COVID-19 AND HOMELESSNESS IN WASHINGTON STATE: A CALL TO ACTION

We are in the throes of a pandemic. COVID-19 may infect millions of Americans and kill over 100,000. People experiencing homelessness are at a greater risk of contracting the virus because they lack access to hygiene, sanitation facilities, and space to socially isolate or quarantine. COVID-19 will likely infect and kill thousands of people experiencing homelessness, and hundreds of people experiencing homelessness across the country have already tested positive for COVID-19. If a pandemic teaches us anything, it is that we are only as strong as our most vulnerable neighbors.

State and local governments must immediately ensure people experiencing homelessness are protected during this outbreak. Policymakers must take immediate action to (1) stop harmful actions and offer basic support to unsheltered people; (2) build systemic capacity for successful outreach; (3) stop using congregate shelters or at least radically thin-out and improve safe shelter space; (4) dramatically increase temporary individual housing units; and (5) aggressively scale-up permanent supportive housing capacity.

1. Stop Harm and Offer Basic Support

Unsheltered people must be afforded safe indoor space. Until that time, policymakers must (1) immediately mitigate harm to unsheltered people, and (2) offer basic hygienic support to people experiencing unsheltered homelessness.

First, cities should immediately halt homeless sweeps, move along orders, and the impoundment of vehicle residences. Breaking up encampments and asking people to move along significantly increases the chance that COVID-19 will spread as people disperse. The Centers for Disease Control and Prevention (CDC) recommends that governments leave encampments alone unless individual housing units are available. Similarly, cities should stop ticketing and impounding vehicles being used as residences. It is not sufficient for cities to merely reduce sweeps or displacements; for example, Seattle has limited sweeps, but its guidance needs to match the CDC’s requirement that encampments be removed only if appropriate individual housing units are available.

Second, policymakers should ensure people living in encampments have tents and 24-hour access to nearby restrooms or portable latrines stocked with hand hygiene materials, per the CDC. Because of the pandemic, many libraries and meal programs are closed or severely restricted, cities must make up for this lack of services by increasing the number of handwashing stations and bathrooms. Los Angeles has deployed at least 100 additional handwashing stations for 44,214 unsheltered people who live in the county. San Diego and Berkeley have placed 66 and 28 respectively. San Diego is home to 3,626 unsheltered people and Berkeley 813. As of March 27, Seattle announced plans to offer only 6 handwashing stations, and, as of March 25, distributed 735...
“hygiene kits.” But 5,228 people live unsheltered in Seattle. These efforts are small steps in the right direction, but action must be much more urgent and ambitious. Cities should also consider supplying dumpsters, vermin abatement, and water. Ideally, cities should also distribute tents to unsheltered individuals as a minimum of protection from the elements and from each other.

By ceasing sweeps and move-along orders to disperse, as well as increasing hygiene supports, policymakers not only help to protect the health of unsheltered people, but also the surrounding community. Mitigating harm and minimizing displacement will also create opportunities for cities to better systematize the delivery of health and hygiene services and resources to our unsheltered neighbors.

2. Build Systemic Capacity for Successful Outreach

To meet these needs, policymakers should immediately facilitate the funding and coordination of systemic efforts to recruit and train more outreach workers. Outreach workers provide vital connections and services, including assisting unsheltered people with social distancing, hygiene, and crisis management; outreach workers are a vital lifeline between unsheltered people and resources. Policymakers must not only expand outreach worker capacity, they must improve systems to hire, train, adequately pay, and support outreach workers. Current national leaders such as DESC do not have the capacity to recruit and train the necessary number of outreach workers. The Washington Public Defender’s Association is hiring a handful of LEAD outreach workers to help during the outbreak, but an adequate effort must be fully funded and coordinated by the state, city, or county. The availability of unemployment benefits from COVID-19 and the dangers of working in the current environment are strong incentives for potential outreach workers to stay home. Years of suppressed wages exacerbates our inability to respond to this outbreak among the most at-risk populations. To attract and retain frontline outreach workers, cities must ensure adequate wages, training, and support. Outreach workers that are not connected to the police force can build the trust necessary to educate and engage people experiencing homelessness. But policymakers must build such capacity.

3. Convert Congregate Shelters to Individualized Units; Ensure Safe Shelter Space

Congregate environments are wholly inappropriate during an infectious disease outbreak, a fact that motivated 100 medical experts to urge San Francisco to make hotel rooms available to every unhoused person in the city. Congregate environments increase transmission of COVID-19; they also endanger people experiencing homelessness, risk overwhelming hospitals, and increase the spread of COVID-19 to the general public. Policymakers should not use congregate shelters.

The best way to prevent a COVID-19 outbreak in shelters is to eliminate congregate settings as quickly as possible. To comply with CDC guidance, every individual should have their own room. Some counties are making an effort, but we must quicken the pace to acquire thousands of rooms now. Some of our largest shelter providers are willing to quickly transition their operations from congregate settings to hotels or dormitories if such sites are made available to them. The State should centrally coordinate the acquisition of such rooms.
If shelters must still be used, policymakers must ensure shelter spaces are as safe as possible. Shelter conditions are outright dangerous during a pandemic: people in shelters typically sleep only inches apart and Washington already has too few shelter beds for the number of people experiencing homelessness. The CDC recommends people keep six feet from one another. Shelters also need quarantine spaces for suspected or confirmed cases of COVID-19. Any retained congregate shelters must be thinned out or “de-intensified.” Seattle recently de-intensified 700 shelter beds and created 50 additional shelter beds. This growth is not to scale.

Most important, shelter staff need appropriate personal protective equipment and sanitation supplies. Shelters are spaces packed with people vulnerable to COVID-19, so shortages of personal protective equipment impact people at shelters as much as people in hospitals. States must fund and prioritize the distribution of personal protective equipment and sanitizer to shelters. In the grips of this crisis, homeless service providers are healthcare providers.

But policymakers must confront the grim reality that congregate environments will facilitate the pandemic. The only sound response to the crisis is to secure individualized units.

4. Dramatically Increase Temporary Individual Housing Units

The surest way to keep people experiencing homelessness from contracting and spreading COVID-19 is to provide individual spaces where they can isolate. Individualized units can be hotel rooms, trailers, RVs, tiny homes, or other already existing units. The governor of California issued an executive order giving local governments flexibility to spend emergency homeless funding on dealing with the COVID-19 outbreak, including regulatory barriers for facilities built with the money.

Hotel rooms are especially attractive options. At least 11,199 people are experiencing homelessness in King County, while downtown Seattle has 14,000 empty hotel rooms. Nationwide, hotels are asking for a bailout of $150 billion; instead, cities could use the hotels and pay them.

Possibilities for policymakers to secure hotel rooms as temporary units include (1) renting rooms through competitive bidding process, (2) purchasing hotels through eminent domain, and (3) emergency commandeerings necessary space.

Securing hotel rooms through a competitive bidding process is a strong option. For example, hotels in San Francisco are bidding to allow the city to use empty hotel rooms for shelter spaces. San Francisco has already received offers for more than 11,000 rooms and signed leases for 300 rooms. New Orleans leased a 155-room hotel for people experiencing homelessness, Austin is leasing and outright purchasing hotels for isolation and quarantine, and Toronto leased 300 rooms, with discussions to lease 500 more. Without a widescale bidding process, policymakers may end up over-paying for hotel rooms. For example, Seattle leased an individual hotel in downtown Seattle for an average of $270 per night when rooms were previously going for $70 per night.

Policymakers can also rely on new federal dollars. The federal CARES Act designates $4 billion for homeless Emergency Service Grants, $5 billion for Community Development Block Grants, and $150 billion for general community relief funds, all of which could be used to secure hotel rooms for unsheltered people, and all of which allow any expense incurred since the beginning of
the COVID-19 crisis to be reimbursed. State coordination will help to maximize federal funding. There’s simply no excuse for failing to mount an immediate and large-scale effort to secure individualized units.

5. Aggressively Bring Permanent Supportive Housing to Scale

Despite the present crisis, policymakers must not lose sight of the future. When COVID-19 is no longer a pressing concern, policymakers are still responsible for the over 20,000 people experiencing homelessness in Washington State. The number of people experiencing homelessness will likely grow because of social distancing’s negative economic consequences. Recently, Governor Inslee made an emergency order prohibiting construction to slow the spread of COVID-19. The order exempts construction on affordable housing, which creates an opportunity to build permanent supportive housing.

Extensive research and practice shows that permanent supportive housing is the best intervention for people experiencing chronic homelessness. People are experiencing chronic homelessness if they (1) have been homeless for one year or longer or have experienced at least 4 episodes of homelessness totaling 12 months in the last 3 years and (2) have a qualifying disability. This disability helps to explain the persistence of their homelessness. They are more likely to be unsheltered, so they are the most at-risk during the COVID-19 outbreak. In King County, approximately 6,500 people are chronically homeless.

Permanent supportive housing is an evidence-based Housing First model proven to end chronic homelessness, increase housing stability and save taxpayer money. It’s the kind of housing provided locally by DESC and Plymouth Housing, pioneers of this model and recognized nationally as leaders in this strategy. Permanent supportive housing has no time limits, so people can live there as long as they need to; tenants sign leases and contribute up to 30% of their income for their housing. Tenants are provided robust, voluntary services aimed at housing retention and achieving life goals. During a public health crisis, people housed in permanent supportive housing have space to isolate and quarantine, and they have stable relationships with service providers and critical support. But bringing supportive housing to scale is a vital investment: it can also prevent or at least significantly mitigate public health risks in the future. Finally, supportive housing is consistently shown to be the most-cost effective solution to unsheltered homelessness, so this strategy must be prioritized even after the COVID-19 outbreak subsides. Right now, the state, county, and city can initiate new construction of permanent supportive housing and fund leases in already-existing buildings. Hotels purchased outright as isolation and quarantine spaces during the pandemic can be transformed into desperately needed permanent supportive housing when the pandemic subsides.

Seattle and several other cities declared a homeless state of emergency years ago; the time to act boldly and urgently was then, but it is most certainly now. The steps outlined in this Call to Action will ensure the immediate and long-term health of our entire community. There’s no time to waste.

Learn more about the Homeless Rights Advocacy Project (HRAP)