to my apartment at 6:07 am that morning. Looooong after 8pm when I should have been, and what Supportive Housing is paid to provide!

Re epilepsy and seizures with Supportive Housing, untrained and undertrained staff re seizures, seizure triggers, medicine management /monitoring in certain types of supportive housing and losing benefits after moving into SH, are all stressful and can be it own trigger let alone risky in other ways like loss of ability to buy food or pay for copays, etc...

We, myself and many I talk with but are not able to be here, are trying to stress to NY City Council how large and consistent or persistent Supportive Housing issues are and at all stages, ranging from the challenges entering it, neglect from the initial day one enters it, being placed in an incorrect support level or/and never being able to move up or move on, not being able to discuss, request, let alone receive basic repairs needed with landlords due to providers fearing not receiving below market lease renewals (profits before people? Landlords neglecting basic laws, etc.), yet also at sites where the landlord is the owner of the entire property-so what's the reason then? One time by the time an off-site but still "in-house" repair team came, I was told to "be lucky" because I had only lived there 2-3 years, and I shouldn't complain for at least 8 years before trying to move out-and by then be ready to work a job such as his. I immediately turned into my Gen X, latchkey kid, youngest child, uber defensive self and reminded to him I am in supportive housing for a plentitude of reasons, including a handful of brain surgeries, currently being evaluated for another one yet Northwell, Columbia, and NYU can't get their heads together over the best strategy for moving forward but with complications with Long Covid-newest eligibility for incoming SH candidates by the text definitions, mind you, I am seeking a 4th opinion as I at least want consistency before trusting someone to surgically touch my brain, ya know? Instead, Supportive Housing providers hire staff who dismiss that tenants are carefully placed after scrutiny of proofs and even some of these staff are from Supportive Housing-do they have a confession to make? Did they sleep with someone, metaphorically, hopefully, to get an in? Do they understand not all of us can work a 9-5? Not all of us can work a job where 30% of the paycheck can afford NYC's average 1 BR apartments? Do they understand even if we could, moving into an apartment that is not SH would have the same concerns such as needing leaking pipes fixed or a broken smoke alarm/carbon monoxide alarm fixed, and if a landlord is understaffing on their end hence having one team working 3-5 buildings across three districts, that isn't the tenants' fault?

One example is our past "super." My program director explained he would help me during flood number 5 I believe? (May have been # 6. So many I lose track of which flood caused which effects.) I needed to unpack everything from having been away 2-3 weeks from an uber, bearing in mind my long covid and other health conditions. My clothes, food, bathroom/kitchen supplies (as they provided none initially and little by the end after I pleaded for basics given the circumstances), and my ESA's supplies (also due to being at less than 50% poverty levels and

having zero assistance from SH provider, I couldn't just buy new clothes, new pet supplies et al for temp location. Haul my stuff there, haul it back. Part of the expense of poverty.).

He, the super, then said no, it was not in his job description to lift anything. Um, he moves out the trash and recycling? Anyway, the day I moved in initially I had help, but that was apparently the similar 2-3 people rotating among the 1,000+ housing units around the city as needed re my landlord/provider. When a supervisory employee assures an employee will assist, and the employee refuses, what do we as tenants with documented disabilities–both mental/emotional and physical do? In my case I just did everything myself {h/t to the Generation X "feral kids" who raised ourselves (aka latchkey kids)} and took extra muscle relaxers and documented with my SHOUT-affiliated social workers/lawyers later as yet again, zero support from alleged supportive housing and due to a building emergency. Especially, also, when at that instant, Uber isn't going to wait for corporate ladders. Clock is ticking, price is escalating.

I do get more support from third party security guards at time. Depends on which ones are on shift and which ones have quit or been fired. Which ones can handle fire sparks on the wall when upstairs neighbors' behaviors lead to flooding leading to my circuit breaker becoming flooded and which ones just run away. Those who run away shouldn't be in support or protective roles? True, until a time of legit emergency or crisis one may think they know how they will react or are trained to respond a certain way, but I will not be surprised if our providers are paying lowest bidders hence less experienced workers all to save expenses and increase profits, versus provide tenants support.

Lots of things Housing Justice For All rallies and Met Council for Housing events have talked about so beyond Supportive Housing, but SH providers keep denying these problems exist and a lot of tenant unions/councils in years past encouraged SH occupants to just go to SHNNY or call 311. Even 311 used to send building complaints re Supportive Housing to NAMI. NAMI had nothing to do with a SH provider not repairing a heater! Stop disbelieving tenants!

We at SHOUT did help push winning what became Local Laws 3 and 15 in 2022 our first year, hence most in NYC are recognized as tenants. I remind myself SHNNY resisted these. Stories for later. Exhaustive, but victory nonetheless. So this hearing has the potential to be like another huge step, to note the city (and state) can't keep fingerpointing at each other or HUD denying any accountability hence responsibility or liability while individuals and families with whatever hurdles led them into SH are left struggling alone, as isolation isn't typically good to begin with period, let alone ones with health obstacles.

Some of what I predicted had become discussed by providers and providers lobbyists. My hunch, again, was based on the countless hours of past hearings on other topics relevant to these

providers wearing other hats, dodging responsibilities, always blaming staff turnover and claiming they need more money.

"We need more money."

"We have a high turnover/job vacancy rate"

"The tenants/occupants/residents don't want services"

We aren't their providers, only their housing.

As these excuses keep getting older in a rinse and repeat sort of way, ask why? Look at the state comptroller's report over why when audited funds for tenants gets caught on employee parties, alcohol, CEO type expenses, etc. And not just a few dollars, a lot.

I was promised so much during my intake interview while I could decide if I wanted to choose them as my provider or another. I was led to believe they would assist me with applying for the in home assistance (like a PCA), finish applying for Access A Ride, complete other programs I was applying for, assist with medical-based, documented challenges with organization and clutter, assist with the long, lengthy, and heavy process of getting a restraining order, plus all I needed to apply for SSI.

They did nothing.

They also did not give me a copy of my lease or other paperwork, claiming a virus in their network prevented that. Also, they had me to a walkthrough of one apartment, then when I moved in I was given a different apartment. Significant differences such as the one I was supposed to get did not have a downstairs neighbor and I would not be able to hear every phone conversation and song played, sneeze, belch, yawn, and talking in sleep that comes from my neighbor.

Though, I will admit I am grateful she is unable to have had the opportunity to hear any such things from me, to the best of my knowledge. I need to talk to architects who knows sound engineering to know for sure though, and so we can mitigate better buildings for future approval, so future tenants have access to right to privacy and quality of life. On my bucket list of hopeful things/ways to contribute, to prevent more from having to endure as much as I have had to? Again, tends to be a GenX thing. Lol.

One of my apartment's 5-6 floods since I've been there, as my landlord acknowledged it's had floods before (the very day I moved in I noticed an odd shape on the ceiling like a toilet rim; as it

wasn't the apartment I had done the walk through for I was concerned and asked, hence when I was informed of the prior flood patterns. Hadn't realized what was about to unfold, SEIZURE THOUGHT SPACE OUT), led to a contractor revealing to me that the wrong size pipes were used in the building for the hot water heater. That has nothing to do with supportive housing versus low income versus general. Has to do with crony capitalism and lowest bidders winning then sub contracting and subcontractors trying to make bank...even if then they may not be awarded future contracts, who's to say they don't change their name to bid under an alias?

The campaigns I have worked under and fought for stretch wide and far but advocate for the poor having a voice and not having their voice silenced. Realtors, landlords try to minimize our rights and our concerns and want to keep getting more profits and more buildings and more income but without doing more work. Shifting the work onto others for no money. College interns for academic credit. Libraries, for free. Other places that give out food for free. To keep saving them money.

Based on what was said in the hearing: know that Supportive Housing providers may receive housing for veterans, but then decide or find loopholes that as long as 50% plus 1 unit are veterans, the rest we can delegate as needed. The veterans who live in the building are not happy. Non-veterans tend to not be informed they are being moved into a dedicated veteran building. Is a Supportive Housing providers intending to cause friction, or just good at it? And I hadn't known there was a shelter for veterans, but had a hunch based on friends from Occupy Wall Street's lived experience shares that vets would be among the street homeless and to work with VA hospitals if one genuinely wanted to fill empty spaces in a veteran housing building designed for vets.

One other thing to flag is Long Covid. Symptoms and intensity vary, but for some who have the worse of it they are losing the ability to work, are plummeting through any savings, and have been entering the SSD and SSI battles. Soon may need to enter Supportive Housing either through high cost medicaid or 2 or more medical conditions or a severe mental illness as some with long covid can be diagnosed with new or worsening mental health disorders, as well as stress from having COVID-19 and PCAS/long covid. Are NYC providers providing for this yet? Or is it like me in 2013 when 2 or more health conditions (physical or/and mental) was met but providers with the 2010e process kept choosing not to follow through?

In 2018 trying to escape an abusive ex boyfriend, Bailey House at first said there was no immediate service, I had to wait 30 days for an appointment. I called a different department and asked re trauma treatment wasn't there someone to talk to to address the recent trauma to prevent it from becoming more PTSD, not wait 30 days... she took me over to counseling as she agreed

with me and a receptionist at the counseling side was upset that I had gone I guess over her head? I had no idea who anyone was, I just needed help.

It dragged on like this for 5+ months, as Bailey House insisted their providers need not follow the Fair Housing Law as otherwise they will lose contracts with them. They said some contracted landlords even prevented Service Dogs. I corrected the employee saying that violated ADA, but he insisted keeping friends with the landlord was more important, otherwise the landlords wouldn't renew their contracts. Bailey House and I parted ways when they said, as a street homeless client, I would have to tie my cat to a tree outside their facility during my mandated therapy required before they would finish my 2010e. I said, how about the therapist come outside to have a session with me there, as a train, metro north, is right there, plus cars, plus taxis, plus lots of people– and my cat, my emotional support animal, has her own diagnoses of anxiety x 3 (general, environmental, and I forget the 3rd at the moment (may be situational?) but I love her hence why I fight for her…she senses my seizures, my bleeding, even my covid before I realized I was sick/bleeding/seizing!!), hence tying her to a tree won't work even if I trusted the over 8 million people of NY to not catnap/ rescue her…she also has strong Houdini skills!!

Many of us tried working with Project Renewal, 2013-2018 give or take. Back to working with interns, but the catch seemed to be if you smiled or said you were having a fine day you we're denied eligibility for a 2010e. Met people in shelter years later because of such as we shared stories.

Others testified they have things available online for us...not all applicants and tenants have internet service. Not all of us have internet capable devices. Not all of us can afford internet. I was moved into a SH unit with \$45/month Cash assistance with the expense of an ESA, and then notified I was going to have to pay for my own electricity and own internet. I wasn't told until after I called Con Ed 6 months later that we had a private contract with Verizon. Even Con Ed apologized for not knowing.

When I moved in, all I was given was an incorrect phone number for ConEd scribbled on a ripped envelope. That was my "congratulations for surviving for so long and making it to this point" certificate. Hopefully I still have it, but may have been tossed during flood clean up, with thousands of dollars of health care items, prescriptions, gift cards, laptop even. Things in cabinets not related or near the flooded floor. Have a hunch the hired company was used to apartment cleaning meaning someone died so just throw away everything.

I wanted to get a storage unit for holiday, camping, and off season items to help me squeeze into my efficiency studio, as friends in the city do have a dining room and living room, or just room in their kitchen for a box of cereal to fit. An employee at the time of my housing provider insisted that anything I took to, placed in storage I would not be able to bring back into my

apartment. I asked him if he knew how silly he sounded. Did I need winter thermals, winter boots, a space heater, Halloween decorations in June? I challenged him with how would he know if I brought it back? Was he suddenly going to be working during his shift? A bold move on my part as he spent 15 hours a week working a 2nd job claiming he was modeling for us the business hours of "9-5" even though his shift was 12-8, so some of us who may be returning in the evening could still have our meetings, do paperwork, etc. When SH tenants assert ourselves, providers tend to find a way to reframe it negatively though. Hence why we encourage finding peers, advocates, allies, attorneys, and documenting every instance so providers cannot keep getting away with all of these same neglects et al.

My current SH Provider tried to get tenants to amplify concerns about another tenant's dog. Because of how things my wall is I could hear her asking my neighbor if she would say x, y, and z. When she had asked me I refused and had to stand my ground. The neighbor's dog had kept escaping by opening the door and a large dog suddenly appearing did trigger my PTSD. But I was able to let my landlord know if that was a universal issue versus a building being cheap issue, we would have dogs escaping every day in NYC. Why aren't we? I was exasperated with how much energy the provider-landlord was putting into getting SH tenants to turn on each other. Apparently, maybe, what I said got to someone as agency maintenance workers came and we're able to install a new doorknob for the dog owner neighbor and the dog was no longer able to open the door.

Another maintenance worker insisted everything is in bad condition or low quality just because that's how it is, and we should focus on getting out. He was in supportive housing for eight years and now has a job hence can live elsewhere. Gee, great. Working for the provider yields a paycheck to afford rent in NYC, but again, some of us are in SH due to disabilities not allowing us to work, esp where we have monthly incomes 3x the cost of rent where studios and 1B apartments are \$2,500-7,000, starting? Heck, in Manhattan some start at \$18,000 per month! Picture earning three times that. Capitalism.

I'll also toss in we have houseless or unhoused people sleeping in cars, at least in outer boroughs. If we need to be aware of how to assess, count, plan to care for them as winter approaches versus criminalize them.

And keep asking us more about our 2010e and shelter and street homeless experiences. There isn't enough space even here to put the 14 months in shelter following the 3 years on streets and 4-5 years I was "couchsurfing" homeless still experiencing the various treatments and back and forth answers and neglect from WeCARE or FEDCAP, HealthFirst also claiming to offer housing placement, Urban Pathways assumes anyone who says they are not addicted to drugs is denying it hence then not ready for treatment hence denied housing–they refused to accept my challenge of a blood test to prove I had zero substances in me. One interview asked if I would trade my ESA in for a fish, because a fish would be easier for them to take care of. Gratefully all sides agreed I was beyond their level of care hence I did not risk getting on any ghost list for saying no to an offer, and I hugged my cat assuring her she would never be traded in for a fish (nor tied to a tree!).

These are but glimpses of what Supportive Housing providers are up to, have been up to, continue to say, do, act. Maybe SHOUT can work with key agencies to start the investigations to document discriminatory practices? One of these days. So much tracking to get into the system and I hope to not cause others to endure such hardships just for a neutral interview. But somehow, hopefully there can be more oversight, accountability, transparency in the Supportive Housing industry, other than the self-reporting which has not been successful so far.

Thank you, Katrina Corbell

Written testimony of Michael Andersson

Before the New York City Council Committee on General Welfare Oversight Hearing on New York City Supportive Housing

December 7, 2023

My name is Michael Andersson. My pronouns are he/him. I live in the north central Bronx. I have been a member of SHOUT since April 2021. I have been a volunteer at NAMI-NYC for the last 15 years.

I was diagnosed with bipolar and PTSD back in 1997. I am 52 now and was 26 at the time. For 8-9 years I struggled in and out of psych hospitals- with suicidal ideation, depression, and mania (all related to bipolar and PTSD). In 2005 I was put in a hospital in a psychiatric ward. At the time, I was homeless and had no viable place to go. I was hospitalized for three months and then released to supportive housing. When I was applying and given my interview, they saw me as someone coming from the hospital. I didn't have to go on a million interviews. They actually let me leave the hospital to go to the interview. For me, I feel like the process was short and I lucked out– I ended up with this provider. There are plenty of others I wouldn't have wanted to live with. The fact that I was doing the application process while in the hospital made all the difference in the world. I didn't have to jump through hoops that others do.

They released me to a roommate situation in scatter site housing. I had two roommates and my own room. There was a lot that was wrong with the situation. I didn't have a lock on my door: my window had access to the fire escape so I couldn't lock it. One of my roommates was so symptomatic that he would walk around the apartment and laugh and talk. It was not ideal to not have a lock. I did have a very nice room, though. Of my two roommates, one would put food under the bed, and another would leave steak out. There were roaches everywhere; I couldn't eat in the kitchen because of it. There were other conflicts that came up with these roommates: for example, one of my roommates sold my VCR without my permission. Social workers were good at coming three times a week and counting my meds. But apart from that, they never did anything about my roommates. My super said that he wouldn't come to fix the toilet, because my roommates were flushing things down.

I wish they had sat us all down and said "you are going to be roommates now. It doesn't mean you are going to get along." But the only expectations they gave were- your chores have to be done. Our living room was always tidy. But I wish they could have said: if something isn't working out, this is the protocol. We were copacetic, but never had a formal introduction and never really got along. One roommate would walk through the halls and cackle. I was a little wary of him, and a little bit scared. One time he said "we are roommates, you should come into

my room." But it was literally in the second year of living together. And the other roommate didn't want to be bothered. I don't know if I told social workers about the steak and dishes. I was scared of retaliation or that my roommates would get mad– I felt that it was much better than my parents', and I was out of the hospital. But also, why didn't the social workers notice it? I had to live for two years with those roaches- I was eating at Burger King every night. Social workers came and checked the common area but didn't make it a rule that you couldn't leave food out. It was hard to live in these conditions– but it did make me want to graduate much faster.

15 years ago I graduated to my own one bedroom in the Bronx. It is a slumlord situation (we have a D energy rating). But we have had great caseworkers. I have a new case manager every year- they tend to be interns from Lehman School of Social Work. They always try, but then their time is up. Case managers keep trying to get repairs done from the landlord and management company and it's like pulling teeth. I've had water leaks and part of the ceiling cave in– they will patch that up pretty quickly but won't paint over it. Two years later there is still this unpainted part– why couldn't they have taken 2 seconds to paint? And when the super does actually do repairs, he is often dismissive: one time the super came up to repaint an area and said "I thought you had a flood"- as if the concern wasn't important.

I don't feel 100% or even 50% like this is my home. Even though I believe it's permanent supportive housing - there are rules. Even when the supervisor comes once a month and says it's an inspection– that word carries a lot of meaning. Sure, a lot of it is bedbug education and stuff like that– so it's important. But that word "inspection" – there is something there. It doesn't make it feel like the home is yours.

I've always gotten the feeling that you can't really entertain or can't have people stay over. When I started living with roommates there were much stricter rules— it felt like a halfway house. It's like you have a room, you don't know the roommates, and you have to make it work. That first roommate experience is where the idea got lodged of the space not really being my home. With my roommates, we weren't friends. I never had a single guest over in those two years except maybe my parents. My roommates were very symptomatic and there were roaches everywhere. I didn't want to invite people over at the time. When you first sign your lease, one of the things that's on the lease is "I will not have pets, I will not have guests for x period of time." Even if it was a short period, it said I would not have guests over. When I moved into my own place, that carried over. I can count on my own hands the number of times I have had a friend over. The provider said "we want to be sure you're not harboring people." They stressed that really strongly. But they didn't stress the other part- that this is your home. The roommates thing was tricky—but in my own home I should feel more comfortable. Yes I live far up in the Bronx, so it's not easy for people to come over. But it's also a safe space for me. I come from a background of a lot of abuse, and I can have privacy. That is a factor- but I also really wish the provider had

said "let's look at reasons why you would have someone over and why you can or can't." That would have been really really nice, because it's very unclear.

There are other things that happen that make me feel like my apartment is not truly my home. The provider treats everything like OMH property. All my light fixtures are exposed light bulbs. It's really not good on my eyes. I wanted to get some simple fixtures- like one of those glass plates. They said no you can't. I asked if I could pay for it, and they said you can't. I don't understand the light part. As a tenant you can't take some things into your own hands because the case manager might report it. Or, I wanted a second air conditioner- they said "yes, but we won't help you out." They said we will get you a new one in the living room. But I do everything in my bedroom. It's little things like that. I said "what about a ceiling fan?" They have their OMH line- "we can't do things". I also couldn't paint my apartment a different color or put wallpaper up. You can't even throw anything away- if I wanted a new mattress, they say "we have to determine if your old one needs to be replaced." Even if I say I will buy it myselfbecause I can feel the mattress springs- then I still have to hold on to the old mattress. When that happened, it was a year and a half or two years where there was an old mattress in my apartment. They have such extensive protocols. Here's another example: at the beginning I was really happy with my experience and was so happy to be out of the hospital, which was really traumatizing. I brought a little gift to the CEO and she said (in front of everyone) "we don't accept gifts". I get the setting boundaries part, but it was embarrassing. It's terrible to embarrass someone in front of the whole meeting. But then I was like okay, that's their rules. I get that certain rules have a purposeIt's things like that, though that don't make you feel like you have a lot of agency.

The rules show up in other ways, too: they fill out forms a lot of times. They ask things like "Is your doctor the same", etc. They ask me all the time if I have I gone to previous appointments. Yes, it's a lot of paperwork and phone calls– but at the same time I don't mind. I like having that backup person who is keeping a binder on me. I am getting that housing because of OMH and they have to know I'm in treatment. They also offer various programs that are useful. I started smoking a number of years ago. They have a smoking cessation meeting and I went and it really helped me. They also have 12-step meetings. They do really offer a lot, but there are definitely other areas that I'm not really thinking of right now.

All in all, I've been living here now for 15 years. I don't feel the neglect that I hear from othersthough it is not perfect. I want to stay here and am not interested in moving on. The provider has tenant meetings once a month and there are socialization activities once a month— we go bowling, or to botanical gardens, or City Island. If they have extra in the budget- they will reach out. They also encourage people all the time to do Moving On. It's not one of those places that won't encourage you to move on. I have a big apartment with four closets and an eat-in kitchen. They pay \$1000, and I pay 30% of my income. I don't know where I could find an apartment like this in the 5 boroughs. Living here has enabled me to go back to school and get my MSW. I have been volunteering for NAMI-NYC for 15 years, and have been volunteering for SHOUT.

It's been good in that the head of the agency has stayed the same. He has been really good and is good at training these interns. During the pandemic they were helpful in getting masks and gloves and telling us where to get vaccinated. I have an 80 year old mom and she lives very close, but during that time she was immunocompromised. One useful thing that the provider offers is a 24/7 emergency phone number. My mom is 80 and may not be able to respond and pick up the phone. God forbid I have a manic episode and am in jail, that could be my one call. I find that comforting and the number is memorized in my head. They are also good about holidays- they know that people can be isolated. They have a Thanksgiving and Christmas get-together. Even during the pandemic they had people come and pick up food. They give us gift cards and pots and pans. When they get a grant- they call and ask if I need a new piece of furniture. That feels really good. Or "do you need an AC, we don't want you boiling up during the hottest summer on record? Do you have a microwave?" They also support in other ways: I have cataracts in both eyes- the first surgery I'm getting done is upcoming. My case manager is taking me there and we are going by Uber. They are paying for it, getting me there and back. I have a follow-up with my eve doctor the next month. It's a lot to ask a friend or relative to do that, so it's nice to know that that's under their roles.

Before the pandemic, we used to have tenant meetings once a month. They were trying to connect reps from our Tenant Advisory Council to other groups like Community Access. They wanted a big TAC rep. I thought that was great. Tenants need to know that organizing is really important. The idea that we are stronger in numbers. It would be great for these TAC meetings to know about SHOUT, to spread the word. I also haven't seen from my provider a bill of rights. I have been tentative to mention my own work with SHOUT- it's a matter of trust. That says a lot if you are so involved in an org like SHOUT and you can't go to your TAC meeting because you are scared of your retaliation? It speaks volumes to have that fear. I'm really happy with how I live and where I live, but it's interesting to be scared to say "where is my bill of rights." I think it shows that even though I've had a much more positive experience in supportive housing than many, I still feel that fear.

<u>Testimony of Theodora Ranelli</u>

Before the New York City Council Committee on General Welfare Oversight Hearing on New York City Supportive Housing

December 7, 2023

<u>Intro</u>

My name is Theodora Ranelli. I've been a supportive housing tenant for almost 9 years in scattered-site housing and have been part of SHOUT since the organization came together. I used to live with roommates but currently live on my own, a change that came after a long period of advocacy to get my provider to honor a reasonable accommodation. The takeaways I would like Councilmembers to have about my experiences with New York City's supportive housing system are this:

<u>First, there are many barriers to access in the application process.</u> I first got into supportive housing in 2015. I had started looking in 2012 or 2013.] I had a unique situation in that I didn't go through the shelter system. I was couchsurfing and my therapist at the time helped me write an application. It took 6 months to get approved. For my first interview, I was told by my care coordinator to think of it like a job interview and put your best foot forward. So I said, okay I'll talk about being independent. But then they told me they couldn't give me housing because in the interview they asked if I was suicidal, and I said no. But in my history, there was mention of a history with suicide. And they said, "you lied; we will give you a chance to do it again, but you have to not lie." It was terrible. It's so hard to know what you're supposed to say to these people– if they say you're too mentally ill, they won't give you housing, and if they say you're too independent, they also won't give you housing.

Second, the supportive services offered by my provider have been both insufficient and invasive. I did have a positive experience with one staff member: I had the same case manager for 7 years, which was rare. He was really good. But, after my case manager left, we went through 3 case managers in one year. They would come for like 10 minutes and said they would be following up about different things, but would always come back to it on my next visit and I would have to repeat myself. It felt like they were just seeing if we were alive.

When I first moved in and there were immediate issues going on with the building and apartment, I kept calling the program director to try and escalate the situation. I remember that once she said "you should be grateful." No! Everyone deserves safe and stable housing.

Another time, I was texting with my program manager and said that I wanted to go to a respite. They said that because I sent that message in text, for liability purposes they had to call the police. Although I did finally get someone on the phone and told them that I'm okay and not to send police, I was still up waiting all night to see if the police would come. I got very upset and it heightened my mental state.

<u>Some of my worst experiences with supportive housing had to do with neglect on the</u> <u>landlord and super's part.</u> My provider would just say "the landlord is terrible, but you should be grateful for having something." They didn't do much to engage the landlord– they didn't put pressure on or withhold rent. In my old building, there were two elevators that kept breaking down but never got replaced. There were a lot of people including myself with disabilities who lived in the building. We also faced harassment from the landlord. At one point someone on the floor made a 311 complaint about roaches. Even though I didn't make the complaint and neither did my roommate, the landlord called us both and said "we will put you through hell if you continue to call 311."

Also, I've had two roommates as a supportive housing tenant, and right off the bat, there was basically no structure of support on how to live well together or navigate conflicts. (Although both situations were for the most part okay, there was definitely severe conflict at times that my provider didn't do anything to resolve.)

Lastly, I had an active reasonable accommodation for two years that the provider did not escalate. I was asking to live alone and also to live in Queens- that's where I used to live and where all the people I know are. For the past year and a half I had worked with a lawyer from SNP to send in a letter for my reasonable accommodation. The provider never escalated it— it was only the program officer who was looking. The program director kept saying "there's no housing in Queens" but then back and forth to "the housing is all for people who need more intensive support". It wasn't going anywhere until we escalated it to OMH. Finally this year, I got the reasonable accommodation and was able to move to a studio in Jackson Heights. The super has been pretty responsive and friendly— and it's a huge difference from my old building.

In conclusion, the best thing about being a supportive housing tenant was that despite everything, I felt glad that I was in stable housing. But on the other hand, supportive housing should not be gatekept; everyone needs housing. The application process should be more transparent. Everyone should be able to live alone. I want to voice support for SHOUT's S.A.F.E. campaign demands, which make a fundamental difference in all supportive housing tenants' and applicants' lives.

FOR THE RECORD

Written Testimony of Angel

Before the New York City Council Committee on General Welfare Oversight Hearing on New York City Supportive Housing

December 7, 2023

My name is Angel. I've been in supportive housing for 8 years. What brought me to SHOUT is because I was in a non-livable apartment that was leaking from the ceiling, had rats and cockroaches, and had no heat. I had to buy electric heaters after going three or four weeks with no heat. They weren't doing anything to fix it even though I was making numerous complaints. My peer coordinator reached out to SHOUT because I was in a non-livable situation: it was like an abandoned house but with lights. I've been dealing with numerous lack of repairs, lies, false promises, and complaints not getting answered. I was not given my own apartment despite being promised one. I wanted someone to advocate for me so I could get some human rights and justice.

I'm not saying every single provider and every single person is like this. But a lot of them do that. I've had bad experiences with the first provider I was with— in the beginning, the rent was so high over there. After I paid my rent I would only have \$119 left from SSI for the month, which was definitely not enough to cover all my expenses. It took over 6 months to get my SSI check increased because of the negligence of the provider. They lollygagged and didn't get their documentation in. Someone in the provider staff once borrowed 2 dollars from me when I went to pay the rent. It took her 2 weeks to pay it back. The same woman who borrowed money from me- she ended up getting fired. For a lot of things, including borrowing money and verbal abuse. She verbally abused one of my roommates. You're a case manager, why are you going to get into a put-down contest with my roommate? A lot of providers talk to you like you're a 2 year old, like you don't know nothing. I can speak up for myself and talk, but a lot of people can't- and I mean, look how long it took me to get in touch with SHOUT. A lot of people just deal with the abuse. They make it that way because they think- that person is not mentally competent, so who will believe them.

But then it's a double edged sword- sometimes they expect you to know everything. When I moved to my apartment, this was a new environment, so I didn't know anything. The provider staff was expecting me to know how the heater would work and everything. She said "well this is Brooklyn" and I said every house and apartment in Brooklyn is not the same. I've lived all over Brooklyn, in a lot of different places. If a person has a mental illness, they will be nervous and will not know how to register everything. You have to get used to new things. Even people who don't have mental illness have to get adjusted to a new job, but I'm a person with PTSD. They have my psychosocial and psych eval. It's her job as the director to know my diagnosis. They have that all documented. At one point the provider will treat you like a 2-year-old- and on the other hand you have to know everything.

Some of the providers like to take advantage. If you don't know how to speak up- they will take advantage. When I first came, I said I have severe PTSD, so of course I was going to be nervous. I have severe head trauma- I was so nervous to get in, so I wasn't paying attention to anything. To live in these housing programs, you have to suffer from a disability. Are you expecting that I'm going to be like you and write everything down? I'm not the peer coordinator! They pick on you for your mental illness, and then they expect you to know everything but get angry when you don't.

This is the third supportive housing unit I've been in and the second provider. I've lived in group homes before. I've been in mental hospitals. When I first moved into the first place, they said "well, you have to have been out of the hospital for at least 2 years to be put in your own apartment?." At that particular time, I had been out almost 4 years. I stayed there for almost 7.5 years with no hospitalizations and I still didn't get moved to my own apartment. My peer coordinator was reaching out to different orgs and he reached out to ICL– I already had my therapist and psychiatrist there. When he reached out to ICL, they said: "if Angel switches his case mamanagent, he can come into our program and he can get his own apartment." After I did switch, they went back on this. I was between a rock and a hard place. I had been giving the old provider all my money.

They knew I had problems walking too. There are elevators in this building I'm in now, which is good. I have rheumatoid arthritis and osteoporosis, so I'm supposed to be in a first floor or elevator building. But my first two apartments didn't have that. I have no doubt that if I didn't have SHOUT they wouldn't have moved me. My roommate was there for years making complaints and they didn't do anything about it. They don't care.

In my first apartment with the first provider, there were people who were drug addicts and defecating on the floor. I was complaining about it all the time, calling OMH. It was my roommates who were doing it. One of them was defecating all over the apartment— on the kitchen floor and the bathroom floor. The other was smoking cigarettes. One guy was drinking and doing crack cocaine. And after all of that, they put me in a shared apartment not even on the first floor.

The provider staff is highly abusive. They only moved me here because of SHOUT, and because they were just under the gun with OMH. For my current apartment, I had to do a new 20-10 form and a new assessment. My peer coordinator had to submit that. They expire every 6 months. That took some time because my psychiatrist took a long time to do my psychosocial and psych evaluation. I was working with this peer coordinator for 2 years before I moved. I was contemplating a lot of different things- even moving to Long Island. Some of the case managers could be horrible too— he was trying to stick me wherever. He said "why don't you just take this place." I said "would you live here"? I saw his eyes bug out- what do you think of me if you wouldn't live here yourself? You're just trying to stick me some place!

I've had to deal with some terrible conditions throughout the years. In my first provider: there were cockroaches in the refrigerators. With ICL, it was rats, cockroaches, no heat, severe water leaks from the ceiling, a lot of violations, paint, mold, and lack of repairs. I would complain and nothing would get done. The provider would say there weren't rodents- but you would see mice traps and cockroach bait. Why do you have those if there are no cockroaches and rodents? When you asked questions, the provider would plead the 5th. They would say "this is temporary," but then the temporary becomes forever. Instead of trying to help someone, they would wait until people with authority came down on them– and then they would do something.

Once, they opened the whole ceiling and left it there. It was like a waterfall. The fire department had to come. It had been the case since I moved in, and my roommate told me it had been going on for 5-6 months before then. They have since moved me to my new apartment, but only because of SHOUT.

In my new apartment, there was a problem with the heat last week. It got repaired that same day. But I have problems reading and the provider knows this— and the director was doubting me. She said "I was there yesterday and it was fine." I said— well I have heart conditions— if I had a heart attack and died and you saw me alive the day before, would that make me any less dead? I asked for the maintenance person's number. She said that she would have to check with him, because he doesn't like to give his number out. I said: "are you serious? I'm a tenant here, I deserve to have the super's number. What if it's after 4 o clock, or the weekend, and you are closed?" She still hasn't given me the super's number.

There's a lot of abuse going on. People with mental illness have always been abused- I've been in numerous hospitals and group homes. We are all adults- we shouldn't be screamed at or put down. It's like they are talking to a dog or talking to a 2-year old. If they talked to a 2-year old like that, they would have ACS come. They shouldn't be able to talk to a grown-up like that either.

This apartment I'm in now is a million times better, but the only reason that I was able to move was because of SHOUT and OMH scrutiny. This time, OMH was helpful in putting pressure on. Sometimes they are, sometimes they're not. The providers will only do something if they are under scrutiny- if they aren't under the fire, they won't do anything. It's sad but true.

Testimony for The City Council Committees on Mental Health, Disabilities and Addiction, the Committee on Veterans and the Committee on Housing and Buildings

Addressed To: The Honorable Chairwoman Ayala, Chairman Holden, Chairwoman Lee, Chairwoman Sanchez and all other honorable members of the committees.

Thank you for the opportunity to present both in-person and written testimony. The following testimony includes the in-person testimony that I gave on 12/7/23. Please note that I have separated my testimony into the following three parts:

- 1) Summation of the Ongoing Problems
- 2) The Ask: What Changes/Interventions Should the City Counil Committees Make
- 3) Timeline of Events (for context).

Summation of the (Ongoing) Problem

I am a tenant living in supportive housing and a current resident of The Christopher. My experience in supportive housing has been terrifying, triggering, and traumatic which conflicts with the core tenants of supportive housing.

As you read this, I am still experiencing targeted harassment. On 12/6/23, an individual attempted to key into my apartment. If I didn't have something in front of the door, that individual would've been able to key into the apartment. I called the police and made a report. However, I've filed three police reports and nothing has changed. Legal action was necessary because Breaking Ground kept illegally accessing my apartment and arriving to do unnoticed inspections. In spite of several e-mails from me and legal action—including a court-ordered stipulation of settlement—CUCS/Breaking Ground continue to arrive to my apartment to do unnoticed inspections and Breaking Ground staff continues to access my apartment illegally. Housing documents, court documents, personal items—some of which have been very valuable—continue to go missing. I've come home and seen my bed and other personal items visibly moved around. Since there has never been any forced entry to my apartment, but items continue to go missing, I am sure management/Lauren Brogden and Rusmina Radoncic know about it. I know that its meant to terrify/intimidate me. The superintendent also told me that Breaking Ground staff reviews cameras regularly. There are cameras on each floor so I know that they know.

Lauren Brogden (Director, Breaking Ground), Rusmina Radoncic (Asst. Director, Breaking Ground), and Jeremiah Hulbert (Director, CUCS) have fostered a hostile living environment by utilizing terror, intimidation, gaslighting and bullying tactics throughout my tenancy. When incidents are bought to their attention they *lie* about what happened/or their actions in the situation, *deny* what happened, *ignore* what happened or tell me *my perception* of what happened is wrong (*gaslighting*). (The property management for The Christopher is provided by Breaking Ground and the so-called "support" services are provided by Center for Urban and Community Services (CUCS)). The harassment that I am experiencing is retaliation because I've reported rent fraud, delayed repairs, unnoticed inspections, illegal entry, annual recertification fraud and fraudulent lease renewal practices. The harassment started shortly after I moved into The Christopher in January 2022 and has been ongoing.

A Note About Jeremiah Hulbert

Jeremiah Hulbert has been directly involved with the harassment that I have experienced since I moved into The Christopher. When I contacted Lauren Brogden and Rusmina Radoncic about the rent fraud in January and February 2022, Jeremiah was content to allow himself to be cced on those e-mails. I didn't even know who he was at first. He didn't reach out to introduce himself until I made a complaint to DOHMH months later. He could've chosen to be proactive and taken steps to introduce himself and remove the fraudulent phone/cable bill but he didn't do that. He left me to figure it out on my own.

To date **ALL** unnoticed inspections have been joint CUCS/Breaking Ground inspections. The first one started in 3/2022 and was done while I wasn't home. and continue to date. I sent an e-mail directly to Mara Calvert—former CUCS Asst. Director—about the attempted key-in to do another unnoticed CUCS inspection in 11/2022. It was sent to both Jeremiah Hulbert and Mara Calvert. Neither sent an e-mail telling me what would be done to prevent them moving forward. Even when a Cease and Desist letter was sent to he and Marva concerning to the unnoticed inspections, he still didn't reach out to explain what would be done to prevent them from happening again moving forward.

Recently, Jeremiah Hulbert has taken center stage concerning the harassment. I told Jeremiah several times that I **DO NOT** want any unnoticed inspections and that CUCS inspections during exterminations are not in writing anywhere. I also reminded him that I have a court-ordered stipulation of settlement which requires that I receive a notice in writing 13 days before the inspection. However, Jeremiah stated that my stipulation of settlement applies only to Breaking Ground and he would only be providing notice for mandatory inspections. He said he would "try to remember" that I am declining "voluntary inspections" but he or his staff "might forget" and I should just remind them that I don't want an inspection. (Note: The stipulation of settlement does not make a distinction between "voluntary" and mandatory inspections.) Breaking Ground does key into tenants apartments for inspections done during exterminations. In spite of what Jeremiah says, Breaking Ground/CUCS staff have never said the aforementioned inspections were "voluntary".

This "forgetting" is inexcusable and is just a cover for harassment. Also, it doesn't make sense that he'd remember to send written notices for mandatory inspections (which Jeremiah/CUCS has not always done) but he can't come up with a system to ensure his staff knows not to come to my door for an inspection. I continue to have arguments with his staff about this. On 11/30/23, during another joint Breaking Ground and Charles from CUCS arrived to my door. Charles said he needed to check my fire alarm and make sure I have a fire safety notice on the back of my door. This resulted into another back and forth as I told Charles that I hadn't received the proper notice. Charles did NOT say the inspection was "voluntary".

Jeremiah could end all of this by simply treating me with respect, calling me by my preferred name and following the same guidelines as stated in the stipulation of settlement. Jeremiah hasn't forgotten anything. He's just using his staff to harass me.

The Ask: Changes/Interventions the City Council Committees Should Make

- 1. With immediate effect, **TERMINATE** Lauren Brogden, Rusmina Radoncic and Jeremiah Hulbert for their utilization of harassment and terror, intimidation, and bullying tactics against me (and other tenants) and for continually violating a court-ordered stipulation of settlement and NYC law.
- 2. INVESTIGATE Breaking Ground and CUCS at The Christopher IMMEDIATELY! Investigate the past/current managerial practices of BOTH Breaking Ground and CUCS to ensure they adhere to NYC law. Your areas of focus should include the following: 1) rent fraud, 2) illegal entry/vandalism, 3) unnoticed inspections, 4) annual recertification fraud, 5) lease renewal fraud and 6) repairs. Send a separate and anonymous survey to tenants to inquire about harassment and intimidation.
- 3. **STOP UNNOTICED INSPECTIONS!** Investigate both Breaking Ground and CUCS current methods for providing notice before an inspection.

4. STOP UNNOTICED INSPECTIONS (CUCS)!

- Require CUCS to provide written notice for **ALL** of **their own** inspections **AND** require CUCS inspection notices/procedures to follow NYC law.
- **Penalize BOTH** CUCS and Breaking Ground when Breaking Ground provides CUCS with unnoticed access to a tenant's apartment. Stop allowing CUCS to blame breaking Ground when written notice was not provided for *their* inspection.
- Respect tenants rights to opt out of inspections. Require CUCS to create a form which allows tenants to opt out of *voluntary* inspections. Hold the Director of CUCS responsible for ensuring that this only has to happen once and that tenants DON'T HAVE TO KEEP REMINDING the CUCS Director/CUCS staff over and over.
- **PROHIBIT Breaking Ground from keying CUCS staff into tenants' apartments during an extermination** if Breaking Ground has not provided the proper notice OR if the tenant has stated they don't want an inspection.
- 5. **STOP "LEGAL" LOOPHOLES (CUCS):** If a tenant has a stipulation of settlement against Breaking Ground, require that CUCS have to follow those same guidelines. Ex: If the notice requires Breaking Ground to provide 13 days advanced written notice before an inspection, require that CUCS have to follow that same guideline before an inspection.

- 6. **Prohibit Breaking Ground and CUCS from dropping by apartments unannounced.** Tenants' apartments are not an extension of Breaking Ground and CUCS offices. Breaking Ground and CUCS should be sending notices to tenants are notifying them the way it's listed in their lease.
- 7. Grievance Process: Mandate that agencies such as HPD, DOHMH, and other city agencies investigate and resolve complaints in a timely manner. Give preference to complaints concerning retaliation, harassment and intimidation. Ensure that program directors (ex: Lauren Brogden and Jeremiah Hulbert) are given a deadline to resolve complaints. Lauren Brogden, Rusmina Radoncic and Jeremiah Hulbert DO NOT CARE about complaints made to city agencies. Even after I've mentioned that I've made a complaint to HPD, DOHMH, etc. they've still conducted the same illegal behavior.

<u>Complaints made to city agencies **DON'T** change anything. They just **intensify** the harassment, <u>intimidation and bullying</u>.</u>

- 8. **PENALIZE and DEFUND repeat offenders:** Take complaints such as harassment, vandalism, retaliation and intimidation seriously. If a city agency is receiving the same complaints for Breaking Ground and CUCS, apply penalties. If it still continues, defund them.
- 9. **Breaking Ground/Lauren Brogden and CUCS/Jeremiah Hulbert are NOT above the law!** Their actions demonstrate that they think that they are. So far they've continued continued to conduct the same unlawful actions over and over. What will you do to change that?

Timeline of Events

Please note that this does **NOT** include *all* dates nor every incident that has happened.

Lauren Brodgen Building Director (Breaking Ground, The Christopher) Rusmina "Minka" Radoncic Asst. Building Director (Breaking Ground, The Christopher) Jeremiah Hulbert Director (CUCS, The Christopher) Mara Calvert Assistant Director (CUCS, The Christopher) **No longer with CUCS** Canniel Watley Superintendent (Breaking Ground) Frank Maintenance (Breaking Ground) Carlos Case Worker (CUCS) Charles Case Worker (CUCS)

Rent Fraud

1/14/22- I told Lauren that the first page of my lease listed the phone and cable bill that they were mandating as "N/A" instead of the \$10 that Breaking Ground was mandating. Lauren told me that it shouldn't be listed that way and she would contact the leasing office so that they would send me the new form.

2/3/22- I came to Lauren's office to sign the HPD lead form. I remind her that I still haven't received a updated copy of the first page of the lease. Lauren said she would reach out to the leasing office again and ask them to send me a new page.

2/4/22- I sent an e-mail to Lauren Brogden and (cc:Rusmina Radoncic) reminding here that per our conversation on 1/14/22 and 2/3/23, I still hadn't received a new copy of the lease which lists the phone/cable bill as \$10. Rusmina states that they contacted the leasing office and they are still waiting to hear back. She attaches a Breaking Ground letter which lists the rent as \$225 and has the phone/cable bill. She says it will be acceptable for HRA.

2/15/22- I send an e-mail to Rusmina Radoncic which states that I still haven't received a corrected version of the lease form.

2/17/22- I meet with my CUCS case manager for help. She tells me that according to both Lauren Brogden and Mara Calvert that HPD didn't want the \$10 on the lease. *I realized that both Lauren and Rusmina had been giving me the run and around and they both knew the leasing office was never going to give me a new leasing form.* Nevertheless, my case worker would not agree to put this in writing. She said she would tell Lauren to reach out. She never did.

2/18/22-Rusmina states that they're still waiting for a corrected version of the first page. She provides the e-mail address for Stephanie Kawalski at the leasing office. She cces Mara Calvert and Jeremiah Hulbert without introducing them. I had no idea who they were at this point.

2/28/22- I speak to a representative at HPD who informs me that Breaking Ground cannot force tenants to pay the \$10 cable bill. The representative told me that she told Breaking Ground this before because they kept getting tenants who were complaining that they don't use cable. The representative told me that Breaking Ground has to allow me to opt out and offered to reach out to Breaking Ground again on my behalf.

3/22- HPD sends a rental breakdown letter, ccing Breaking Ground, which states my rent is \$215. It also states that if my landlord attempts to make me pay more, HPD considers that rent fraud.

3/8/22- HRA rejects the residency letter that Rusmina gave to me which lists the phone and cable bill because it doesn't match the lease. HRA informed me that if it paid more than what's listed on the lease, it would be marked as an "overage" when I renewed the following year.

3/8/22- The HPD representative confirms that they reached out to Breaking Ground and instructed them to remove the phone/cable bill.

4/18/22- Lauren and I have an in-person conversation about repairs. She admits that Breaking Ground did contact her to remove the phone/cable bill. She admits that it's a "new rule" which contradicts what the HPD representative told me.

5/22- I make several complaints to DOHMH; one complaint is that the phone/cable bill is still on my ledger. (It took a few more months but it was finally removed after this complaint)

Illegal Entry/Unnoticed Inspections

- Illegal/unnoticed inspections conducted by Breaking Ground Management (B.G.M.). has been an ongoing issue since March 2022. B.G.M. is required by the lease to provide advanced notice before all inspections and entry into my apartment that are not emergencies.
- E-mails and complaints have been ineffective. Along with e-mails that I've sent to Lauren Brogden (B.G.M.), a Cease and Desist Letter was issued to Breaking Ground on 12/20/22 which ordered them to stop entering my apartment illegally and clearly detailed how to legally conduct inspections and repairs moving forward. I've also submitted several complaints to city agencies. This includes HPD on 4/6/22, 4/27/23 and 5/2/23 and HPD's Tenant Harassment Protection Taskforce on 4/8/22; the Department of Health and Mental Hygiene on 5/16/22 and the NYPD (via 311's system) on 4/25/23. I have also placed calls on various dates to submit complaints to all the aforementioned agencies.
- On 4/21/23 at 1:28pm, Frank-a maintenance worker (B.G.M.)—illegally keyed into my apartment while I was home without my consent or advanced notice. Although I told Frank that keying into my apartment without notice is illegal, he said "this is something they (referring to B.G.M.) will never provide notice for". This situation scared me and Frank's disregard for the law compelled me to file a police report.
- On 4/13/23 at 12:07pm, a maintenance worker (B.G.M.)--escorted two agents from CUCS--Shelby and Carlos--who attempted to do another unnoticed inspection even after I told them that I had not received the advanced legal notice required.

- On 11/2/22 at 2:38pm, Rusmina Radoncic, Assistant Director (B.G.M.) attempted to key into my apartment to do another unnoticed inspection.
- On 3/23/22, I arrived home at 6pm and found a notice provided by B.G.M on my bed which informed me that B.G.M did an inspection. I sent an e-mail to Lauren Brogden, Building Director (B.G.M.) on 4/8/22 notifying her that I did not receive the required, advanced written notice for this inspection.
- B.G.M.'s actions thus far—even after the Cease and Desist was issued—have convinced me that it will continue to illegally access my apartment, perform illegal inspections and does not feel beholden to NYC law. Frank's aforementioned actions and comment are particularly concerning because they indicate that B.G.M.'s agents will key into my apartment again when they want. B.G.M.'s continual disregard for NYC law, policies established by city agencies, my lease, and my rights as a tenant makes me feel unsafe in my own apartment. Thus, this proves that judicial action is necessary to compel B.G.M to finally change their behavior.
- 7/21/23- The judge issues a settlement of stipulation which requires Breaking Ground to send a notice in writing 13 days before doing an inspection; prohibits them from entering my apartment or dropping by without written notice.
- 8/10/2323-Breaking Ground/Carlos from CUCS arrive to my apartment during extermination to do another unnoticed inspection. I decline. I send another notice to Jeremiah. I make a complaint to DOHMH.
- 8/16/23- I arrive home from a doctor's appointment and find that someone had entered my apartment. My bed was pushed against the wall and the box (which was originally taped) under my bed with my court documents and personal journals had been opened. There was no forced entry; someone keyed in.
- 9/23-I came home and found that someone had gone through my purse and stolen housing documents. My purse was visibly ransacked. I had unopened boxes in the corner of the my room which were opened. The bag in my closet with my court documents was ransacked; court documents were removed.
- 11/30/23-Breaking Ground/Charles from CUCS arrives to do another another unnoticed inspection during. He tells me he needs to check my fire alarm and to make sure the fire safety notice is on my door. (CUCS has already checked this.) I decline and tell him he didn't send the proper notice. Another complaint to DOHMH.

Sexual deviant pervert single white female takes my mail and tampers with it. Mail fraud etc. Foo organization tried to steal my money in my apartment house to share with sexual deviant pervert single white female who walks around apartment house naked. I told them BustedRU

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She's up early in morning moving furniture around to wake people up.

She didn't have a curtain on window and walked around naked so neighborhood and neighbors can view her. There are also children in back, side and front of house. Backyard is level to her window. People can see her out her window from other apartments. She is a single white female deviant pervert who walks around apartment house naked.

FOO organization tried to get lights turned out so 3: tenants could be in house with deviant sexual pervert single white female who walks around apartment house naked. She leaves front door open and walks around apartment house naked. People can see her from outside through front door, front living room window, kitchen window, her window, and all common and uncommon living areas in home seiged in house barricaded in room.

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CATHOLIC COMMUNITY RELATIONS COUNCIL

191 Joralemon Street, 2nd Floor, Brooklyn, New York 11201

Testimony of Joseph Rosenberg Executive Director, Catholic Community Relations Council Before the City Council Committee on Mental Health, Disabilities and Addiction, the Committee on General Welfare, the Committee on Veterans, ant the Committee on Housing and Buildings Supportive Housing in New York City

December 7, 2023

Good afternoon, Chairs Ayala, Lee, Holden, Sanchez and members of the Committees on Mental Health, General Welfare, Veterans and Housing and Buildings. I am Joseph Rosenberg, Director for the Catholic Community Relations Council representing the Archdiocese of New York and the Diocese of Brooklyn. Thank you for holding this hearing on a program that is a lifeline to so many fellow New Yorkers.

Housing advocates, governmental agencies, not for profits and faith-based organizations all agree that supportive housing is a successful and cost-effective model. It provides affordable housing and social services to those living in substandard conditions and confronting the daily threat of homelessness.

Supportive housing serves not only homeless families and individuals, but also victims of domestic violence, youth aging out of foster care and individuals receiving nursing home care who make the transition to independent living. Veterans and the elderly who struggle with serious mental illness and substance abuse are provided decent and safe housing through these initiatives. It is a humane and economical program, far superior in every manner to the shelter-based model. Mayor Adams' initiative of expediting the construction of 15,000 additional supportive housing units is strongly supported by us. But we urge that even more financing be allocated to this program, not just for the construction of apartments, but also for the fuller array of social services that the supportive housing population requires.

Sheltering the homeless and helping the needy have always been among the primary missions of the Catholic Church. Consistent with that principle, the Archdiocese of New York and the Diocese of Brooklyn through their respective Catholic Charities and housing affiliates have constructed and preserved thousands of apartments for low-income New Yorkers throughout our City. This commitment continues to this day with the Catholic Church being the largest faith-based provider of low-income senior citizen housing in New York City.

Catholic Homes of Catholic Charities of the Archdiocese of New York has developed over 3,300 affordable housing units in Manhattan, the Bronx, and Staten Island, while Progress of People ("POP") of Catholic Charities of the Diocese of Brooklyn has constructed over 4,000 units in Brooklyn and Queens. Both entities, working with federal, state, local housing, and social service agencies, have over a thousand units planned in their respective construction pipelines, including hundreds of supportive housing apartments.

A recent POP affordable senior development with supportive housing units is the Bishop Valero Senior Residence in Astoria. It provides 102 units, all of them for seniors with income below 50% of the Area Median Income ("AMI") financed in part by the Department of Housing, Preservation and Development ("HPD"). Thirty percent of the apartments are reserved for formerly homeless seniors with severe mental illness ("SMI"). The Bishop Valero Senior Residence features on site social services, a resident's lounge,

a working kitchen and dining room area, a large exterior landscaped yard, and the Catholic Charities Peter DellaMonica Older Adult Center.

In Morrisania, Catholic Homes has developed 112 units of affordable housing with thirty-five supportive housing studio apartments at the St. Augustine apartments. Financed primarily by HPD and the State Office of Mental Health, the supportive units are for individuals with chronic mental illness who are assisted through on-site services. These are provided by Beacon of Hope, which serves several hundred individuals in its supportive housing programs throughout New York City.

As successful as these projects are, we urge the City to allocate additional funds for the construction of similar developments with sufficient onsite services needed to help these vulnerable residents.

The soaring costs of construction materials, property insurance plus increased labor costs and high interest rates have made the construction and operation of these developments extremely challenging, especially for nonprofit faith-based providers. Our governmental partners need to recognize these difficulties and modify their term sheets and financing tools to address this.

It is imperative that tenants feel safe in their home. Without on-site 24/7 security, many individuals, especially the formerly homeless, can have difficulty transitioning into permanent housing. Security funding is currently provided by HUD in their Section 202 low-income senior citizen developments and similar funding should be provided on a 24/7 basis, especially in supportive housing for seniors such as HPD's Senior Affordable Rental Apartments ("SARA") program.

We also strongly urge that funding be increased for social services for supportive housing residents. The "light touch" social service financing model is insufficient, especially for the formerly homeless as well as for the elderly, who require additional assistance as they age. Sufficient staff funding must include annualized Cost of Living Adjustments ("COLAs") and staff training funds. Programs must also be funded that include such necessities as escorts to psychiatric, therapeutic, and medical appointments, emergency transfers to hospitals, and assisting tenants with obtaining and maintaining Social Security, Public Assistance and SNAP benefits.

The current set asides for the percentage of supportive housing units in affordable housing developments vary according to the State and City housing programs. Supportive housing units can consist of as much as 60% of a building's apartments. Although this creates much needed supportive apartments, it can create difficulties as the size of the buildings increase. For example, we have developed buildings containing as many as three hundred affordable apartments. Complying with State and City mandates requiring as much as 60% of the units being supportive creates financial, social and management challenges in providing sufficient assistance to these tremendous numbers of vulnerable tenants. We therefore ask that both the City and State's housing and social service agencies consider being flexible in determining the percentage of supportive housing units that must be included in larger 100% affordable housing developments.

Thank you.

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Name: Olivia Lazan
Address: 17th st, Brooklyn
I represent: <u>Veterans Assistance Project</u> , City Bar Address: <u>42 west 44th</u> st Justice
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I represent: the Supportive Housing Network of NY
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Address: 129 Fulton
I represent: Coalition for the Homeless & Legal Aid Society
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I intend to appear and speak on Int. No Res. No
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SVIANUTUR Date: 12/7/23
Name: Vermy aure
Address: 50 Broad St NYC 10004
I represent: INS [NE CURVE AN GWEB
Address: 50 Broad St M/L 10004
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:2/7/23
(PLEASE PRINT)
Name: Rowon Shumin on behalf of the odora Ronelli Address:
I represent: Theodora Ranelli
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. 153 Res. No.
🖄 in favor 🔲 in opposition
Date: 12/7/23
Name: SIGA HEEDE (ATTORNEY)
Address:
I represent: THE NATIONAL HOMELESSNESS LAW CENTER
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:
Name: JRISH TAYLOR
Address: 400 W. 43'd St 10P 1J4, 1JY 10036
I represent: SHOUT
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: Christopher Luggiero
Address: Steinway St, Astoria, NY 11103
I represent: The Doe Fund
Address: 345 E 102nd St, New York, NY 10029
Please complete this card and return to the Sergeant-at-Arms

and the second
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: JASON LOUGHRAN
Address:
I represent:US
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:
Nemo: Tamie (PLEASE PRINT) ES DOHMIA
Name: JAMIR ARCEIES DOMMIA
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: Mille Dostal
Address: HEADESS
I represent:
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: Lamary While
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:
Name: Emily Lehman
Address:
I represent: HPD
Address:
and the second secon
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: 1217123
(PLEASE PRINT)
Name: RABAN HOLTKebic
Address: 410 W 405t N9, N4, 1100
I represent: Hardenets sign of an Shalf on NG
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: 12 17 - 23
Date: <u> < / - < /</u>
(PLEASE PRINT)
Name: 1017 4017
Address: 40 w 40th St NY, NY, 10018
I represent: NYC Street Homeless PODULATION
I represent: NGC STILLET MOMERSS POPULATION
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: Photo EL Man Ghilo
a second second
Address:
I represent: LISMBAD ACT CLAMS
Address:
Autress. / CYACO
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: 11-7-23
(PLEASE PRINT)
Name: PARANIES DOLIKAS
Address: Homeless
I represent: My Bol Farans Repubric
Address:
Please complete this card and return to the Sergeant-at-Arms