**RESPONSE TO JOINT QUESTIONNAIRE OF SPECIAL PROCEDURE**

**COMPANY OF THE DAUGHTERS OF CHARITY OF ST. VINCENT de PAUL**

The Company of the Daughters of Charity of St. Vincent de Paul is a community with approximately 14,000 members serving in 90 countries. The Community has had ECOSOC status with the United Nations since 2007.

Persons without housing or living in inadequate housing have been profoundly impacted by the COVID-19 crisis. Their experiences have been exacerbated by conflict; natural disaster; economics; internal displacement; poverty; lack of access to health care, food, and transportation; difficulty in obtaining biomedical protective equipment; and more. A common theme relates to people who are evicted or face eviction due to lack of work and inability to pay rent.

Persons who are poorest have slipped furthest behind. Implementing policies and programs to address the needs of persons without homes and living in inadequate homes is urgent. Such efforts must be people-centered, multisectored , collaborative, and designed for systemic change. A recommended good start would be for member states to evaluate the effectiveness of plans for addressing the needs of persons without homes during the COVID-19 crisis and include their voices in planning for future crises.

We will examine how the COVID-19 crisis affected the situation related to persons without homes or adequate housing in five countries, outline our participation in supporting such populations, and provide recommendations related to homelessness and inadequate housing in the midst of the COVID-19 crisis and thereafter.

**BURKINA FASO**

The Nouna area of Burkina Faso’s Kossi Province is experiencing an unprecedented crisis. Security continues to deteriorate due to terrorist attacks, which have intensified since early 2019, leading to an increase in internally displaced persons. As of 22 April, 2020, there were approximately 8,339 internally displaced persons in Nouna’s zone. UNHCR reported 921,471 internally displaced persons in the country as of May 31, 2020.

The rapid spread of COVID-19 in the Province poses a major health risk in areas already hit hard by the humanitarian crisis. Access to health services equipped for early diagnosis of suspected COVID-19 is very limited outside of Ouagadougou and Bobo-Dioulasso , including areas such as Nouna, where reaching health facilities in general can be difficult.

The COVID-19 pandemic triggered a health crisis. The combination of diminished security, displacement, and the pandemic affects vulnerable populations the most. Attempting to gain access to human rights such as water and adequate sanitation in areas experiencing insecurity can place people in peril.

Safe diagnosis of patients with severe symptoms of COVID-19 is challenging in areas threatened by terrorists. The majority of unhomed persons further are reluctant to wash hands frequently because of difficulties in accessing water and low awareness about the disease and preventative measures. This can increase the spread of COVID-19.

Lack of homes or adequate housing is compounded by limited access to food and other resources and is worsened by quarantine and isolation, leading many towards starvation. Homeless persons live in conditions which put them at risk of disease. Many internally displaced persons live in rudimentary conditions and overcrowded shelters that are not able to promote good practices in dealing with COVID- 19. There is no designated camp for internally displaced persons in Nouma, where many struggle to find a place to pitch their tent. Meanwhile, persons experiencing mental illness wander the streets day and night.

**WHAT WE ARE DOING**

We have appealed to local authorities to help provide assistance to persons living without homes. We have invited local residents to welcome internally displaced people in their homes. We have also made face masks, soap and hand sanitizers to distribute to unhomed persons. The last three months we distributed food regularly to about 300 persons without homes with assistance received from outside sources.

We are constantly involved in awareness-raising activities to inform persons living in poverty of the dangers posed by the pandemic and how to avoid exposure to COIVD-19. We further provide information on available services and referral procedures in the zone.

**RECOMMENDATIONS**

* Provision of hygiene and health kits for domestic users
* Provision of both temporary and permanent shelter
* Provision of water is crucial because most do not have access to it
* Community education about the need for hand-washing with soap, social distancing, and use of face masks
* Food security and nutrition programs
* Assistance of every kind for suffering populations
* Development of social protection programs and activities for children and vulnerable adults.

**KENYA**

After Kenya implemented a lockdown in March, 2020, people could not go to work. Persons who live on the margins of society have been greatly affected. Many people live from hand to mouth and, without income, could not pay rents, resulting in evictions in the midst of the pandemic. Many people are now begging for rental assistance due to arrears.

Because of evictions, some people without shelter spend their nights in premises providing illegal drinking, while others seek a home with neighbours. In many cases, neighbours do not accept a whole household, resulting in children loitering around towns, where they later end up on the streets. Children in such families begin begging for food during the day and sleep along railways at night because they have no home. Going to parents aggravates a situation in which some parents must beg for night shelter from neighbours who, in turn, are struggling and may feel overburdened in hosting a whole household.

Family separation has occurred in some situations. Husbands run away because they cannot work to sustain their households. They abandon families and return to homes of origin while leaving wives and children homeless, hoping neighbours will care for them. Burdened because of job loss, some can feel overwhelmed by taking in a family, so they turn away wives and children, thus rendering them homeless.

We work with children surviving on the streets, addressing primarily their right to food. Due to COVID-19 precautions, we must feed children in the streets or in public areas rather than inside our Center. In addition to children whom we served prior to COVID 19, we are now assisting many new homeless children. The children are hungry and need masks.

We are seeing an increase of children surviving on the streets because parents are unable to pay rent. It is alarming to see the huge number of street children now; many as young as 7 years, with no school, no food at home, and no shelter because of rental arrears (many people in our area are slum dwellers or migrants from others areas and don’t own houses or land). There is an urgent need to address the rights of children (and others) surviving on the streets to adequate housing/shelter.

Since the beginning of the COVID-19 crisis, institutions were closed, which presented many challenges. Children had to go home to guardians or parents. There, they encountered a life difficult for guardians, due to a lack of basic resources and because guardians, without work, are without income. Many children opted to go to the streets because their guardians could not host them, as many guardians themselves do not have a shelter.

It is important to note that children surviving on the streets now shower or bathe in rivers, which can be dangerous. They also sometimes use stagnant water which, in some cases, might be draining from sewage in town. After COVID -19 started and we had to close the Centre, we lost two boys. One boy drowned in a river while he was bathing with friends. Another committed suicide because there were conflicts with relatives with whom he was reintegrated.

**WHAT WE ARE DOING**

We reach out to persons without homes by providing various services. First, we feed children surviving on the streets. We were providing a Centre in which they could shower, wash clothes, and change into clean clothes, in addition to receiving food. But because of Covid 19 precautions, we had to close the Center and now feed children in the streets and supply them with clothing, body oil, and soap.

To end homelessness among street children, we have tried to reintegrate them with guardians or neighbours who can shelter them. We supply them with bedding, clothes, soap, shoes and food. We visit homes in which children were reintegrated, for follow-up, and also make phone calls to keep in contact with them. Right now, we are doing home tracing for street children whom we feed, still trying to connect them with neighbours or grandparents, as well as helping to pay rent for some guardians.

We also support some persons without homes by paying rent for those who have been evicted due to arrears. We further offer food support, bathing and washing soap, and masks because many people have to interact in crowded areas while trying to earn their daily bread amid lockdown. We are also supplying household materials such as bedding and utensils.

The weather is very cold and many people without homes are exposed to infections and sometimes loss of life which accompany heavy rains and floods. People come in on a daily basis with hospital bills and in need of medical support, especially for those with terminal illnesses who now have no home or good environment in which to nurse their illnesses.

**RECOMMENDATIONS:**

* In emergency situations such as COVID-19, food and rental assistance, access to affordable housing, income, health care, clean water, soap, and personal protective equipment
* More overnight shelters for children surviving on the streets
* Assistance with medical bills
* Shelter for homeless persons recovering from illness or experiencing terminal illness
* For the long-term, microfinancing programs, skills training programs, and savings projects are means of empowering people to purchase plots. That way people will experience a sense of security.
* Develop projects that build people’s skills so that they will be empowered. For instance, in the case of homeless children, such as the age we are working with (15-18), after rescue and rehabilitation, the focus should be upon skills empowerment so that young adults can work on developing their futures. Skills may enable them to secure long-term shelter and possibly be able to own shelter in times of crises.

**COLOMBIA**

In the Cali area, inhabitants of the street experienced worsened situations during COVID-19 as there was nowhere for them to take refuge or to self-isolate. They do not have shelters which provide all that is needed for personal protection. Persons without homes did not have biosecurity materials such as face masks, soap, water or a sink. They experienced increased barriers in access to health. Medical appointments were or are virtual, and many do not have equipment needed to engage in such appointments.

As trade diminished, food became scarce. For those living in slums, the COVID-19 crisis exacerbated problems related to sell f-care. Slums often are unhealthy places where isolation is impossible.

Some people are informal workers or beggars who now do not have income to pay for a room. For children and young people, study is impossible as they cannot follow virtual classes, since they do not have high end internet networks, computers or cell phones.

For the many families that do not own a home and who live informally, paying rent is impossible in this crisis. Many of them have accumulated rent and service payments due. They are families on the verge of despair.

**WHAT WE ARE DOING**

We are linking with two foundations to help with meal preparation and delivery to inhabitants of the street. We are providing support for a temporary shelter which welcomes and protects 75 street inhabitants over 60 years of age. There we also provide spiritual accompaniment, listening, and assisting with some needs such as snacks, medicines, clothing and personal hygiene supplies.

We have found families in painful situations on the streets. Some families are left on the street because they simply can’t pay rent as they have lost jobs. We have tried to search for rooms or houses for them. We are assuming lease payments for four families.

**RECOMMENDATIONS**

* Provide resources to continue subsidizing rent payments to families.
* It is difficult to find employment, which would be the most suitable solution for families that subsist on their own. Ways of generating employment would be most helpful.
* Among the 75 older adults who are in temporary shelter here, there are at least 40 who do not want to return to the street and ask us to find a place to welcome them. A possible response to this situation is to form a center for them. This response requires a significant budget and collaboration. Support for such a center would be helpful.

**INDIA**

The COVID-19 pandemic has created an unprecedented situation which has impacted every section of society. Migrants and small communities have paid a lot in this crisis. Income loss was seen not only in urban areas but also in rural areas, which suffered impacts during lockdowns. It has created serious implications for the lives and livelihoods of the people.

Recent surveys show that as many as 95.2 migrants have lost their means of livelihood because of the nationwide lockdown. 28.7 percent of immigrants do not want to come back to cities, whereas 32.1 per cent said they would if the situation improves. As many as 31.3 percent are of two minds.

Nearly 80 per cent of small and marginal farmers say their income was reduced after the COVID-19 outbreak. The lockdown has also severely impacted children. Around 46.4 per cent of migrant students had to discontinue studies. And at least 10.6 percent of migrants have lost family members in the pandemic.

COVID-19 has changed the lives of marginalized persons and persons living in poverty in a severe way. In India, a majority of the people survive on daily income, which is hardly enough . Due to the lockdown, many had no money to meet daily needs. People living in these circumstances have no savings because they never have sufficient income for basic necessities. An example is fisher folk. Usually they can’t work for a full 12 months. They are prohibited to fish during the trolling period when monsoons occur and cannot fish during cyclones or typhoons. They will not be able to work for many days before and after such weather events.

People now have to borrow money at interest to survive. After they start working, their income is hardly enough to pay back their debt. There is discouragement during the COVD-19 pandemic and unexpected lockdown, especially among homeless persons who do not even have sufficient water to drink. They cannot dream of keeping clean or maintaining social distance. It has caused widespread existential anxiety and uncertainty in people’s lives.

**WHAT WE ARE DOING**

We are reaching out to people in the lockdown period with various types of support. Our Immediate response was to provide ration kits and masks for the neediest families. Our only hospital in Maharashtra is taking care of COVID-19 patients. Schools in Kerala provided shelter for migrant workers since all of them are asked to shift from the labor camp provided by companies, and there are no travel facilities to get back to their villages of origin. We also provided some financial support to needy people.

**RECOMMENDATIONS**

* Spiritual support as well as material help (i.e. food, shelter, rental assistance, personal protective equipment, access to clean water and sanitation) to deal with the crisis at hand
* Social protection for persons unable to work due to lockdown
* People have been under great stress. It is important to provide ways to listen to, and understand, people’s feelings—their fears, uncertainties, worries, doubts, and hopes
* The current pedagogical method of education in schools must be changed. Inclusive solutions must include mobile learning.
* Find a way to restore in humanity a profound sensitivity to one another

**BHUBANESWAR, ORISSA, INDIA**

In Bhubaneswar, the State Capital of Orissa, India, COVID-19 has taken a toll. India has been registering about 10,000 new cases a day, up from about 2,500 in May. Infections and death surge every day. The government has eased nationwide lockdowns which somewhat controlled the virus, but current trends seem to show that easing of restrictions and health emergency rules are most likely to fuel the pandemic’s spread.

Massive population, extreme poverty, weak human resources, and poor healthcare systems may lead to a humanitarian disaster. Fears are running high that at the current rate of infection, with the number of cases and fatalities doubling every two weeks, the pandemic could peak at the end of July.

Persons living in poverty in urban areas reside in overcrowded and unsanitary slums with extremely low nutrition levels. India’s 1.3 billion residents were given only four hours’ notice before a nationwide lockdown took place, putting the lives of millions of poor migrant workers at grave risk as they attempted to honor it. Scores died without food and in road accidents as they trekked hundreds of miles to get home. About 20 million Indian migrant workers from urban slums with high infection rates traveled back home, and thus the disease spread throughout the country.

The same happened in Orissa. Millions of poor and low income people left cities for villages of origin on crowded public transport, raising the risk of transmission. The government subsequently declared a ban on public transport, but it was too late.

Orissa also experiences floods or cyclones most years. Orissa faced Cyclone Poni on May 3, 2019. Cyclone Amphan struck on May 28, 2020, in the midst of the COVID-19 crisis. It tore through a major part of the State and left behind immense devastation and loss of life and property. Thousands of families were left homeless. Strong winds blew away thatched and asbestos roofs, especially in coastal areas. Orissa is still struggling to recover from the shock and address the resulting homelessness.

Cyclone Amphan smashed into a State already struggling to cope with the COVID-19 pandemic. Many people were shifted to safe places and cyclone shelters. But many families cannot go back home because nothing is left and they continue to stay in shelters.

Since the last cyclone, the government has begun building Cyclone resistant homes for those who lost them. Voluntary Organizations have also come forward and Caritas India has taken the lead in housing projects. But needs are great and it will take lot of time and resources to meet the challenges of confronting the situation created by natural disasters.

There is already an acute situation related to housing for persons experiencing poverty. During the pandemic, government authorities offered alternative accommodations for those who lived in the streets, as food was unavailable during lockdown. People are being provided shelter and daily food. Masks were distributed to those in need.

**WHAT WE ARE DOING**

We are collaborating with agencies directly involved with housing projects for persons in poverty. Most communities have housing as a priority. They find funds from various sources and build houses, especially for orphans and widows. The sisters assist families in availing themselves of housing grants offered by local government. We also try to educate and empower people to claim their rights and help themselves acquire government grants and aid meant for them.

**RECOMMENDATIONS**

* The responsibility for housing its citizens lies with government. In Orissa, much is being done by our government, but every year brings thousands of homeless and that is an enormous burden.
* The right to housing should be honored as a fundamental right. The UN could enforce it among member states, as it is a universal issue.
* Governments should be asked to upgrade conditions in slums, which are the breeding ground for every kind of human problem and human rights violation.

**IRELAND**

Judging by TV and media coverage, the COVID-19 virus has not significantly aggravated the situation of people experiencing homelessness because the government took steps to prohibit evictions.  Homeless agencies continued to be active on the streets at night and were regarded as providing essential services. However, a small number of homeless people died from the virus. Homeless agencies kept attention on the plight of people who experience homelessness and continue to voice concern that in the near future their number will be increased. Many businesses will close with the loss of employment and household income. Agencies dealing with homelessness also appeal for urgent funding since their normal funding activities had to be suspended during the crisis.

 **WHAT ARE WE DOING**

We participate in the Vincentian Partnership for Social Justice, which continues to support the lobbying and advocacy work of national agencies with recognized voices and considerable creditability.

**RECOMMENDATIONS**

* The strongest recommendation is an increased provision of social and affordable housing .The present shortage of such housing will be aggravated by the social and economic consequences of COVID-19
* Emphasize the responsibility of governments in relation to the provision of social and affordable housing and the development of legislation regarding landlord responsibilities.

**UNITED STATES**

The situation in the United States echoes concern related to unemployment, lack of income for rent, and fear of eviction faced in other countries. Lines are long at food pantries. There are concerns both for the needs of persons without homes and meeting operating expenses in programs which serve them. But there are also good practices in providing services.

**SAN FRANCICSO**

Site D, which was formerly know n as The St. Vincent de Paul Multi Service Center Homeless Shelter is the largest homeless shelter in San Francisco. It stands as an example of adaptation in the midst of COVID- 19. Site D changed its focus very quickly when the shelter went from one person testing positive one day to 78 the next. The City was notified and the 410-bed center was shut down. This was the beginning of placing persons without homes in unused rooms in hotels. Volunteers 65 and older were sent home.

The Center was disinfected; bunk beds separated, and placed 6 feet apart. Capacity dropped to 110. The focus changed from being a “homeless shelter” providing two hot meals per day, with clients leaving at 8 a.m. every day and returning later in the day, and with a drop in center for those who had no place to go, to a totally different type of program.

Homeless individuals who have had the virus but no longer test positive are now released from city hospitals to Site D for recuperation. Without such a facility, persons without homes would return to the streets or tent villages and perhaps become ill again. Thus far, this change in venue has proved a big help in the health and recovery of homeless individuals.

Outside of the COVID-19 situation, there appears to be a growing population of elderly persons experiencing homelessness. They receive Social Security benefits but find they cannot pay steep rents.

**AVONDALE, MARYLAND**

St. Ann’s Center for Children, Youth and Families in Avondale, Maryland, offers housing and support to pregnant and parenting young women and their children, as well as day care service.

Though the Center’s formerly homeless mothers and children live in supportive transitional housing programs during this COVID -19 era, their lives have been affected by the virus on several levels. The most significant challenges the women face center around employment and child care.  Many of the women lost retail jobs when businesses closed. Four women are employed in health care facilities as aides or housekeepers, where the risk of exposure to COVID is high.  The stress of such work is carried home with concerns of bringing the virus to their children.

Families are dependent upon St. Ann's Early Head Start Program for child care.  While the Center has been closed, mothers have sought out family members and friends to care for their children while they work.  These arrangements add to the families' financial burdens.

Families who were in the process of transitioning out of St. Ann's to permanent housing are not able to do so because of lost employment.  Landlords are reluctant to lease apartments to tenants unless they can verify steady employment.  Fortunately, our families have no time limit on how long they can remain in the program.

Throughout the crisis, St. Ann's has seen a steady increase of inquiries for our housing.  We are slowly bringing in new families who must self-quarantine at St. Ann's for 14 days after admission.

Finances have been challenged by the fact that we rely heavily on donations.  Fortunately we were able to secure a government loan/grant, which, with several bequests, have kept us afloat the past 3 months as have several bequests.  Our annual May fundraiser was canceled which means that $200,000 raised at this event was not realized.  Nonetheless, a few foundations and individual donors have given in response to our appeal letter as well as articles appearing in the Washington Post and New York Times.

A few positive outcomes have occurred during the COVID-19 crisis.   Families have created a community where they support one another with child care and special activities (cookouts, birthday celebrations).  Donors have provided the agency with hard to find cleaning supplies, food, prepared meals, and services.  Thus far the virus has not visited St. Ann's.

**BELLEVILLE, ILLINOIS**

People have been adversely affected because most of their employment is entry level and they experienced massive layoffs. The interruption of income has caused families to become delinquent on their rent and most landlords want their rent regardless of COVID-19.

We work with the Society of St. Vincent de Paul in Belleville. The Society has been working closely with at-risk individuals and families to fill gaps arising from financial stresses of COVID-19. We have applied for and received COVID-19 relief funds that we have been using to prevent homelessness and intervene when eviction is imminent. We also have a St. Vincent de Paul overnight Drop-In Center that has been rigorously assisting homeless families into getting back into stable housing.

**ARKANSAS:**

DePaul USA in Little Rock, Arkansas, serves men and women without homes. During the COVID Crisis, they have provided a variety of services, some of which have needed to be adapted due to precautions. DePaul provides case management, meals, relief from the elements, assistance in securing shelter/housing, assistance in obtaining identification documents, hygiene services, laundry, assistance with job searches, transportation, telephone access, a physical address to send and receive mail, and a clothing closet. Due to COVID-19 precautions, DePaul could not allow people inside and had to stop recreational activities, but could provide relief from the elements outside through protected sitting areas; stopped its computer lab, but provides a phone charger outside; and offers free Wi-Fi.

**RECOMMENDATIONS**

* Increase the amount and availability of shelters and affordable housing units, including for persons who are elderly
* Moratoriums on evictions during the COVID crisis
* Social protection to assist persons experiencing homelessness
* Assistance with rent, food, health care, and utilities during crises such as COVID-19
* Finances to assist programs which provide shelter and services to persons without homes
* Technology is important in conveying information about the virus and enabling people without homes to stay in communication with family and service providers
* Provision of personal protective equipment and cleaning supplies to programs which offer services to persons experiencing homelessness
* Encouragement of volunteerism, particularly by persons with lower COVID-19 vulnerability