Creating 30,000 Homes for the Most Vulnerable New Yorkers: Why New York Needs a New City-State Supportive Housing Agreement

With New York homelessness at record levels, Governor Cuomo and Mayor de Blasio should negotiate a new City-State agreement to create 30,000 units of supportive housing over the next ten years. Supportive housing has proven to be the most successful and cost-effective solution to ending homelessness for individuals and families living with disabilities and other barriers. But there is not nearly enough supply to meet the record need in New York City and the current City-State supportive housing production initiative, *New York/New York III (NY/NY III)*, ends next year.

More than 20,000 households per year are found eligible for supportive housing but there's currently only one housing unit available for every six eligible applicants. This ratio will only worsen if a new City-State supportive housing agreement is not reached this year.

By almost every measure, *NY/NY III* has been a success. The agreement has:

- Reduced use of shelters, hospitals, psych centers and incarceration, for an average net public savings of \$10,100/unit per year;
- Decreased chronic homelessness among single adults by 47% in first 5 years; and
- Provided stability with more than 75% of NY/NY III tenants remaining housed after two years.

Creating 30,000 units of new supportive housing would also be a critical element in a broader approach by the City and State to address record New York homelessness. The new agreement should include:

- **15,000 units of new supportive housing construction** Given the 6:1 ratio of demand to available units there is a demonstrated need for more supportive housing. But given the dearth of affordable housing available in the city, we propose that the new supportive housing agreement focus on new construction, rehabs and conversions.
- **15,000 units of other supportive housing scattered in new affordable housing development and market rate housing.** Some New Yorkers living with disabilities do not need to live in permanent supportive housing residences to maintain stability; many just need affordable housing with less intensive and/or time-limited services. Again, given the scarcity of rental housing affordable to the poorest New Yorkers, it's important that the new agreement include an additional 15,000 units of supportive housing as set-asides in new affordable housing construction, and where and when the market allows, scattered-site supportive housing in existing rental housing.
- **Continue to prioritize individuals with long histories of homelessness and illness**: Specifically, the next agreement should:
 - Target the vast majority of resources toward individuals, families (including adult families) and young adults who are homeless and vulnerable including those living with serious and persistent mental illnesses, chronic health conditions including HIV/AIDS, and long term addiction. This would include people living on the street and in the DHS, HASA, DYCD and DV shelter systems.
 - Continue what NY/NY III began by also allowing certain units targeted toward people exiting
 institutions into homelessness who have multiple disabilities and/or barriers to obtaining
 housing on their own.
 - Dedicate two-thirds of the units in the new agreement (20,000 units) to individuals with the remaining one third for families (8,700 units) and youth (1,300 units). A larger proportion of the 15,000 service-enriched affordable housing and scattered-site units created by the new agreement should be allocated to families.
 - Institute a coordinated assessment and referral system with a risk assessment tool that can better match need with resources, and ensure that the most vulnerable families and individuals can access supportive housing.
- **Provide adequate funding to operate housing and provide support services.** To be viable, funding for scattered-site supportive housing will need to adjust to market rents over time and all supportive housing will need to include long-term contracts and adequate operating and service funding to provide sufficient supports to keep tenants healthy and stable.

Submitted on behalf of:

Association for Community Living Center for Urban Community Services Coalition for Behavioral Health Agencies Coalition for the Homeless Coalition of Institutionalized Aged & Disabled Community Access, Inc. CSH Enterprise Community Partners, Inc. Good Shepherd Services Homeless Services United, Inc. Odyssey House Palladia, Inc. Supportive Housing Network of New York