By Charles J. Johnson

When COVID-19 halted the world a little more than a year ago, one group of people appeared to be particularly vulnerable to this new, little-understood coronavirus: the homeless.

Often suffering from poor health and packed head-to-foot in shelters — known as congregate housing — homeless individuals were one of several groups of people who, it was feared, would be decimated by the spread of COVID-19.

While those experiencing homelessness did suffer COVID’s aggressive spread initially, a silver lining has emerged out of the deadly pandemic. Hotels, abandoned by business travelers and tourists, were used to house people who would otherwise be sleeping in congregate shelters or on pads arranged on the floor of a church basement. Social service agencies, doctors and those who stayed in the hotels are now calling it a game-changing model for how to stabilize people experiencing homelessness and get them into permanent housing and off the street for good.

Equipped with a flood of private donations, CARES Act funds and FEMA dollars, local nonprofits and governments — including Chicago and Cook County — were able to house more than a thousand people in these hotel settings.
Nia Tavoularis of Connections for the Homeless in Evanston, a social service agency, calls the practice of hotel sheltering “revolutionary ... an absolutely new frontier.”

Now, agencies and municipalities in Chicago and across the country are looking to acquire hotels, some on the verge of bankruptcy after more than a year with few paying guests, or buildings that could be converted to “hotel-style” shelters.

A battle has erupted in Texas over a plan to convert a former hotel into permanent supportive housing. Oregon is looking to spend as much as $65 million to buy 20 underused hotels, enough for roughly 2,000 people. In California, the practice has been hailed as a success in a state that constantly battles homelessness in its major cities.

While it might seem obvious that it’s preferable to sleep in comfy sheets with cable TV than on a pad, it’s not the creature comforts experts say are revolutionary. Those in shelters often face a series of intersecting hurdles before they can find stable employment and housing or access government services:

- Some shelters will take only men or women, meaning homeless families are sometimes unable to be housed together. A daughter caring for her elderly father or a mother caring for male teens might be separated.
- Many shelters close during the day, requiring residents to leave during typical office hours. Try navigating the secretary of state or Cook County court system with a social worker at 9 p.m.
- Doctors and nurses aren’t easily able to treat patients, who often suffer from diabetes, hypertension, substance abuse disorder and mental health conditions. Patients and providers aren’t able to return to the same shelter night after night and an expensive cycle of emergency room visit-shelter-ER is common.
- Permanent housing opportunities dry up if caseworkers can’t quickly reach their clients, extending one’s stay on the streets or forcing them into housing that might not be close to work and family support or isn’t handicap accessible.
With a hotel, notes can be slipped under doors, bureaucracies navigated, health stabilized and families can stick together in adjoining rooms.

“A pad on the floor in a volunteer-run space is not what we would do if we had enough resources. We see the pandemic as an opportunity to use funds to create some permanent sites,” said Kurt Runge of the Alliance to End Homelessness in Suburban Cook County.

Passing the bar, electricity be damned

Qwandra Drummer was trying to study for the Illinois bar exam in February 2020 when a worker at a shelter yanked her laptop’s power cord out of the wall. Drummer wasn’t allowed to use the facility’s electricity to charge computer devices.

“I was begging, crying,” Drummer said. “I said ‘can you not understand what I’m trying to do’? She said, ‘I don’t care what you’re studying for, you cannot use our electricity.’ ”

Drummer, raising six children, graduated from Temple University in 2002 with a degree in engineering. She declined to share the precise circumstances behind her situation,
describing it as a cascading “series of unfortunate events.” She grew up around the now-demolished Robert Taylor homes and Wentworth Gardens on the South Side, attending Whitney Young before Temple and the Mitchell Hamline School of Law in St. Paul, Minnesota.

She jokes about failing the “foreseeability test” she learned about in law school.

As COVID-19 began to creep into Chicago, she grew scared for her family and bought a tent, a radio and other camping supplies, fearing they would have to live outside. She still has the D batteries she stocked up on.

Instead, Drummer was placed at the Hilton Garden Inn and the Orrington in Evanston, where her kids were able to e-learn in a space with two bathrooms, two bedrooms and a living room. Meals from local restaurants were delivered “with a smile” three times a day, and Connections staff brought clothes, toiletries and games for the kids. One of Drummer’s children is autistic and blankets help. They found an extra thick one for her.

The kids weren’t the only ones studying and taking tests online. Drummer had plenty of electricity for bar exam prep. She passed and was admitted in January, according to the Attorney Registration and Disciplinary Commission.

Qwandra Drummer holds her law license April 9, 2021, in Evanston. (John J. Kim / Chicago Tribune)

Her example is an outlier — most in homeless shelters are not on the verge of being licensed attorneys — but the example is instructive of the superiority of the hotel system,
advocates say. A family was able to stay together. Service providers were able to quickly and diligently meet individual health needs. And the dignity of a warm bed and some privacy put a bounce in the family matriarch, who gained a major credential — tough even for the most privileged — she can now use in her job hunt.

“I stayed in all of the (other shelters),” Drummer said. “I couldn’t sleep. I’d be with my cellphone, using the light to study, unable to sleep. ... They’re doing the best they can, but the one that gave me the most love, care and attention was Connections.”

After a stay from April to August, Drummer and family moved into market-rate housing.

Runge estimates about 700 people sheltered in hotels throughout suburban Cook County at the height of the pandemic.

Through the end of 2020, Connections for the Homeless housed 350 people, 70 of whom were kids, in hotel operations. They recorded only 10 COVID-19 cases, with no participant-to-staff transmission, Tavoularis said. The Margarita Inn in Evanston also enthusiastically took clients. About 80 are still being sheltered.

“Our ability to say ‘yes’ was a totally different way of doing business. ... This is so much better than having people in the basement of the church from 7 p.m. to 7 a.m.,” Tavoularis said.
The doctor who moved in

Dr. Thomas Huggett didn’t just shelter his patients in a hotel. **He moved in himself.** Huggett is a physician with Lawndale Christian Health Center, a medical services agency. When COVID-19 hit, he saw it spread nearly unchecked: In one congregate shelter, where all residents were tested, 65% came back positive.

The city of Chicago managed to secure rooms at Hotel One Sixty-Six in the luxe Gold Coast (it’s now open under a new name).

Huggett then started a roadshow of sorts across the city, trying to take the most medically vulnerable homeless out of shelters and convince them to move to an unfamiliar hotel downtown.

“To tell you the truth, it was a little bit a part of our sales pitch,” Huggett said of his decision to move in. “People thought, ’If this white dude, this white doctor is staying there, then it’ll probably be good.’ It was my ace card,” he said, smiling wryly.

Thirty-five medical practitioners and staff worked with Huggett treating patients seven days a week at the hotel, and Huggett said they were able to much more effectively manage the chronic conditions they often see: high blood pressure, diabetes and HIV. If patients had mental health conditions or drug addictions that couldn’t be managed in the hotel, they could efficiently place them in inpatient care.

Dr. Thomas Huggett on May 4, 2020, at Hotel One Sixty-Six, where Huggett lived temporarily while treating patients housed at the Gold Coast hotel. (Brian Cassella / Chicago Tribune)
At its peak, early in the pandemic, Hotel One Sixty-Six housed 172 people experiencing homelessness, according to Huggett. In the early days of the pandemic, 10 people living there went to the hospital with COVID-19, with eight landing in the ICU. Six were intubated. None died.

Huggett lived at the hotel from April to September, with trips home to wash his clothes.

The hotel system, which allowed regular testing and monitoring of patients, saved lives, Huggett said. On top of that, more than half of those in the hotel were able to get access to housing, he said.

Betty Bogg, executive director of Connections, also moved into the hotels where clients were staying.

**The downsides, good governance and what comes after a revolution**

If “just put the homeless in hotels then” seems like the obvious solution to one of society’s most persistent social problems, it’s not that simple. In the first place, the “hotel revolution” would not have been possible without the pandemic. The rooms would not have been so available, nor would the public funds to pay for them, and hoteliers wouldn’t have had the financial incentive to take in those experiencing homelessness.

In Chicago, occupancy rates at hotels in February 2021 stood at 20%, down from nearly 60% at the same time last year as coronavirus was beginning to ramp up, according to STR, a hotel data and research firm. At least 20 downtown hotels suspended operations, rather than try to stay open with travel virtually shut down.
Michael Jacobson, president and CEO of the Illinois Hotel & Lodging Association, said he’s quite proud of the work hotels did amid the crisis, sheltering all kinds of people including first responders and essential workers. He stressed the rates hotels charged service agencies and governments weren’t profitable, but they helped to stem heavy losses.

“This industry often steps up and helps communities. Did any hotel make money off of it? Absolutely not,” Jacobson said.

Most of the room services provided to otherwise homeless guests didn’t come from hotel staff, who aren’t trained or equipped to deal with the myriad issues operating a shelter presents. Some hotel worker union contracts don’t require the staff to work if the hotel is being operated as a crisis shelter.

Even the buildings themselves aren’t perfectly equipped. For example, most hotels are smoke-free now, by far the preference of most guests. Many people in shelters smoke. Dr. Huggett handed out nicotine patches before a system of day passes and smoke breaks could be worked out safely.

As hotels fill back up — Jacobson says the industry isn’t expecting a return to pre-pandemic profitability before 2024 — some propose acquiring hotels that closed, or that owners are looking to sell, and convert them into permanent shelters, complete with a smoking area, medical facilities and stocks of clothes and daily necessities.

“Definitely a question mark as to what happens. We are ourselves, along with at least three other service providers in suburban Cook County, exploring acquisition of fixed-site shelters,” Tavoularis said.
In southwest suburban Summit, **BEDS Plus**, a nonprofit, is raising money for a fixed-site shelter modeled after college dorms. The 24-bed facility in a renovated bank is expected to handle 50 to 75 people per year, with an on-site registered nurse, mental health clinic and daytime resource center. The Cook County Department of Economic Development is investing $1.5 million in the facility, with $1.1 million being raised from private sources.

With common areas, but private rooms for individuals and families, the facility aims to blend high-intensity care with the dignity of private space and some sense of community. Some people with mental health diagnoses found them exacerbated by isolation in hotel rooms. Huggett said he once saw a man return to a shelter not because he’d lost his permanent housing, but just to hang out with some of his friends after getting lonely living by himself.
Also at issue is the notion of housing a lot of people in socioeconomic crisis in a few high-density buildings, re-creating some of the conditions that marred urban public housing in the second half of the 20th century. Tavoularis says those concerns are legitimate and that any facility needs to have adequate staff to service those staying there and provide quality control. A facility of 45 to 50 rooms is ideal, she said. It minimizes impact on the surrounding areas, but is big enough to be a building block in fixing the problem.

In Austin, Texas, the city’s effort to acquire an old Candlewood Suites has been met with a lawsuit by the hotel owners next door, saying a nearby shelter would reduce the value of their business. County commissioners (Austin spans several counties) and Texas Attorney General Ken Paxton have tried to delay or halt the project.

While the investment required to create the fixed-site facilities may cause sticker shock for some taxpayers, advocates point to studies that find the public costs of servicing homelessness — ER visits, police and EMS services — can be higher than simply paying for housing.

“We became, as an agency, we became an economic engine for the first time,” Tavoularis said. Connections hired more staff to service their clients housed in hotels, jumping from 48 to 75, and the agency estimates it put $5 million into the local economy paying for meals, weekly cleaning services and hotel taxes.

The majority of the money for the hotels ultimately came from the federal government in the form of the CARES Act and reimbursements from FEMA. President Joe Biden signed an executive order saying FEMA will continue to reimburse hotel stays for those at risk of COVID-19 because of homelessness through September, and has instructed the agency to reimburse hotel stays retroactively at 100%, up from the 75% the Trump administration ordered.
“For suburban Cook County, we’ve been very fortunate that Cook County has some very good people in its planning department who’ve made it work so we can pay for the hotels,” Runge said.

For all the anger over COVID lockdowns and elected officials violating their own public health advice, service providers generally spoke glowingly of the speed and effort the city and Cook County showed in working with them throughout the pandemic, especially in early days.

“The relationship with the county saved the day. It kept us alive emotionally, financially,” Tavoularis agrees.

As for Huggett, he’s back making the rounds in Chicago’s shelters. And Drummer is looking for a job in the legal field, raising her children (one of whom is waiting to hear back from colleges) and trying to remain positive.

“Last March I was buying a ‘zombie apocalypse kit,’ now I’m talking to a reporter from the Tribune. .... I’m being gentle with myself. I just came out of a very traumatic experience. The more gentle I am, the better I’ll be.”

Drummer’s dream is to be the next “Judge Judy.” But if she can’t land a TV deal, what kind of legal gig is she looking for?

“A paying one.”

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