

NEW YORK

ABOUT THIS REPORT

The state report is a resource to inform donors and funders about the local context of social issues affecting at-risk populations. This analysis can be used to better understand current local trends and the unique social and economic situation in which the

social issue exists. The information below complements the social issue report and the guide to giving by drawing attention to local initiatives related to the social issue.

FACTS: ENDING CHRONIC HOMELESSNESS IN NEW YORK

Number of cities/regions that are implementing strategic plans to end chronic homelessness¹

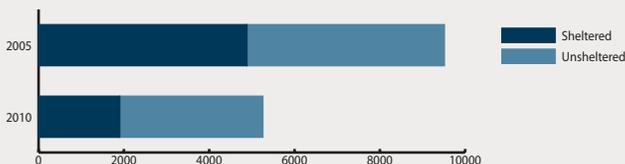
10
2010

Housing stabilization rate of formerly chronically homeless persons five years after placement²

88%
2010



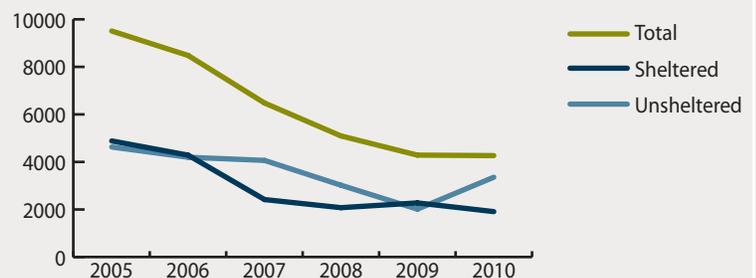
In New York, chronic homelessness has fallen by over 5,000 cases from 2005 to 2010 and the number of chronically homeless individuals who are living on the streets has fallen by nearly 25 percent.³



SOCIAL ISSUE INDICATORS

Long-term success in ending chronic homelessness in a given region is evaluated using the **total number of chronically homeless persons**. This number is determined by local shelters using city-wide point-in-time (PIT) counts, in which volunteers count the number of homeless persons in shelters and on the street on a given night. PIT counts are analyzed in conjunction with other local data collected through shelter and street outreach to determine the number of chronically homeless persons. These data can be aggregated at the state, regional, and national levels.

POPULATION OF CHRONICALLY HOMELESS PERSONS, 2005-2010⁴



WHAT'S HAPPENING IN NEW YORK

PROGRESS IN NEW YORK

Between 2008 and 2009, New York State reduced its chronically homeless population by over 17 percent, by permanently housing over 800 chronically homeless individuals. New York is among the top performing states in reducing chronic homelessness.⁵

New York's progress in reducing chronic homelessness has been achieved in large part due to the efforts of local initiatives across the state. Ten cities or localities in the state have created plans to address chronic homelessness at the local level, including New York City.

NEW YORK CITY'S FIVE YEAR PLAN

- In 2004, Mayor Michael Bloomberg released New York City's plan to reduce the number of people staying in the

city's shelters by two-thirds over a five year period. The plan involved measures to prevent homelessness, shelter the temporarily homeless, and house the chronically homeless.⁶ After five years, the homeless shelter population, including temporarily and chronically homeless persons, remained stable.⁷ Despite the lack of progress in reducing the overall homeless shelter population, the City has reduced chronic homelessness significantly through its Safe Haven program and in collaboration with nonprofits in New York City. The Safe Haven program provides housing with minimal entrance requirements for long-term stayers, who are similar to the chronically homeless but do not have disability status. The program does not fit within SIR's criteria for housing first, but warrants reference here because it serves a similar demographic.

■ **Safe Havens** – The ongoing Safe Haven program is a partnership between New York City and nonprofit organizations with the intention of housing and supporting long-term stayers in the area. As of 2008, seven Safe Havens programs have been created and nearly 300 homes made available.⁸ The program offers housing without any entry requirements, other than being a long-term stayer. Once admitted into the program, individuals pay 30 percent of their income towards rent and follow normal tenancy guidelines. As a result of the implementation of Safe Havens and housing first programs in the City (see the “Organizations Lead the Housing First Paradigm Shift” section below), the number of long-term stayers fell from 1,400 in 2005 to 630 in 2009, and their average length of stay dropped from 328 nights to 239 nights over a four year period.

ORGANIZATIONS LEAD THE HOUSING FIRST PARADIGM SHIFT

Housing First, an approach to ending chronic homelessness through housing and support services, was first introduced by the nonprofits Pathways to Housing and Common Ground. The organizations have provided research to support the approach, advocacy for the expansion of the movement, and support for nonprofits in the sector. The accomplishments of these organizations are apparent in the drastic reduction of chronic homelessness in New York City and the spread of the housing first approach across the country.

■ **Pathways to Housing** has been a principal organization in the movement since the organization founded housing first for adults with psychiatric disabilities in 1992. Using a model based on harm reduction and optional mental health treatment, Pathways has housed 600 chronically homeless individuals since its founding and boasts an 85 percent stabilization rate of consumers who have remained stably housed for over five years. The organization has continued its leadership by focusing on providing technical advice and practical guidance to new and established housing first programs across the country, including training in the field and conducting research into the outcomes of the approach. The Pathways model has been replicated in 40 cities.

■ **Common Ground** has provided housing to chronically homeless individuals in the Times Square neighborhood since the early 1990s. Common Ground has housed 498 individuals, not all chronically homeless, in permanent or transitional housing. Additionally, it has helped to reduce homelessness in Times Square by 87 percent over a four year span. Common Ground is leading the 100,000 Homes Project to increase awareness of chronic homelessness and support newly established housing first programs to end chronic homelessness by July 2013. Through the 100,000 Homes Project, Common Ground has trained and guided 76 communities in 27 states toward the goal of ending chronic homelessness through applying the housing first approach.

REFERENCES FOR FURTHER RESEARCH

ORGANIZATION	WEBSITE
Coalition for the Homeless	www.coalitionforthehomeless.org
National Alliance to End Homelessness	www.endhomelessness.org
New York City Department of Homeless Services	www.nyc.gov/dhs
Pathways to Housing Research Library	www.pathwaystohousing.org/content/research_library

ABOUT SOCIAL IMPACT RESEARCH

Social Impact Research (SIR) is the independent research department of Root Cause, a research and consulting firm dedicated to mobilizing the nonprofit, public, and business sectors to work together in a new social impact market. SIR aggregates, analyzes, and disseminates information to help donors identify and support the most effective, efficient, and

sustainable organizations working to solve social problems. Modeled after private sector equity research firms, SIR produces research reports, analyzes philanthropic portfolios, and provides educational services for advisors to help their clients make effective and rigorous philanthropic decisions.

ENDNOTES

1. United States Interagency Council on Homelessness, “Ten-Year Plan Update” (2010).
2. Culhane, Dennis and Thomas Byrne, Ending Chronic Homelessness: Cost-Effective Opportunities for Interagency Collaboration, New York State Office of Mental Health and New York City Department of Homeless Services, (2010): 12.
3. United States Department of Housing and Urban Development, “Homeless Populations and Subpopulations: New York, 2005-2010” (2010).
4. Ibid.
5. Sermons, M William and Peter Witte, State of Homelessness in America, National Alliance to End Homelessness, (2011).
6. Ibid.
7. The City of New York, Uniting for Solutions Beyond Shelter: The Action Plan for New York City, The City of New York, (2007).
8. New York City Department of Homeless Services, “HOPE 2010: The New York City Street Survey” (2010).
9. Diamond, Seth, “Executive Budget Hearing for Fiscal Year 2011,” New York City Department of Homelessness, May 18 2010.
10. “Long-term stayers” are individuals with long stints in emergency shelters. Long-term stayers and HUD-defined chronically homeless persons differ in that long term stayers do not have to have a diagnosed disability.