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COMMUNITY BOARD NO. 2, MANHATTAN

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HUMAN SERVICES COMMITTEE

The Human Services Committee of Community Board No. 2, Manhattan held its regular monthly meeting on February 24, 2022, at 6:30pm by video conference.

Committee Members Present: Susanna Aaron, Chair; Adam Zeldin, Vice Chair; William Benesh, Keen Berger, Ritu Chattree, John Deverna, Wayne Kawadler, Ryder Kessler

Committee Members Absent Without Notice: Ivy Kwan Arce

Public Members Absent Without Notice: Rachel Yarmolinsky

Other CB2 Members Present: Jeannine Kiely (Chair), Carter Booth, Coral Dawson, Valaerie de la Rosa, Michael Levine, Donna Raftery, Rocio Sanz, Antony Wong

CB2 Staff Present: Bob Gormley, Josh Thompson, Eva Mai

Elected officials represented: NYS Assemblywoman Deborah Glick; Manhattan Borough President Mark Levine; NYC Council Member Erik Bottcher; NYC Council Member Christopher Marte

Live translation services in Mandarin and Cantonese were offered throughout the meeting. Online and emailed notification by CB2 was provided only in English, but flyers posted on Grand Street between Elizabeth Street and Bowery were in English and Chinese.

Agenda: Presentation by NYC Department of Social Services/Department of Homeless Services (DSS/DHS) and the not-for-profit organization Housing Works (HW) regarding plans to establish a Drop-In Facility with Stabilization Beds at 231 Grand Street, between Elizabeth Street and the Bowery, to provide medical and behavioral health care, case management, housing placement, and other social services to individuals experiencing unsheltered homelessness.

REPORT:

Our committee heard a presentation from Charles King, Chief Executive Officer and Co-Founder of Housing Works, who was accompanied by representatives from the NYC Department of Social Services: Joslyn Carter, Administrator; Shane Cox, Associate Commissioner; Erin Drinkwater, Deputy Commissioner Intergovernmental and Legislative Affairs; and Leilani Irvin, Borough Director.

Over 200 members of the public attended the videoconference. The meeting sign-up sheet indicated both residents and non-residents of Community District 2, while many others who registered to attend did not provide home addresses.

A written copy of the presentation by Housing Works can be accessed here:

- **English:**https://drive.google.com/file/d/1bnpmbszEaYXA1mc9Wd3_LxdPeCVIk2_D/view?usp=sharing
- **Traditional Chinese Characters (for Cantonese Speakers):**
https://drive.google.com/file/d/1K4c47WKvlnNNGqJK3uAM9JwvPs7_sDVC/view?usp=sharing
- **Simplified Chinese Characters (for Mandarin Speakers):**
<https://drive.google.com/file/d/1K8KEJPLS0B7rza2Wr5-AHU1Q7pMWu4Fm/view?usp=sharing>

Contact for Charles King, CEO of Housing Works: king@housingworks.org, (917) 747-0102

BACKGROUND ON HOUSING WORKS¹

- Founded 1990 to address homeless among people living with HIV.
- The first organization in the United States to house homeless people without regard to their use of drugs in a supportive housing environment.
- Now serves over 15,000 low-income New Yorkers annually, including 2,000 people with HIV.
- Federally Qualified Health Center (FWHC) operating five clinics in Brooklyn and Manhattan.
- Over 700 units of supportive housing operated under harm reduction principles that do not prohibit possession of drugs or alcohol.
- Provider of supportive services: case management, substance abuse treatment, mental health care, job retraining, etc.
- Client base is 51% Black, 21% Hispanic, nearly all at or below poverty line.
- 1 in 3 have history of incarceration.
- 1 in 3 identify as LGBTQ.
- 51% have diagnosed mental health issues.
- 26% are active substance abusers (20% of these dually diagnosed with mental health issues).

THE PROJECT:

- 231 Grand Street, on the corner of Bowery, is the former Best Western Hanbee Hotel, recently used for non-congregant housing for the homeless during the Covid-19 pandemic. It is currently vacant.
- The 8-story building is zoned C6-1G and has an estimated gross floor area of 48,911 sf.²
- HW will lease the building but intends to purchase it over a period of several years.
- Pending approval of the budget and contract by NYC, HW hopes to open this facility by late Spring, 2022, the building having been recently renovated and in good condition.
- The program, which was presented to us as the first facility of its kind in NYC, will be known as a Drop-in Center and Stabilization Shelter for unsheltered homeless adult men and women. It will house 94 stabilization beds and over 50 “drop-in” chairs. The facility will include an outdoor deck for smoking.
- The model is considered a pilot program and will be evaluated by DSS for outcomes.
- The Drop-In Center will be a walk-in facility providing meals, shower, changing rooms, laundry facilities 24 hours a day, 365 days a year, to homeless adult men and women. Clients will be allowed to rest in one of 50-or-so lounge chairs but will not be provided beds.

¹ <https://www.housingworks.org>

² <http://maps.nyc.gov/doitt/nycitymap/>

-The facility will follow a “harm-reduction” model, which means that visitors will not undergo checks for illegal substances. This “low-threshold” program is intended to reduce barriers to entry and to entice individuals toward receiving social services. The use of drugs or alcohol will not be prohibited. Narcan and clean syringes will be available to prevent death by overdose and the spread of disease.

-In addition, the center will offer a host of services aimed at long-term wellness. The staff will include a housing placement specialist, social workers, medical and psychiatric nurse practitioners, and access to telehealth.

-Staff will speak English, Mandarin, Cantonese, and Spanish.

-Residential aides will be on site 24 hours per day to assist residents in daily activities, provide security, monitor hallways and building exterior, and provide access to services. They will not wear uniforms or carry weapons and are meant to engage and befriend clients to interest them in accepting services.

-HW will hire peer outreach workers, including from Chinatown, to conduct street outreach in the area.

-**Additional note per notification of Public Hearing of March 10, 2022: “The contract term shall be from March 1, 2022 to June 30, 2027 with one three-year renewal option from July 1, 2027 to June 30, 2030. The contract amount will be \$63,762,100. CB2, Manhattan. E-PIN #07122P0011001.”

STABILIZATION BEDS

-The facility will also house 94 “stabilization” beds. These are designed for use by adult men and women who have been living without shelter and have refused the traditional shelter that New York City provides, by law, to anyone who requests it. Candidates will be referred to HW from outreach teams working in a catchment area that will include Sara Roosevelt Park to the east and Washington Square Park to the west but that will seek to cover all nearby areas of need.

-In addition to receiving referrals from the Manhattan Outreach Consortium,³ HW will employ trained peer outreach workers to do its own canvassing.

-Stabilization beds will be prioritized for clients who access the drop-in services.

-Unlike in traditional NYC congregant shelters, clients will reside in individual bedrooms. They will not have a curfew. If they fail to return for a night or two, their bed will be held for them.

-Housing Works will be expected, by contract with NYC DSS, to transition these clients to permanent housing within a period of twelve months.

-The distinction between “stabilization beds” and the Safe Haven model⁴ that will be employed at Paul’s Place – a drop-in center and Safe Haven expected to open imminently at 112-114 West 14th Street⁵ - is that Safe Havens are designed for individuals who face more entrenched and chronic homelessness. The baseline criteria for eligibility to a stabilization bed is living on the street. The model is intended to be flexible and low-threshold.

³ <https://goddard.org/programs/fighting-homelessness/homelessoutreach/>

⁴ <https://www1.nyc.gov/site/dhs/outreach/street-outreach.page>

⁵ [For more information on this project, see reports of previous CB2 meetings on this topic, <https://cbmanhattan.cityofnewyork.us/cb2/wp-content/uploads/sites/9/2022/02/Report-2018.11.29-Safe-Haven.pdf> <https://cbmanhattan.cityofnewyork.us/cb2/wp-content/uploads/sites/9/2022/02/Report-2020.10.29-Safe-Haven-ii.pdf>

ADDITIONAL DETAILS ABOUT THE PROJECT

Is this project a “done deal”? Is there any way to stop it other than litigation?

Erin Drinkwater: Because of the combination of our legal obligation to provide shelter, and the fact that DHS buildings are not subject to ULURP, there wouldn't be a ULURP application here.⁶

Will you pay property taxes?

Charles King: As long as the hotel is owned by the current owner, that owner pays taxes. Once we take ownership we would petition for tax exemption, as is typical for nonprofit ownership.

What are the rental terms?

Charles King: The goal would be within the first two years of this contract to sign a purchase agreement with the landlord and then negotiate an extended contract with DHS that would allow us to pay off the acquisition and HW would own the building permanently.

How much is paid to your organization?

Charles King: We are not paid by person who comes in. We operate on a cost-reimbursement service contract. But there are expectations from DHS. If someone comes to stay in our facility there's an expectation that within twelve months we're going to move that person into permanent housing. That has been made easier by a change in policy that will now allow us to lease apartments in the community for people at up to 110% of fair market rent.

Would registered sex offenders with living restrictions be allowed to stay here?

Erin Drinkwater: For the drop-in center, individuals are not spending the night, so there are no restrictions. For the overnight beds, an individual who is a Level Three offender or otherwise has a residency restriction would not be able to be placed at this location.⁷

Is this model of care more expensive than other models of homeless shelter?

Erin Drinkwater: The ultimate goal here is non-profit ownership of the building. That is important for the work being done, where there is a long-term resource for those being served, and reaching a stage where it's not necessary to have this type of program in this location – being able to look at a transition to housing models, for example.

Charles King: Offering an integrated model of care is going to be more expensive than traditional congregate shelter. But just today I had a conversation with DSS Commissioner Gary Jenkins, and he's assured me that he wants this to be a richly staffed program and believes that we can prove – to the NYC Office of Management and Budget (OMB) and to everyone else – that the return on investment will be worth this additional expense.

What is the timeframe for opening this facility?

⁶ For an explanation of ULURP, see <https://citylimits.org/zonein/ulurp-explained/>. For a brief description of the process, see <https://www1.nyc.gov/assets/planning/download/pdf/applicants/applicant-portal/lur.pdf>

⁷ For more information on the sex offender registry, see CB2 Human Services report of September 30, 2021 <https://cbmanhattan.cityofnewyork.us/cb2/wp-content/uploads/sites/9/2021/10/09-September-2021-Human-Services-Minutes-on-Sex-Offenders.pdf>

Charles King: We are now in the process of negotiating the budget with OMB. My experience is that there are about 30 days or so for an approved budget to be turned into a contract. The Comptroller must approve that contract, and our new Comptroller has promised he is going to accelerate contract approvals for not-for-profit organizations. We haven't started recruiting staff, but we are working towards an opening date of late this spring.

How many will there be in staff at the facility?

Charles King: We will have roughly 20 in staff on-site 24 hours a day. These include residential aides, medical and behavioral health providers and other social service staff. RAs are trained in de-escalation and engagement and we deliberately don't put them in security uniforms. We will have a telephone number for neighbors to call us if there are any problems at the facility -- or if there is anyone in the neighborhood who is *not* a client and is engaging in nuisance behavior, because we can send a member of our outreach team to engage that person.

What if someone needs a bed and all your beds are filled?

Charles King: That person can either rest on our lounge chairs at the drop-in center, which is open 24 hours a day, or we would reach out to DHS and ask them to place that person.

Shane Cox: We have shelters and drop-in centers and stabilization beds and Safe Havens throughout the city and we can find another appropriate place.

Joslyn Carter: Individuals have a legal right to shelter in New York City so we cannot return people to the street if somebody needs a bed.

So if there's no vetting process, does that mean anyone can come from anywhere, like New Jersey or Connecticut, and get a bed?

Erin Drinkwater: There is a misperception that the NYC shelter system is sheltering people from other states or other parts of New York state. The vast majority of people are in fact from New York City and have ties to the city.

Would any additional facilities similar to this be located elsewhere within Community District 2, such as in the Central or Western portions?

Erin Drinkwater: If there are providers interested in responding to our open RFP to open a facility in that location, the agency would certainly welcome it.⁸

Shane Cox: And the facility at 231 Grand Street would serve individuals throughout the area. We have outreach workers in the field 24 hours a day, including in Washington Square Park.

Joslyn Carter: Outreach teams work above and below ground, so they will enter the subway stations, as well.

THE HARM REDUCTION MODEL

What is meant by "harm reduction"?

Charles King: It's educating clients about drug use; providing clean needles to prevent disease; if you're taking opioids, there may be a dangerous amount of fentanyl in the drug, so don't be

⁸ A Drop-in Center and Safe Haven – a model similar to this – is planned for 112-114 West 14th St. For more information on this project, see reports of previous CB2 meetings on this topic, <https://cbmanhattan.cityofnewyork.us/cb2/wp-content/uploads/sites/9/2022/02/Report-2018.11.29-Safe-Haven.pdf> <https://cbmanhattan.cityofnewyork.us/cb2/wp-content/uploads/sites/9/2022/02/Report-2020.10.29-Safe-Haven-ii.pdf>

alone when using, and have Narcan in case someone has an overdose; it's offering buprenorphine to replace opioids.

HW was one of the first operators to have a syringe exchange program in New York City, and now these are the leading source of voluntary referrals for people into drug treatment.

You won't screen for drugs or alcohol. What about for weapons?

Charles King: If we identify that somebody has a weapon we're going to take appropriate action, including the police if we need to, but... What is one person's weapon is another person's utility tool, so we want to be sensitive and thoughtful.

Are people permitted to leave the facility after consuming drugs or alcohol?

Charles King: We don't have the ability to detain people - but that's not what people do. They don't move very far from where they injected. We see homeless people doing it in the street because they have no place to do it.

Will you distinguish between drugs permitted? Because marijuana is very different than psychedelics.

Charles King: We are not making people empty their pockets. However, generally, when somebody is in our program for any length of time, we know exactly what their drug habits are. Obviously, if somebody comes out of their room and they're clearly high or disruptive, we're going to take intervention steps, and we're not going to hesitate to call the police if they create a problem for us, so I don't think we're going to see a scenario where, for example, someone takes K2 and goes out on a rampage.

What drugs do you deem safe to use?

Charles King: The reason we use the term "harm reduction" is that any drug, including tobacco and alcohol, can cause serious harm and even death. We are just saying that "just say no" doesn't keep people from using drugs, so our goal is to reduce the harm that it causes to themselves and to others.

NEIGHBORHOOD IMPACT

Charles King: I'm well aware of the concerns that have arisen around the various violent incidents that have taken place, both on the subway and the recent incident in Chinatown and what we're talking about is people who have serious behavioral health issues, who are disconnected from care... We're not going to be able to coerce homeless people who are in the subways and on the street. We can only entice them into care... Part of what this facility does is it addresses the mental health issues in the moment that is most critical not only to the people we're serving but to the community.

The other point that I would make is that if you live in a congregate housing setting in New York - that is, a building with ten or more apartments - I guarantee you that you have neighbors who are using substances that you're not aware of -- and we don't find that to be problematic to ourselves if it's not causing a nuisance to us, right? I think that's the approach that we're taking - we're reducing nuisance behaviors and then leveraging our ability to engage people to help them take steps to improve their lives.

We've proven that harm reduction allows us to engage people who would otherwise resist... Syringe exchange programs are the number one referral source for voluntary commitment to drug treatment.

How will you prevent dealers from gathering outside your site to sell drugs to the clients who are allowed to use those drugs inside?

Charles King: One of the things that we are very good at doing at all of our facilities is patrolling the outskirts of our facilities, including ensuring that the people we're serving aren't loitering outside the facility, and also encouraging people, if they're going to engage in nuisance behaviors, not to do it around where they're getting services.

Is the idea here that this facility was chosen in part because it's serving those who are already deemed present? So in regard to concerns expressed by the community that this would be a magnet for trouble, it is that the people are already there?

Charles King: People who come to drop-in centers are coming from nearby neighborhoods, places that are in walking distance to them. I fully anticipate that the drop-in center is going to be largely populated by homeless people who are basically living in the neighborhood, whether in the subway or in areas such as Sara Roosevelt Park.

Erin Drinkwater: We know from experience of operating programs like these, these low-threshold models, that location is key.

How is this facility going to be better for neighbors than what may have been there before?

Charles King: Someone tonight wrote in the Chat that they had lived next to a shelter and had to talk to their children about drug use because people were injecting drugs in the street. That's how we're different: people are not going to be doing that in the street because we're not stopping them from doing that in the room. So that is a major change in behavior on the street. When we operated an isolation hotel in Queens I insisted that we provide clients with cigarettes, because that was a way to keep them inside the property rather than out in the neighborhood where they might cause a nuisance.

I'd like to offer anyone who is interested a visit to HW facility to see how we operate in ways that enhance neighborhoods.

When there is someone who refuses mental health services and is clearly unstable, what specific steps will you take to protect the community?

Charles King: If somebody came in who we considered disruptive to the facility or to the neighborhood and a problem for us to serve, we would be reaching out to Shane [Cox of DSS] and asking for alternative arrangements for that person.

When you say HW has a good "track record," can you tell us what that means?

Charles King: We have one of the lowest eviction rates of the city in supportive housing. We bring action against probably less than 1% of the people we house. That means we are successful in keeping them in care and have more than a 98% success rate in moving them from transitional settings into permanent housing. And a large number of people who enter our facilities as homeless go through our vocational training and end up on our staff.

What measures are you taking to address safety concerns, given that there are two daycare centers nearby?

Charles King: I don't know of a neighborhood that wouldn't have proximity to a daycare center, a school, or some other activity, so that is why we work hard to ensure that we're patrolling the areas around our facility so ensure people are not loitering outside.

The New York State penal code makes it a felony to sell drugs within 1000 feet of any child or educational facility. How will you enforce this?

Charles King: We will absolutely prohibit the sale of drugs in our facility, and we will involve the police if we have to. We work hard to ensure that people who are using our services aren't out on the street in the immediate vicinity of the facility.

What is the impact of these programs on the crime rate in the area?

Erin Drinkwater: I'm not familiar with any particular studies of this. But we do have security models. At HW, Charles talked about residential aides. At our shelters we have a combination of contracted security officers and DHS peace officers, as well as cameras. We encourage security to do perimeter patrols outside. And what is important is the relationship that our provider creates with the community.

Shane Cox: Being a good neighbor is an essential part of the work.

Charles King: With DHS, we will be meeting with the local precinct. It's important to have a good open line of communication with the NYPD precinct.

Neighbors have reported that, when 231 Grand Street was recently used to house the homeless, they experienced all manner of harm to quality of life: public urination and defecation, piled up trash, public drug use, harassment. Are you willing to promise that you will keep the area around your shelter free of the nuisances that neighbors witnessed when this building recently served as a homeless shelter?

Charles King: Yes.

What about the new mayor's plan for reducing homelessness in the city's subways?

Charles King: I want to note that the invocation of involuntary commitment to psychiatric care is of limited utility. You have to be able to demonstrate that a person is a danger to themselves or to others. That is a fairly high barrier. There are many people with serious behavioral issues who are not going to meet that threshold. And there are those who might go to an inpatient facility and then be discharged after two weeks. If there is no solution around that discharge that might easily be back on the street again.

Why have psychiatric beds in the New York State been reduced?

Erin Drinkwater: Our agency can't speak to those decisions.

Charles King: This is an issue HW has been concerned about since its founding. New York had a history of putting people in psychiatric institutions and basically keeping them there. Then litigation that started in the 1960s fought to move people into communities rather than locking them away. Up until now we haven't had state government that was willing to invest in community facilities to serve as an alternative. Very-low-income people have little access to high-quality mental health services.

DISTRIBUTION OF SHELTERS

While the *administrative boundary of Community District 2, Manhattan, currently has no homeless shelters, the neighborhood of Chinatown* – which is divided among three different

Community Districts - has several.⁹ Will this project undergo a Fair Share analysis as required by the City Charter¹⁰, and what will determine fair distribution?¹¹

Erin Drinkwater: Yes, the agency will provide a Fair Share [evaluation] prior to the location opening. There are chartered mandates. The Community Board [CB2] will receive a copy of the Fair Share prior to the location opening.

Because it is a right-to-shelter city and demand for shelter is high, [there is pressure on NYC to increase the number of shelters, and hence] NYC has an open-ended Request for Proposals for shelter development to bring new facilities online. The agency does go through its formal vetting process, but what we're really looking at is the location where a proposal is being offered. Having these resources in neighborhoods where we know that individuals are congregating on the street, we know they will benefit from coming inside.

Chinatown seems to have a disproportionate share of shelters. Can you speak to that?

Erin Drinkwater: Chinatown is indeed split into three Community Districts. Community District 2 currently has zero shelters, though there are a number in the pipeline that were announced under the prior administration. Community District 1 has one location and there is one in the pipeline. Community District 3 currently has 11 – however, three of these are what we refer to as “stopgap measures” to meet capacity needs. That is, because of our legal obligation to provide shelter, for a very long time the agency has used hotels to meet capacity needs. Under the prior administration [ie, DeBlasio] there was a commitment to get out of hotels.¹² Currently, the agency has zero families with children in commercial hotels, and we continue to bring down the number of single adults in hotels. The shelter we are talking about tonight is a different model than those other numbers, so it is additive to those numbers. It serves a very different purpose. I know there is concern around people coming to this facility from other neighborhoods. That is not the case. It is the people already bedding down in the nearby subway stations or Sarah Roosevelt Park – those are the locations from which people will come.

Can we assume that Fair Share goes across administrative boundaries and does radius studies, and that it takes into consideration facilities such as the Bowery Mission, which does not have a DHS contract?

Erin Drinkwater: It looks at similar types of facilities, yes, but also things like rail yards and commercial parking – so a wastewater treatment center, as someone suggested, would also be taken into account.

⁹ For a 2021 map of DHS homeless shelters by Community District, see <https://cbmanhattan.cityofnewyork.us/cb2/wp-content/uploads/sites/9/2021/05/DHS-Map.pdf>. In the interest of privacy, DHS does not provide exact locations.

¹⁰ <https://nyccharter.readthedocs.io/c08/#section-203>

¹¹ Appendix A to Title 62 of the Rules of New York City: Criteria for the Location of Facilities. See <https://codelibrary.amlegal.com/codes/newyorkcity/latest/NYCrules/0-0-0-125279>

¹² <https://www1.nyc.gov/site/dhs/about/tide.page>

How many shelters is too many? We have a LOT of shelters in Chinatown, and let's add in the mega jail, whose demolition and construction is going to destroy the west side of Chinatown. Your program sounds wonderful if there were just one shelter in Chinatown. But there are many of them.

Erin Drinkwater: I should mention the caseload of the Manhattan Outreach Consortium in lower Manhattan. There are more than 150 people on the caseload in Community District 3. I don't have the numbers offhand for CDs 1 or 2 but I'm happy to get them for you. This does not include people who are sleeping in Safe Haven beds. These are people who are known to be street homeless. These are the people who will be served.

The plan for this shelter strikes a raw nerve in our community, given the recent murder of Christina Yuna Lee in her apartment on Chrystie Street. When this hotel was used as a shelter during Covid the quality of life impacts were serious: urination, trash, public defecation, pedestrians being cursed at. You say you will do patrols, but I don't know how you can enforce the behavior of your residents.

Charles King: The individual who has been accused of this murder was, to my understanding, a homeless person with serious behavioral issues, including substance abuse disorder, who was disconnected from care. You're not going to reduce the problems that are associated with severe mental illness or substance use disorder without making connections to care. Leaving them on the streets, without connections, creates a far greater risk to the community.

If you visit the HW facility at 9th Street and Avenue D, we have 36 studio apartments and a day center that serves hundreds of folks. You will not find people loitering on the streets or drug dealers hanging out in the neighborhood, because we engage people in a way that encourages positive behaviors.

Erin Drinkwater: I want to acknowledge the tragedy that occurred a couple of weeks ago. This HW project predates that. DSS notified CB2 in December; for two other sites mentioned for Chinatown, DSS gave notice in October. The pipeline for development can be quite lengthy. I wouldn't want there to be the perception that there is insensitivity to recent events.

Joslyn Carter: The fact that the murder happened is hard for all of us. We recognize the loss and the difficulty of coping with that loss.

Erin Drinkwater: Unfortunately, in the last three years 1000 state psychiatric beds closed, 600 of which are in New York City. We're seeing the implication of those decisions, and having a resource-rich environment like the one HW is planning will benefit individuals who are otherwise disconnected to care.

COMMENTS:

In about 20 public comments and scores of remarks by people using the Chat function in Zoom the committee heard a high level of anger and fear. Some typical comments are here:

-This location is close to schools with young children and centers for the elderly. This is a threat to people's well-being.

-It's great to say that you offer services, and no one will argue that it is needed, but what are your numbers in terms of getting a mentally ill homeless person to agree to be committed?

-How can you keep talking of mental health care when these services can be refused? The police can be engaged but they shrug their shoulders and say, what can we do?

-The block where Christina Yuna Lee was murdered is just one block from 231 Grand Street.

-Who will be responsible should similar tragedies happen again?

-How will we hold your team accountable for safety of the neighborhood when things do not work out?

-I close down my office early to let people go home before sundown because I fear for their safety.

-People forget that there is a lot of pediatric population in that area, there is a Head Start program on Chrystie Street, there is PS 130, there is daycare. Parents and children are afraid.

-We had a man come into our loft in the middle of the day. He broke through the door, and my daughter was home alone. I've lived here 45 years and I wasn't scared before, but it's getting scary.

-What would you do to prevent another Christina Yuna Lee in Chinatown?

-I don't see that many homeless people walking around Chinatown, but I have seen thousands of elderly people living in poor conditions. If we have the money, why can't we use it to improve the living environment of those senior disabled people right here?

-How many seniors and disabled people live in the second floor and above in Chinatown without an elevator?

-This neighborhood has many non-native-English speakers and yet your notification for this meeting was only in English.

-70% of elder Asians don't know how to log into these meetings. Their voices are not heard.

-What about your outreach to the community? Because this meeting is a farce.

-I'm distressed because I feel like we are just having a show here and you are talking down to us and you are not responding.

-Don't make money off our community. We all care about homeless people, but the real issue is, you cannot place any more homeless shelters in Chinatown.

-Why can't the shelter go uptown? Between 34th and 79th St. there are almost no shelters.

-231 Grand Street should be a hotel, not a shelter. Family associations and organizations need hotels. This will be key to visitors and to the revitalization of New York City and Chinatown. Chinatown has already suffered from offshoring of the manufacturing industry, and the Covid-19 lockdown, and anti-Asian hate crimes, and the small businesses have suffered enough. This is not the time or the place to add this burden.

- This program sounds great, but nobody's helped people down here even since the riots. The small businesses are getting creamed.

-What about OUR rights? My 12-year-old son's rights? My daughter's? Every night they have nightmares. Our people have been under attack for the last three years.

-I am a physician and I work in Chinatown. I don't see any homeless shelters in areas that are wealthy. You are picking on people that are low-income, that maybe don't speak English as a first language.

-No doubt Housing Works has a tremendous mission with success. But why 231 Grand St?

-I work in harm reduction. I think this is a great program but not in that area.

-The Grand Street D train station is the true shelter.

-The Bowery station of the J/Z train is a true shelter.

-231 Grand Street is on a major artery.

-Why not have things like a van with mental health services, medical services, showers, and getting it to people instead of trying to shove them in another neighborhood?

-We don't trust DHS's so-called "Good Neighbor" policy.

- Here's what will happen: they will sleep in the shelter, hang out on the streets during the daytime in Roosevelt Park, drinking, doing drugs, causing chaos, and go back to the hotel when the sun goes down.
- If I need drugs or alcohol I will visit these shelters.
- Isn't it possible that the reason this is a high-impact area is *because* there are multiple shelters there already?
- What was the exact methodology in choosing Chinatown over other neighborhoods?
- No one in Asian families allows any member to take drugs or become an addict. Chinatown needs affordable housing.
- The community you're helping is not the Chinese community.
- On average, how long does an individual stay in a "stabilization" bed? How many days or weeks or months?
- Do individuals have to leave the premises during the day?
- Can we have access to the contract that Housing Works will have with the city?
- Are the outreach teams the same as those that Mayor Adams has promised to roll out?
- Where are these people from and why are they entitled to housing here?
- The anger and confusion you're hearing is from people who've noticed that this population has exploded in this neighborhood very quickly, with no explanation from DSS.
- Hate crimes against Asians are up several hundred percent.
- Crimes are committed in front of NYPD but not prosecuted.

ANALYSIS

We heard few concerns at our meeting about the operator, Housing Works. The focus of attention was the decision to site an additional shelter in Chinatown.

In evaluating this proposal, the question of "Fair Share" is complicated by a distinction between the *administrative* boundary of Community District 2 and the *neighborhood* boundary of Chinatown. Chinatown is a large neighborhood whose perimeter is generally viewed as stretching from Broome Street on the north to Worth and Madison Streets on the south; from Broadway on the west to Allen and Pike Streets on the east.¹³ It straddles three Community Districts: Manhattan 1, 2, and 3. As of this writing the number of shelters in CD2 is zero.¹⁴ However, the number of shelters in Chinatown – spread over CDs 1, 2 and 3 – is higher. Many of these are in CD3, for example. Any Fair Share evaluation must be particularly sensitive to concentrations by *radius* and not only by *Community District*.

¹³ From Chinatown Partnership, <http://www.chinatownpartnership.org/Gui/Content.aspx-Page=ServiceArea.htm>

¹⁴ The Housing Works project would follow three others in the pipeline in CD2: a Drop-in Center at 112-114 West 14th St that will also include 24 Safe Haven beds for adult men and women; a shelter for 90 adult women at 27 West 11th St; a shelter for 200 adult men at 349 Canal Street. The total number of beds, including those at 231 Grand Street, would be 290 plus 118 beds targeted to traditionally unsheltered homeless individuals.



The neighborhood of Chinatown straddles Community Districts 1 (south), 2 (northwest), and 3 (northeast)

The public expressed strong *opposition* to this plan. Chinatown Citizens of East Broadway distributed a flyer in advance of the meeting, encouraging people to attend. Maps of shelter sites in Chinatown were distributed during a vigil honoring Christina Yuna Lee. The committee’s videoconference was attended by more than 200 people. CB2 also received several expressions of opposition by email. Susan Lee, identifying herself as New Yorkers for Downtown Recovery, delivered to CB2’s office 970 postcards signed by “residents, merchants, patrons and visitors of Chinatown” expressing “outrage” at this proposal. At our meeting she said these were collected in a 48-hour time span.

CB2 also received two emails in support of the shelter.

The public expressed distrust of the *logic model* of this program. While HW and DSS posit that the siting of this shelter will serve toward clearing streets of *existing* nuisance behavior, many expressed fear that the presence of the facility will increase nuisance behavior by *attracting* more homeless individuals into the area.

The concern over *saturation* was expressed by many people as an unfair blow to a neighborhood that has *suffered* greatly over the last few years. The murder of Christina Yuna Lee is felt as just the latest incident, after anti-Asian hate crimes in response to a virus that travelled from China; a lockdown period that crushed businesses, heightened unemployment, strained school children; a sense that crime and homelessness and filth are heightened as the neighborhood wobbles its way back from the pandemic.

NEXT STEPS

-Housing Works and its CEO, Charles King, expressed willingness to collaborate with DSS to meet with any local block association that has further questions and concerns. They also expressed willingness to offer visits to other HW facilities.

-Mr. King shared his email address and cell phone number and promised to answer questions and discuss concerns: king@housingworks.org, (917) 747-0102

-Once the site opens, HW will form a Community Advisory Board, made up of local residents and business owners, that will meet regularly to monitor the performance of the program and its impact on the community.