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To the members of the Committee,

Thank you for the time you have committed to hearing testimony today.

My name is Alison Cunningham, Executive Director of Columbus House in New Haven. We provide emergency shelter, transitional programs and permanent supportive housing for over 300 homeless or formerly homeless clients every day.

I'll be brief. On behalf of the 500 or so people who are homeless today in New Haven, I am here to ask you not to cut funding to the very services that save lives. Most of the shelters around the state rely on DSS funding in order to keep the doors open, the heat on and to provide for other basic operations. Some of us receive funding from DMHAS to provide case management services to help move people out of homelessness. If these funds are cut, we'll all be forced to cut staff, resulting in two untenable outcomes: we either cut the front line staff, and with that, jeopardize the safety of our clients, volunteers and staff, or we cut case management staff, limiting the number of people who can receive those services while they are in the shelter, which could result in people staying longer in much needed shelter beds. For some of us, we could be asked to cut both DMHAS and DSS funds. I hope you can understand just how difficult this will be for us.

Everything has a bit of a ripple effect when you start to cut funding to the set of services that we've worked hard to create within Columbus House. We are already seeing that the numbers of clients seeking services is increasing. We opened the Winter overflow just 3 weeks ago, and we are already beyond the 75 bed capacity. This shelter did have DSS funding for a case manager, but that funding was eliminated in earlier budget cuts this year. So we offer the street outreach staff to go into the Overflow twice a week. But the Outreach & Engagement Team, which is DMHAS funded, has been affected by budget cuts to DMHAS already this year, resulting in the loss of clinical support from our lead mental health agency, CMHC. So now, this outreach team is stretched thin, filling in gaps left when these budgets cuts were enacted.

Our year round shelter staff is also working with overflow clients, again stretching existing resources that are covering existing gaps in services. We hardly have any more room to stretch, but if any further DSS or DMHAS funds are cut, we'll be forced to eliminate positions. Clients will go without services, they'll get stuck in the shelter for longer periods of time, thus creating

gridlock in the system. Thus, people will be stuck on cots or worse yet, will be stuck without a shelter bed at all.

And we simply cannot raise any more private funds. We're flat out trying to raise that money as it is, supporting programs where government funding falls short. This year, giving is not as robust as it was last year. The effects of the recession have hit home, and people are pulling in a little tighter, giving less if they are giving at all.

So what should we do? The choices are grim, the results even worse. Many of our staff are single moms. Some are grandparents raising that 2nd generation. In this economic environment, who wants to hand someone their pink slip? Worse yet, who wants to turn away a client when there are no more beds or services due to budget cuts. And what would you do when more people turn up on the streets or in prison because they could not get into a shelter? The ripple effect, in the long run, is that people will end up using costly emergency services to meet their needs or they'll end up incarcerated, and all this does is shift the costs of care to more expensive and overwhelmed services.

I simply ask you to think about the critical services that emergency shelters provide, especially at this time of year. Let's not abandon people who are homeless.