

Innovations in NYC Health & Human Services Policy: Homelessness Prevention, Intake, and Shelter for Single Adults and Families

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Efforts to improve homeless services in New York City under the Bloomberg mayoral administration (2002–13) included the creation of a new homelessness prevention model, as well as an overhaul of the shelter intake and eligibility process for families. The Homebase Community Prevention program is now considered a national best practice (HUD 2009), and the city replaced the run-down building where families used to apply for shelter with a newly constructed intake facility called the Prevention Assistance and Temporary Housing (PATH) center. The city also developed a temporary rental assistance program called Advantage New York that reduced the number of families living in shelter during its existence. (National Alliance to End Homelessness 2013). While the administration made substantial progress in addressing homelessness, it was heavily criticized by homeless advocates and received considerable negative media attention for some of its shelter policies.

Despite significant success with homelessness prevention and re-housing under Bloomberg, the city's shelter population is the largest it has ever been—more than 50,000 individuals, including about 22,000 children (Department of Homeless Services [DHS] 2014). The city is also experiencing a worsening shortage of affordable housing. It is estimated that, while low-income households made up 63 percent of renters in 2011, only 26 percent of rental units in the city were low-income affordable (Furman Center and Moelis Institute 2013). For people currently living in shelter, there are no major housing subsidy programs to help them exit into stable housing situations. Since state funding for Advantage was cut in 2011, the number of families living in shelter has increased, and they are staying in shelter longer (National Alliance to End Homelessness 2013).

This policy brief begins by providing background and context for contemporary issues related to homeless shelter services for single adults and families in New York City. It then describes the city's policy response to these issues during the Bloomberg administration, highlighting five key initiatives. After a discussion of policy outcomes and results, the brief concludes with five suggested areas of focus for future efforts. The information, programs, and suggestions included in this brief were chosen based on a review of public reports as well as interviews with city officials, service providers, researchers, advocates, and other experts.

History and Context

A "right-to-shelter" mandate makes the homelessness policy environment in New York City unique among municipalities in the United States. The mandate was originally established by consent decree in 1981 in response to Callahan v. Carey (1979), requiring the city to provide shelter for all homeless individuals. A few years later, a court order resulting from McCain v. Koch (1983) effectively extended the mandate to include homeless families (Culhane, Metraux, and Wachter 1999). As a result of these court cases, the city became legally obligated to provide shelter to any eligible homeless person seeking it; with a shelter system overseen by state courts, city officials could not freely implement new homeless services policies or eligibility requirements.

During the period that the shelter mandates were enacted, homelessness was increasing generally, but family homelessness in particular was rising dramatically. In the 1980s, homeless families usually entered

shelter via welfare centers or emergency assistance units run by the Human Resources Administration (HRA). These families were placed mostly into "welfare hotels" or congregate shelters, where families slept on cots in large rooms, waiting for hotel placements. As family homelessness continued to increase, Tier II shelter facilities with private bedrooms were developed to house families in place of congregate shelters; over time, the use of congregate shelters for housing families with children was eliminated, and the number of Tier II shelters increased (Culhane et al. 1999).

In the 1990s, the shelter system underwent a series of changes that made it more service-oriented. In 1991, then-Mayor David Dinkins created an independent Commission on the Homeless (a.k.a., the Cuomo Commission) to review the city's existing policies and make recommendations for improvements. The Cuomo Commission's 1992 report endorsed a "continuum of care" model for homeless services (NYC Commission on the Homeless 1992). This model emphasized assessing the needs of each homeless individual and family, then providing supportive services accordingly. The recommendations of the Cuomo Commission led to the creation of the Department of Homeless Services (DHS) as an independent agency in 1993, as well as a gradual transition from city-operated shelter facilities to nonprofit-run shelter programs. Additionally, an eligibility process for families seeking shelter was put into place for the first time in 1995.

By the end of the 1990s, the shelter system for homeless individuals was largely in place as it is today. Single-adult shelters follow a program model made up of assessment, general, and program shelters. Single men and women apply at separate centralized intake points and are first placed into assessment shelters while their needs are determined. After about three weeks, individuals are placed in a general shelter or a program shelter with specific services, such as employment assistance, mental health services, or substance abuse treatment.

Unlike the single-adult system, the family shelter system changed substantially under Bloomberg. When Mayor Bloomberg took office, the family shelter system consisted of scatter-site apartments, converted hotels, and Tier II shelter facilities. Tier II shelters were usually apartment-style, with case management and supportive services in house. Scatter-site apartments and family shelter hotels were leased from non-contracted landlords and were both service limited.³

Today, the city is home to about 240 shelter facilities, by far the most extensive homeless services system in the country; and DHS is the largest agency of its kind, with an annual operating budget of \$955,300,000 and over 1,950 employees (Office of the Mayor 2013). The shelter system includes 67 shelters for single adults; 154 Tier II shelters, cluster-sites (previously scatter-sites), and hotels for families with children under age 18 and pregnant women; and 18 Tier II and non-Tier II facilities for adult families. Only nine shelters—four for families with children and five for single adults—are directly operated by DHS (DHS 2013c).

Policy Response

DHS issued a new strategic plan for homeless services in 2002. At the heart of this plan was a focus on prevention and diversion, increasing shelter services to expedite self-sufficiency, linking clients to mainstream resources such as public assistance, and reducing the time individuals and families spend in shelters by getting them into stable housing as quickly as possible. Two years later, these core ideas were developed into Mayor Bloomberg's five-year action plan (Office of the Mayor 2004), which directly preceded the launch of key programs and policies that defined the administration's approach to fighting homelessness.

Homelessness Prevention

Prevention was a new and innovative component of the Bloomberg administration's vision for ending homelessness in New York City. Under the guidance of then-Commissioner Linda Gibbs, ⁴ DHS used data it had collected on individuals and families entering shelters to identify characteristics and trends that might enable targeting those at risk of becoming homeless, allowing for service interventions before loss of housing occurred. Following through on a goal of homeless prevention collaboration, DHS worked with community nonprofits and researchers to design Homebase Community Prevention, which was launched as a pilot program in 2004. Homebase expanded citywide in 2007, with offices in all five boroughs. The city has maintained other prevention services as well, such as anti-eviction legal services through the Department of Housing Preservation and Development (HPD) and emergency rental assistance through HRA.

Shelter Intake and Diversion

Early in the Bloomberg administration, Commissioner Gibbs negotiated a two-year moratorium of the litigation overseeing the family shelter system. This allowed for a court-appointed expert panel to study and recommend improvements to the family shelter system and intake process. The NYC Family Homelessness Special Master Panel's November 2003 report (Feerick, Kronenfeld, and Nayowith) proposed policies that DHS subsequently implemented. Among the most notable was opening the Prevention Assistance and Temporary Housing (PATH) family intake center in a temporary facility in 2004, pending construction of a brand new intake center on the site of the old Emergency Assistance Unit. Improvements made to family homeless services ultimately led to the settlement of *McCain v. Koch* in 2008.⁵

At single-adult shelter intake points, representatives from various social service agencies and community nonprofits have a more significant presence than they did previously. Interested clients can meet with diversion case workers for help finding a room to rent or entering a treatment program. The city also implemented more specific diversion efforts for clients seeking to re-enter shelter. In 2011, the city attempted to implement an eligibility screening process for single adults similar to what it implemented for families, but this was prohibited by the state court on procedural grounds. 6

Another important reform to shelter intake was separating adult families (families with no minor children or a current pregnancy) from other families seeking shelter. Adult families now undergo an intake process separate from but comparable to families with children. Additionally, a separate assessment site was created where all adult families are placed pending investigation of their eligibility for shelter. New York City is the only jurisdiction in the nation to separately serve adult families.

Shelter Services

In contrast to shelter intake centers, which DHS operates, shelters facilities are generally run by contracted nonprofit service providers, except for service-limited, non-contracted hotel shelters for families. Before 2006, scatter-site shelters for families were also service-limited, but in that year DHS began funding nonprofit providers to deliver support services from an off-site location. These family shelters are now referred to as "cluster sites."

The Bloomberg administration developed an open-ended Request for Proposals process, through which providers can submit proposals to open shelters in neighborhoods throughout the city as needed to meet demand. Once a shelter has been approved, DHS works with local community boards and elected officials to address any issues or concerns. DHS inspects all shelters twice a year, grading facilities on general maintenance, building systems, and fire safety. To further boost provider performance, the Bloomberg administration implemented the Performance Incentive Program (PIP) in 2003.

DHS also expanded incentives for shelter residents to achieve self-sufficiency. It continued a policy already in place that requires all shelter residents to develop and follow Independent Living Plans (ILPs). These ILPs are part of the agency's "client responsibility" policies, created to ensure shelter residents actively seek permanent housing and income. Beginning in 2006, shelter residents who repeatedly fail to follow their ILPs may be relocated to Next Step shelters, which have stricter rules and more intensive case management (DHS 2008).

Interagency Collaboration and Data-Sharing

Three chapters in the mayor's five-year plan laid out action steps to better coordinate services and measure progress, and these priorities have bolstered each of DHS's major initiatives. For example, strong collaboration between DHS and HRA enabled increased diversion efforts at shelter intake; all shelter residents are assisted with applying for public assistance and other benefits through HRA. Additionally, DHS worked with HPD and the New York City Housing Authority (NYCHA) to provide housing resources to shelter residents and Homebase clients. DHS also works daily with the Department of Education, Administration for Children's Services, and Department of Health and Mental Hygiene to provide additional services to clients at intake centers and in shelters.

In 2007, DHS began developing a unified electronic case management system called the Client Assistance and Rehousing Enterprise System (CARES), replacing two older, separate systems (one for single adults and one for families). Fully implemented in 2011, CARES data also link to a much larger database (HHS Connect) that houses information from eight human services agencies. This cross-agency data-sharing provides clients with more efficient and comprehensive services while also providing data for homelessness prevention and targeting efforts.

Rapid Re-housing

A core element of Mayor Bloomberg's five-year action plan was moving people out of shelter and into housing as quickly as possible, a model often referred to as rapid re-housing (National Alliance to End Homelessness 2013). For many years before Bloomberg took office, families in shelter received priority for federal housing choice vouchers and public housing slots through the Emergency Assistance Rehousing Program and NYCHA. In October 2004, the city eliminated this priority for shelter residents and subsequently implemented a temporary rental assistance program called Housing Stability Plus (HSP). HSP was replaced in 2007 with several iterations of Advantage New York, a targeted rental subsidy that ended after state financial support was cut in 2011 (DHS 2008).

Table 1. Timeline of Key Events

| 1979 Callahan v. Carey 1981 Shelter mandate for individuals 1983 Shelter mandate for families McCain v. Koch 1992 Cuomo Commission Report 1993 DHS created as independent agency 1995 Eligibility process implemented for family shelter 2002 Mayor Bloomberg takes office 2003 Master Panel Homeless Families Report Performance Incentive Program (PIP) 2004 City ends priority referrals for federal housing programs Five-year Action Plan Homebase Pilot Housing Stability Plus (HSP) Temporary PATH intake center 2006 Next Step Shelter model 2007 Advantage replaces HSP Homebase expands citywide 2008 McCain v. Koch settlement 2010 Shelter entry and exit rates peak 2011 CARES unified case management system New PATH intake facility opens PIP ends for family shelter providers State withdraws Advantage funding 2012 Advantage subsidies end | | • | | | | |
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| | | PIP ends for family shelter providers | | | | |
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| | 2012 | Advantage subsidies end | | | | |

Related Policies and Programs

This section describes in more detail five key programs implemented under the Bloomberg administration pertaining to homelessness prevention, intake, and shelter for single adults and families.

Homebase Community Prevention

The Homebase Community Prevention program, which operates citywide as of 2007, was created to facilitate prevention outreach to those at risk of becoming homeless. Homebase providers target vulnerable families and individuals and screen them using an evidence-based risk assessment tool to determine their likelihood of entering shelter. Services such as anti-eviction legal and advocacy assistance, supplemental shelter allowances, and rent arrears are now provided to about 10,000 households each year at 15 Homebase locations (DHS 2013b). DHS has used (and continues to use) independent evaluation and research to refine Homebase targeting efforts (see table 2), and the program has received nationwide praise as an innovative and effective prevention model.

Prevention Assistance and Temporary Housing (PATH)

In 2004, DHS opened a temporary PATH intake facility for families with children. The Emergency Assistance Unit (EAU), a building criticized for unsafe and dehumanizing conditions, was closed and eventually demolished. PATH brought with it extensive reforms to the family shelter intake process. Application processing time was reduced from one or two days to roughly seven hours. PATH also introduced a new eligibility review process, limited to 10 days, during which time families are placed in shelter while their applications are investigated. A brand new, permanent PATH building opened in 2011, with structural improvements including storage rooms for families to temporarily check in their belongings and apportioned areas for the care of small children. The PATH facility is three times the size of the old EAU and

employs more than 300 staff members from multiple city agencies. ⁹ It includes an expanded diversion unit and a resource room staffed by licensed social workers.

Next Step Shelters

The Next Step shelter model began in 2006 as a relocation site for single adults who did not adhere to their ILPs (DHS 2008). With a 13:1 client-to-staff ratio, eight Next Step shelters currently use a case management—intense approach to help both single adults and families work toward self-sufficiency. Due to a lack of space in existing Next Step facilities, more than 30 single and family shelters have been equipped to provide the same intensive services to residents without relocating them to Next Step. DHS has also found that conferences between caseworkers and clients (before relocation to Next Step occurs) have helped push shelter residents to follow their ILPs. The program has been subject to criticism from homeless advocates (Murphy 2011).

Performance Incentive Program

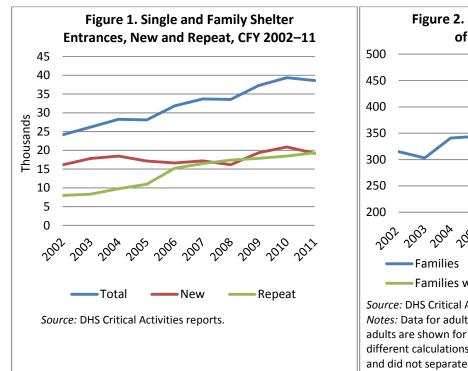
In an effort to increase provider efficiency and accountability, the Performance Incentive Program was implemented in 2003 (DHS 2008). PIP is designed to reward providers who place clients into permanent housing and reduce time spent in shelter. Providers are rated according to three measures: number of permanent placements, length of stay, and shelter recidivism. PIP enables DHS to increase shelter funding by up to 10 percent or decrease it by up to 15 percent based on performance. Currently, there is a PIP in place for single-adult and adult family shelter providers. According to DHS staff, as of 2011 there is no longer a PIP for shelters serving families with children because New York State withdrew its approval of the program.

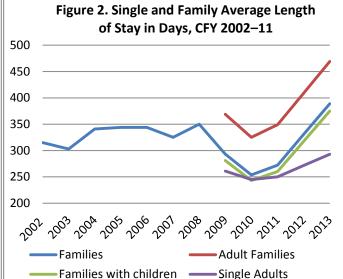
Advantage

In 2007, DHS replaced Housing Stability Plus with a more targeted rental assistance program called Advantage New York. Advantage was composed of several smaller programs tailored to specific populations: Work Advantage, Children Advantage, Fixed-Income Advantage, and Short-term Advantage. While HSP required recipients to maintain receipt of public cash assistance in order to continue receiving a subsidy, Advantage did not; Work Advantage was designed to incentivize finding employment (DHS 2008). Like HSP, Advantage offered short-term subsidies (two years at most)—a major difference from programs such as federally funded Housing Choice vouchers and public housing. More than 21,000 families with children were placed out of shelter and into housing through the Advantage program before it ended in early 2012; however, an estimated 5,400 of these families have since returned to the shelter system (DHS 2014).

Results

New York City continues to face record numbers of residents in its shelter system. In December 2013, 51,174 individuals were residing in the shelter system, compared with 32,493 individuals in April 2002. 10 The number of people entering or re-entering shelter during each year increased until City Fiscal Year (CFY) 2010, when entry began to decrease (figure 1). While shelter entries have fallen over the past few years, the rate of exit has not been sufficient for the overall shelter population to drop or even level off. The length of stay averaged across all shelter residents in each CFY has increased (figure 2). 11 DHS records show both shelter entries and exits for families with children peaked in the middle of CFY 2010. Since then, rates of entry and exits have both fallen, but the overall number of families with children in shelter has continued to climb.12





Source: DHS Critical Activities reports.

Notes: Data for adult families, families with children, and single adults are shown for CFY 2009-13. Before CFY 2009, DHS used different calculations for reporting lengths of stay for single adults and did not separate families into adult families and families with children.

Homelessness Prevention

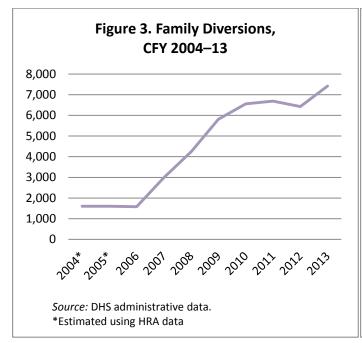
In 2006, Homebase was a finalist for Harvard's Innovations in American Government award and received the Opportunity and Empowerment Award from the Secretary of Housing and Urban Development (HUD) in 2009 (HUD 2009). Following this early success, DHS commissioned independent evaluations of Homebase, including a random assignment experiment that found the program to be cost-effective and significantly reduce entry into family shelter (Rolston et al. 2013). The commissioned studies are outlined in table 2. DHS funding for Homebase has doubled since 2005 (DHS 2013a), and efforts to refine homelessness prevention targeting are ongoing.

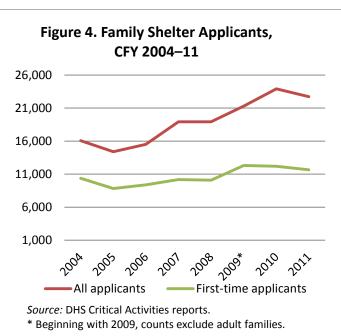
Table 2. Homebase Community Prevention Evaluations, 2009–13

| Study purpose | Lead author | Strategy | Study period | Key finding |
|--|--|--|--------------|--|
| Does Homebase reduce shelter stay to the extent that it is costeffective? | Howard Rolston, Abt Associates | Experimental, random assignment | 2010–12 | Savings offset costs by \$140 per person. Over 27 months, Homebase reduced nights in shelter per family by 22.6, the share spending at least one night in shelter from 14.5 percent to 8 percent, and entrants' average nights in shelter from 233 to 120. |
| How much more effective could Homebase be with better targeting? | Marybeth Shinn, Vanderbilt University | Observational, administrative data | 2004–08 | With improved targeting, Homebase could reach 90% rather than 70% of those families who would otherwise enter shelter. |
| How does Homebase affect shelter entry and exit? | Brendan O'Flaherty, Columbia University | Observational, quasi- experimental | 2004–08 | Shelter entries fell where Homebase services were provided by some number between 10 and 20 for every 100 families served. There was "no discernible effect on the length of shelter spells." |
| What locational and neighborhood characteristics correlate with shelter entry? | John Mollenkopf, City University of New York | Observational, ecological analysis | 2004–09 | The neighborhood characteristics of poverty, unemployment, family distress, and contact with the criminal justice system correlate with shelter entry more strongly than housing market trends. |

Shelter Intake and Diversion

DHS has been successful with shelter diversions for both single adults and families. For single adults, the average diversion rate was about 20 percent in 2013. For families, DHS has reported a yearly total of people diverted at PATH since CFY 2004. As shown in figure 3, PATH diversions increased substantially beginning with CFY 2006. Since diversion occurs before families complete their applications, the relatively steady rise in completed applications over the same period (figure 4) implies that, particularly from 2006 to 2010, caseworkers diverted an increasing portion of arriving families to PATH. Diversion policies have been praised by city workers and service providers for reducing shelter entries as well as for connecting individuals to more appropriate social services and assistance, including other housing options. At the same time, the family shelter intake process has been criticized by homeless advocates for turning away families in need of temporary housing. ¹⁴





Looking Ahead

The growing population of adults and children living in New York City homeless shelters presents an unprecedented challenge for the new mayoral administration. The city has an extremely high population density, rising housing costs, and a dwindling supply of affordable housing for low-income people, such as those working low-wage service industry jobs. Unlike other cities where shelters often turn people away or place them on waiting lists, New York is mandated to provide temporary housing for every individual and family determined eligible, creating a uniquely challenging situation for city leaders and policymakers.

Since homelessness is not a stand-alone problem, continuing a multifaceted approach through multiple city agencies is essential. In particular, more must be done in the arena of housing development to take some of the strain off the shelter system. Provided below are five areas of focus for potential policy developments related to prevention, intake, and shelter for single adults and families.

Housing Opportunities for Those Exiting Shelter

There is some ongoing disagreement among city workers, service providers, advocates, and researchers concerning the degree to which the assurance of rental assistance for shelter residents creates an incentive for people to enter the shelter system.¹⁵ While advocates have repeatedly called for reinstatement of priority referrals, the total number of placements into these programs through NYCHA was 6,433 in FY

2012 and 5,166 in FY 2013, not enough to make a significant impact on shelter exits (Office of the Mayor 2013). Despite the debate over incentive and priority referrals, it is generally agreed by everyone that some form of rental assistance is needed to help people, particularly families, exit shelter.

If the city should once again seek a rapid re-housing approach to the homelessness crisis, it is recommended to develop a variety of housing programs to tailor rental assistance and related services to the particular needs of individuals and families. For example, a family with two able-bodied but unemployed parents might only require a rental subsidy for a few months, whereas a single parent with no job experience and a history of mental illness would need more extensive housing assistance coupled with supportive services. Programs should differ in the following broad areas:

- amount of rental subsidy
- length of time rental assistance will be provided
- policies for eligibility and benefit reassessment
- inclusion and intensity of supportive case management services
- types of supportive services to be provided

According to city officials, New York City would not be able to fund such an undertaking on its own, as the costs for such programs to have any significant impact would reach into the hundreds of millions of dollars. The burden of funding large-scale rental assistance programs is typically shared by local, state, and federal partners.

Use of Data for Analysis and Targeting

DHS under the Bloomberg administration leaves behind an impressive legacy of data collection, reporting, and analysis. However, some researchers suggest there is room to improve these efforts to better facilitate independent evaluation. Additional statistics that can be easily interpreted and analyzed should be collected and published regularly. For example, in addition to its monthly averages by population, DHS could supply statistics on cohorts of families that applied in the same month to shelter, providing information on their completed lengths of stay and manners of exit. Such data are essential for recognizing trends in homelessness as well as for evaluating program efficiency and effectiveness. It has also been suggested that aggressive qualitative analysis, including surveys, focus groups, and interviews with shelter clients, would provide critical missing information about what happens to people before they come into shelter, as well as their level of knowledge of community resources.

Collaboration and Ease of Navigating Services

Much has been accomplished in New York City regarding communication between agencies and providers serving those currently or at risk of experiencing homelessness. However, patchwork programs and services are still difficult to navigate for the populations they were created to serve. To ease DHS's administrative burden, citywide collaboration efforts should be expanded and services should be further connected and streamlined where possible. In particular it has been suggested that institutions such as jails and psychiatric hospitals that frequently discharge people who end up coming into the shelter system should be part of the collaborative process.

Increasing Provider Standards and Moving Away from Capacity-Focused Contracting

The shelter mandate has created a focus on capacity in the city shelter system because the city must make sure there are always enough shelter beds and family units to meet rising demands. DHS resources are often spent on less-than-efficient shelter facilities and programs simply because the contracted provider is able to provide space. It is suggested that the city move away from a cost-reimbursement provider contract model and put procedures in place to enable transferring contracts from low-performing providers to high-

performing providers. For example, organizations that have acquired essential facilities but do a poor job managing shelters could be partnered with accomplished providers to better serve residents. Additionally, the city should consider putting a PIP in place again for family shelter providers, as well as giving providers more flexibility on how to invest the funding they receive from PIP performance incentives.

Improvement of Adult Family Shelter Services

DHS took the suggestion of the Special Master Panel to create a separate shelter intake point for adult families in order to create a safer and more appropriate environment for families with children. In part because adult families make up only about 8 percent of the shelter population (according to DHS), their service improvements, while significant, have fallen behind those for single adults and families with children. Some service providers feel adult families are disproportionately placed in non-contracted hotels, and they are not prioritized for supportive housing like some of their single adult counterparts. Now that a separate shelter path has been put in place for adult families, further resources should be directed through DHS's existing adult families program to address more of the specific needs of this population.

Acknowledgment

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Notes

¹ Housing is defined as affordable if its associated costs are equal to or less than 30 percent of annual household income. Low-income is defined as households with annual income at or below 50 percent of area median income.

² Another brief in this series covers street outreach and supportive housing for the chronically homeless in New York City. These important aspects of the Bloomberg administration's efforts to reduce homelessness are not addressed in this brief.

³ Julie Bosman, "Tenants Wary of Clustering of Homeless," New York Times, March 3, 2009.

⁴ Linda Gibbs went on to serve as Deputy Mayor for Health and Human Services in 2006.

⁵ Leslie Kaufman and David W. Chen, "City Reaches Deal on Shelter for Homeless," New York Times September 17, 2008.

⁶ "City Erred in Putting Shelter Rules into Effect, Court Rules," New York Times, November 26, 2013.

⁷ Bosman, "Tenants Wary."

⁸ Julie Bosman, "Bloomberg Policy Blamed for Families in Shelters," *New York Times,* April 22, 2009.

⁹ "Mayor Bloomberg, Deputy Mayor Gibbs and Homeless Services Commissioner Diamond open the city's new Prevention Assistance and Temporary Housing Center in the Bronx after eight years of development," Office of the Mayor, City of New York, press release PR-149-11, May 11, 2011.

¹⁰ These totals come from historical shelter census data provided to the authors by DHS.

¹¹ DHS defines this measure as the "average length of stay for all families during current fiscal year". By construction, this measure will be relatively low in years with more entries (when a larger portion of shelter population is near the beginning of their stay) and high in years with fewer entries (when a larger portion is farther into their stay). This holds true even if the expected full length of stay for each shelter resident remains constant. The steep rise in average length of stay in chart 2 starting in CFY 2010, then, is due not necessarily to longer expected lengths of stay, but may be due in large part to a decreasing rate of entry.

¹² A chart of shelter entries, exits, and census for families with children was provided to the authors by DHS.

¹³ This percentage was derived from a data chart entitled "DHS Single Adult Diversions – All Diversion Groups" provided by DHS to the authors.

¹⁴ Kaufman and Chen, "City Reaches."

¹⁵ Research conducted by the NYC Independent Budget Office found that restoring priority referrals for public housing and housing choice vouchers would reduce costs to the city, despite any potential changes in public behavior. See Independent Budget Office (IBO), "Fiscal Impact of Prioritizing Homeless Families for Public Housing and Vouchers," letter, 2012.