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purposes only*

April 29, 2020

Mayor Hancock
Denver City Council

Sent via email

Re: Sweep of homeless encampments planned for April 30th

Dear Mayor Hancock and Councilmembers,

I write on behalf of the National Law Center on Homelessness & Poverty (“Law Center”) to urge you to not displace people living outside in the City of Denver, including those living in encampments between 20th and 23rd and Welton and Curtis streets, unless the people living in those locations are offered accessible individual housing units, such as hotel rooms. To do otherwise in the midst of the COVID-19 pandemic violates public health guidance from the U.S. Centers for Disease Control and Prevention’s *Interim Guidance for Responding to Coronavirus Disease 2019 Among People Experiencing Unsheltered Homelessness* (“CDC Guidance”). We further ask the City of Denver to issue a formal policy to leave intact homeless encampments that do not pose immediate public health or safety risks throughout the COVID-19 State of Emergency, consistent with CDC Guidance. Instead of conducting harmful sweeps that threaten public health and waste taxpayer dollars, the City of Denver should be working to expand access to hygiene facilities and sanitation services for people who live outdoors while simultaneously – and urgently – working to provide unhoused people with access to private units where they can safely shelter in place.

The Law Center is the only national legal advocacy organization dedicated solely to ending and preventing homelessness. We have published numerous reports, including *Housing Not Handcuffs 2019: Ending the Criminalization of Homelessness*, which includes a section about the negative impact of criminalization policies on public health, and *Tent City, USA: The Growth of America’s Homeless Encampments, and How Communities are Responding* collecting best practices, model policies, and case studies from across the country on how to constructively address homeless encampments. We have also compiled best practices and other resources for communities working to curb the spread of the deadly coronavirus, which you can find on our website at <https://nlchp.org/coronavirus/>.

According to the U.S. Centers for Disease Control (“CDC”), COVID-19 primarily spreads from person-to-person, but it can also live on surfaces for multiple days and it might be airborne. To prevent contracting and transmitting COVID-19, all people are

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encouraged to wash their hands properly and frequently, avoid close contact with others, and to stay home if they are feeling sick. For people experiencing homelessness, however, options for following this guidance are extremely limited. Moreover, people experiencing homelessness have higher rates of chronic physical and mental health conditions than people in the general population, which left them at greater risk of being hospitalized, becoming seriously ill, or dying even before the COVID-19 pandemic.¹ COVID-19 has only made matters worse. Indeed, people without housing infected by COVID-19 are twice as likely to be hospitalized, two to four times as likely to require critical care, and two to three times as likely to die than infected people in the general population.²

Policies that punish acts of survival and displace unhoused people from public space without offering any safer alternatives exacerbate these public health problems. Even if a place of shelter isn't optimal, such as a tent, a stable place to access shelter is invaluable to safety and health. Displacement and loss of property flowing from sweeps threatens stability and eliminates private shelter options, which in turn increases the risk that people experiencing homelessness will become ill and need to be hospitalized – a serious public health concern during a pandemic when strain on limited hospital resources must be avoided to the fullest extent possible to save lives. Moreover, displacement of homeless people to other public spaces or congregate shelters increases the risk of COVID-19 exposure and spread throughout the entire Denver community.

In recognition of this serious public health risk, the U.S. Centers for Disease Control and Prevention (the “CDC”) recommended in its *Interim Guidance for Responding to Coronavirus Disease 2019 (COVID-19) among People Experiencing Unsheltered Homelessness*:

Unless individual housing units are available, do not clear encampments during community spread of COVID-19. Clearing encampments can cause people to disperse throughout the community and break connections with service providers. This increases the potential for infectious disease spread.³

A study released last week by medical practitioners, public health professionals, and social scientists at University of California at Berkeley’s School of Public Health also emphasized the critical need to stop sweeping homeless encampments and, instead, to assist people to safely shelter in place in their tents and to access necessary resources at the outdoor locations where they live until they can be placed into private housing units, such as hotel rooms.⁴ The study, based on a review of scientific evidence, concludes that helping unhoused people to properly shelter in place – even if those shelters are tents or vehicles - will help to “flatten the

¹ Colette Auerswald et al., For the Good of Us All: Addressing the Needs of Our Unhoused Neighbors During the COVID-19 Pandemic (2020), <https://publichealth.berkeley.edu/wp-content/uploads/2020/04/For-the-Good-of-Us-All-Report.pdf>.

² Culhane D, Treglia D, Steif K, Kuhn R, Byrne T. *Estimated Emergency and Observational/Quarantine Capacity Need for the US Homeless Population Related to COVID-19 Exposure by County; Projected Hospitalizations, Intensive Care Units and Mortality.*; 2020. https://endhomelessness.org/wp-content/uploads/2020/03/COVID-paper_clean-636pm.pdf.

³ Center for Disease Control and Prevention, *Interim Guidance for Responding to Coronavirus Disease 2019 (COVID-19) among People Experiencing Unsheltered Homelessness* (2019), <https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/unsheltered-homelessness.html>.

⁴ Colette Auerswald et al., For the Good of Us All: Addressing the Needs of Our Unhoused Neighbors During the COVID-19 Pandemic (2020), <https://publichealth.berkeley.edu/wp-content/uploads/2020/04/For-the-Good-of-Us-All-Report.pdf>.

curve”, decrease the demand for services from hospitals, and enable communities to lift shelter-in-place orders sooner than if people experiencing homelessness are not sheltered-in-place.⁵

Congregate emergency shelters are not an adequate replacement for the private shelter offered by tents and vehicles. Congregate emergency shelters expose people to communicable disease, infestations, and parasites that are more easily spread in crowded conditions.⁶ Congregate shelters frequently struggle with inadequate ventilation, overcrowding, and insufficient procedures for handling contagious clients. According to the Centers for Disease Control and Prevention, these factors contribute to the spreading of airborne diseases such as tuberculosis and influenza, and diseases that might be airborne, like COVID-19.

Moreover, safe physical distancing is not practicable in high-density congregate settings. When people are not on their beds or cots, such as when they get food, use the restroom, or go outside, they would not be able to maintain adequate physical distance from other residents. Shared bathrooms, shared drinking fountains, and shared eating facilities increase the number of shared surfaces that people staying in congregate shelters must touch during daily routines. The increased contact with other people and shared surfaces also increases the risk of COVID-19 infection, and increases the risk that multiple people will become infected in a short time. In San Francisco, 144 residents in a single shelter were tested and five were found positive for COVID-19. Less than one week later, 92 of those residents tested positive for COVID-19, along with 10 shelter staff workers.⁷ Similarly, in Boston, Massachusetts, the Department of Public Health tested 397 residents of a single shelter and found that 37% of the residents were infected with COVID-19.⁸ Many of them were asymptomatic, which demonstrates the futility of trying to screen out symptomatic residents to limit the spread of the virus in congregate shelters.

Transitioning people into individual housing units, such as the many vacant hotel rooms now available, is the best practice and the City of Denver should urgently pursue this option. Offering people a safe place to privately shelter inside would enable them to effectively physically distance themselves and have access to adequate hygiene facilities, as well as be easily accessible to health care and other service providers. Moreover, it would reduce the number of people living on Denver’s streets. With the passage of the federal CARES Act, which allows for reimbursement of costs incurred in response to the COVID-19 crisis,⁹ there is no excuse for not implementing these approaches immediately.

These approaches are necessary for the current crisis, but they are also best practice for the long term, from both a public health and fiscal policy perspective. We all share the goal of a Denver without people living outside in public space—but the safest, most cost-effective, and permanent way to achieve that is to ensure access to adequate housing. Numerous studies have shown that communities actually save money and improve health outcomes by providing

⁵ *Id.*

⁶ *Id.*

⁷ Colette Auerswald et al., For the Good of Us All: Addressing the Needs of Our Unhoused Neighbors During the COVID-19 Pandemic (2020), <https://publichealth.berkeley.edu/wp-content/uploads/2020/04/For-the-Good-of-Us-All-Report.pdf>.

⁸ *Id.*

⁹ See COVID-19 CARES Act Summary available at <http://nlchp.org/wp-content/uploads/2020/04/CARES-Act-Funding-Summary-with-Citations.pdf>.

housing and services to those in need, rather than endlessly cycling them from one location to another.¹⁰

In conclusion, we urge you to not displace people living outside in the City of Denver unless the people living in those locations are offered accessible individual housing units, such as hotel rooms, consistent with CDC Guidance. We also urge the City of Denver to issue a formal policy to leave intact homeless encampments that do not pose immediate public health or safety risks throughout the COVID-19 State of Emergency because such a policy can protect the lives and safety of all Denver residents. If you are interested in discussing these matters, please contact me at (202) 638-2535 x. 120 or at tbauman@nlchp.org.

Sincerely,

Tristia Bauman
Senior Attorney

¹⁰ National Law Center on Homelessness & Poverty, *Housing Not Handcuffs 2019: Ending the Criminalization of Homelessness in U.S. Cities* (2019), available at <http://nlchp.org/wp-content/uploads/2019/12/HOUSING-NOT-HANDCUFFS-2019-FINAL.pdf>. *See also* Lavena Staten and Sara Rankin, *Penny Wise But Pound Foolish: How Permanent Supportive Housing Can Prevent a World of Hurt* (July 12, 2019), available at <https://ssrn.com/abstract=3419187>.