



OVERCOME STREET HOMELESSNESS

THE CHALLENGE

Several thousand homeless individuals remain on city streets despite the fact that the city guarantees free shelter and sponsors outreach teams that work around the clock to encourage street homeless individuals to come inside.

Many of these individuals, especially those who are chronically street homeless, believe that remaining outside makes more sense than entering the shelter system as it now exists. Some acknowledge that they cannot maintain sobriety or comply with program requirements. Others resist the structure and order that communal shelter life requires. And others believe that shelters are unsafe, despite many gains in creating safer environments over the years.

The street homeless population is largely comprised of individuals with mental illness and/or substance abuse issues. They are survivors, having forged lives in public spaces for many years. No doubt, the generosity of passers-by enables many to remain on the streets.

New York City's outreach teams and drop-in center staff are successful in convincing some individuals to give programs or shelter a chance. But outreach and drop-in center efforts are under-equipped for the task at hand. There is, at times, a lack of coordination with other programs that provide aid. These nonprofit organizations are limited by an inability to offer individuals flexible service options – especially in that fleeting moment when engagement is possible.

SOLUTIONS

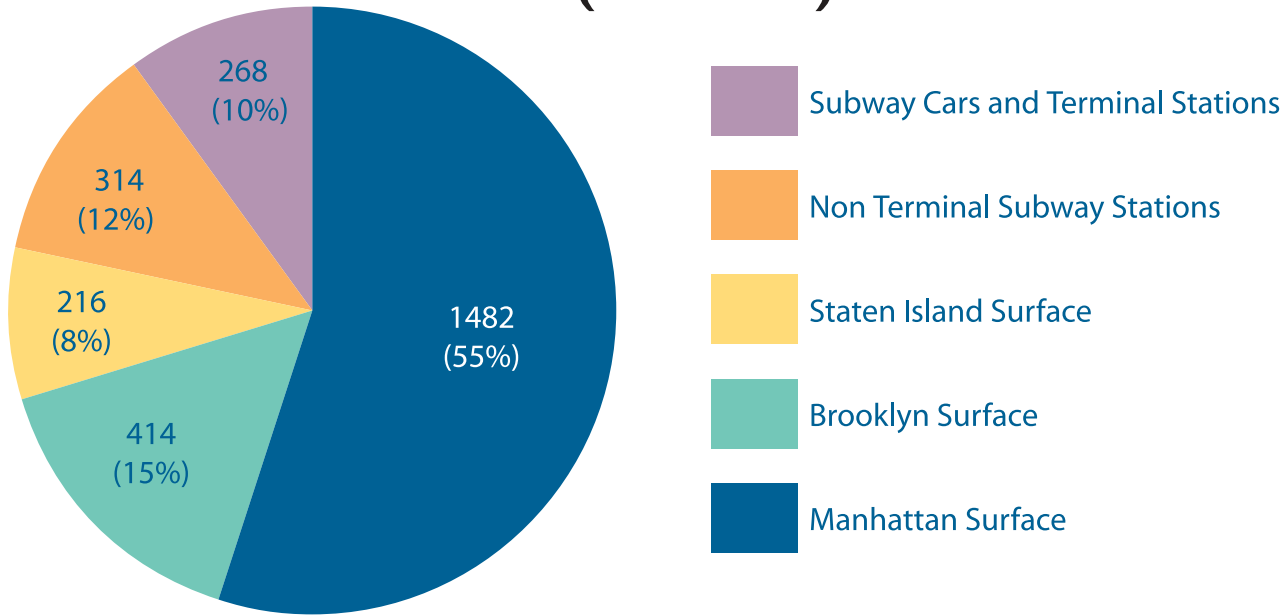
A successful effort to overcome street homelessness must ensure the availability of and easy access to safe and viable alternatives to the street. This must be coupled with accountability mechanisms that hold providers, as well as public agencies, responsible for producing results.

Ending street homelessness also requires an acknowledgment that street homelessness is harmful for those who live in public spaces, and has negative effects on the communities and areas in which street homelessness proliferates. For humanitarian and quality of life reasons alike, people on the street should be helped and street homelessness, as a condition of urban life, should not be tolerated.

The initiatives in this chapter build on best practices, such as the coordination and expansion of outreach and drop-in center services. They expand “housing first” options and low-threshold shelter – permanent and transitional housing models that first focus on moving people from the streets and incorporating progressive services over time. They also establish goals and targets for reducing street homelessness complete with neighborhood-by-neighborhood strategies and strong accountability standards for agencies and providers.

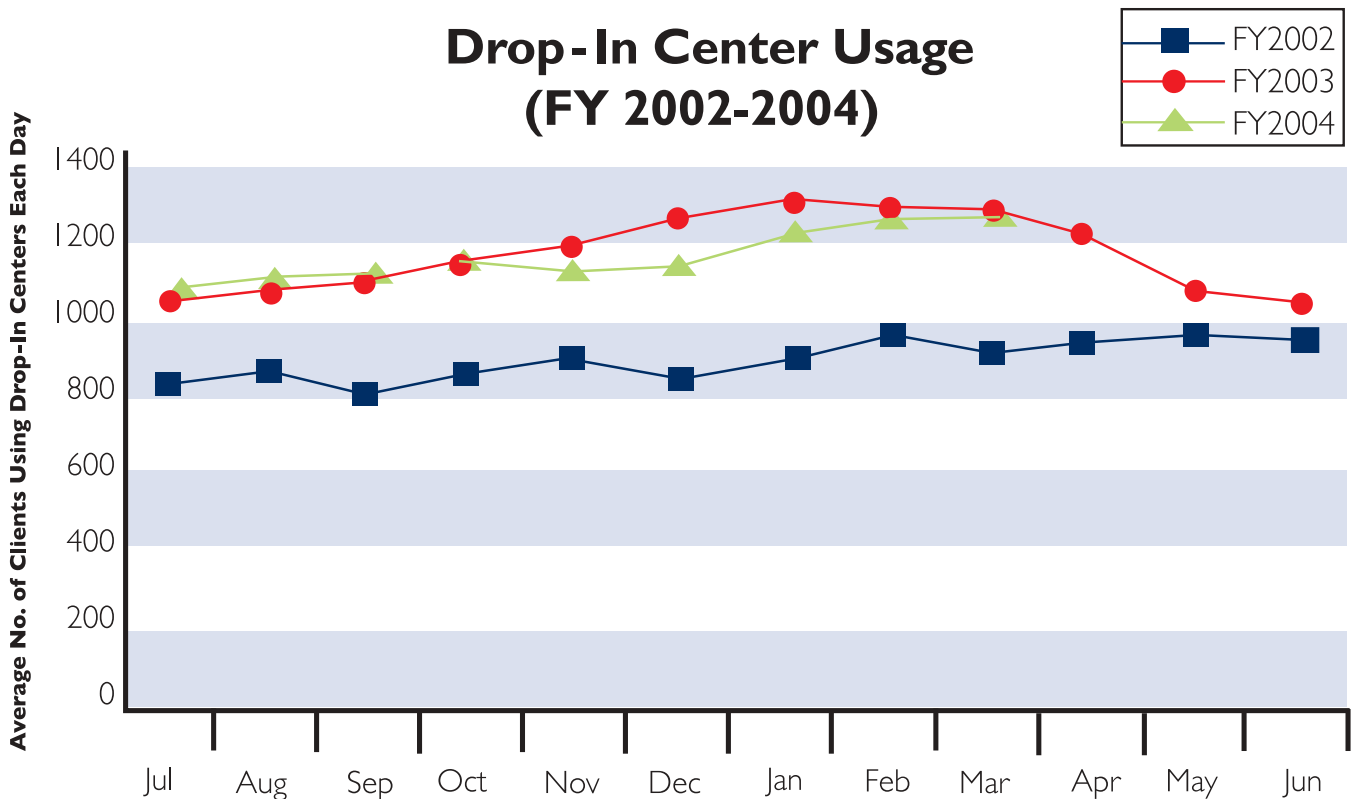
In the last decade, tremendous progress has been made in reducing the number of individuals living on the streets, yet street homelessness remains a fixture of city life. The knowledge and skills to end it exist. What's needed now is the commitment of resources and the political will to make it happen. The initiatives here provide that critical foundation.

Estimated No. of Unsheltered Individuals in Three Boroughs (2/23/2004)



On February 23, 2004, the city estimated 2,694 total individuals on the streets, subways, and in other public spaces in Manhattan, Brooklyn, and Staten Island.

Source: DHS Homeless Outreach Population Estimate 2004



While drop-in center usage follows a seasonal cycle – higher in the winter and lower during warmer months – total usage has remained high over the past few years.

Source: DHS Administrative Data

TAKING ACTION

The Next Step	Current Status	Taking Action
<p>Establish a Citywide Outreach/Drop-in Center Coordinating Council</p>	<p>Dozens of organizations today serve street homeless individuals, yet there is no system in place to facilitate formal communication or coordination among them. As a result, efforts are duplicated, some opportunities to reach homeless individuals are lost, and resources are not coordinated or maximized.</p>	<p>A citywide coordinating council will guide and coordinate policy and practice of providers engaged in outreach and drop-in services. It will ensure that providers and city agencies establish and meet goals for reducing street homelessness. It will also ensure better coordination among groups whose different funding streams have led to varied approaches.</p>
<p>Reconfigure Outreach Services</p>	<p>Historically, outreach programs haven't employed clinically trained staff or utilized a traditional case management approach for those with co-occurring mental health or substance abuse issues. Outreach programs have had few resources beyond shelter to offer those who live on the streets.</p>	<p>Borough-based, multidisciplinary outreach teams will offer comprehensive integrated treatment for co-occurring mental health, substance abuse, and medical issues (particularly HIV). The new approach will include a strong peer component, enhanced ties to local communities, and increased access to permanent and transitional housing options with minimal entry requirements.</p>
<p>Create an Accessible Citywide Clinical Database</p>	<p>At this time, no system exists to collect, manage, and share information about street homeless individuals who receive services from drop-in centers and outreach programs. Because many street homeless individuals are nomadic, they receive services from a variety of providers in different locations. The absence of a citywide database sometimes slows the process of engagement and may actually hinder outreach efforts.</p>	<p>A database system containing demographics, lodging and housing history (including hospitalization and incarceration), clinical information, and details about prior homelessness episodes will be created. This system will be accessible to participating homeless outreach and drop-in service providers and others to share information to better engage clients. Safeguards to ensure client confidentiality will be established and maintained.</p>
<p>Expand the Capacity of Drop-in Centers</p>	<p>New York City currently has 10 drop-in centers that offer street homeless individuals a range of social and medical services, assistance in accessing benefits, and permanent or transitional housing placement services. These centers are effective at engaging those who wouldn't ordinarily come into shelter.</p>	<p>The capacity and coordination of drop-in centers will be expanded. Using data from the annual street survey in conjunction with input from outreach providers, the city will work to ensure increased availability of services, particularly in underserved areas.</p>

The Next Step	Current Status	Taking Action
Decentralize Men’s Intake	The 30th Street Men’s Shelter in midtown Manhattan is currently the only place for homeless men to enter the shelter system. The large number of people that receive services there, the perception of the site as unsafe, and its inaccessibility to men living on the streets in other boroughs discourages some homeless men from seeking shelter.	Three smaller intake centers will be opened throughout the city to ease entry into the shelter system for single adult men. The new centers will include a user-friendly design, a computerized bed reservation system to ensure swift placements, and enhanced staffing models.
Conduct Citywide Street Estimate Annually	A complete estimate of the size of the street homeless population in New York City does not exist. The Homeless Outreach Population Estimate (HOPE), a point-in-time estimate of the street homeless population, has been conducted in Brooklyn, Manhattan, and Staten Island. The lack of an annual citywide estimate makes it difficult to know if outreach programs are reducing street homelessness.	In 2005, HOPE, which is carried out with the assistance of hundreds of volunteers, will be conducted in all five boroughs. It will be repeated on the same night of the year, every year moving forward. The estimates will be used to measure the effectiveness of outreach programs and ensure that programs adapt to changing conditions on the streets.
Expand “Housing First” Options for Those on the Street	The existing range of services does not meet the needs of some street homeless individuals. Chronically street homeless individuals, in particular, may not be able to meet the requirements (such as sobriety) of existing programs. In other words, the “threshold” is too high.	Permanent housing program models that couple supportive services with individual apartments, single rooms, or other housing options, will be expanded. This “housing first” strategy, which has proven extremely effective in engaging chronically street homeless individuals to leave the streets, aims to stabilize individuals in permanent housing and then provide services that lead to recovery, stability, and ultimately independence.
Expand Transitional Programs with Low Threshold/Progressive Demand	Some street homeless individuals reject existing services. Others are unable to access them or meet entry requirements. Many existing programs have requirements that are in fact unattainable, especially to those with profound mental health or substance abuse issues.	Transitional housing models that require less of individuals in the beginning and more over time will be expanded. These models include “Safe Havens,” which are similar to drop-in centers but have onsite beds, and shelter programs that accept people directly from the street and subsequently engage them in drug and alcohol rehabilitation.
Create Community Street Population Estimates, Targets, and Accountability Mechanisms	There is no estimate of the neighborhoods with the highest concentrations of street homeless individuals. Therefore, no targeted plan to reduce homelessness in these areas exists.	Once taken citywide, HOPE data will be used to target neighborhoods with high levels of street homelessness. Neighborhood-based policies will then be enacted to reduce street homelessness in high concentration areas, encouraging and supporting communities to address the issue locally. Outreach providers in these areas will establish goals and be held accountable for reducing the local street homeless population.