

Testimony

of

Mary T. Bassett, MD, MPH, Commissioner

New York City Department of Health and Mental Hygiene

before the

**New York City Council Committee on Mental Health, Developmental Disability, Alcoholism,
Substance Abuse & Disability Services**

on

FY 2018 Preliminary Budget

March 20, 2017

New York City Council Committee Room
New York, NY

Good afternoon Chairman Cohen and members of the Committee. I am Dr. Mary Bassett, Commissioner of the New York City Department of Health and Mental Hygiene. I am joined by Dr. Gary Belkin, Executive Deputy Commissioner for Mental Hygiene, and Sandy Rozza, Deputy Commissioner for Finance. Thank you for the opportunity to testify today on the Department's preliminary mental hygiene budget for fiscal year 2018.

In 2015, under the leadership of First Lady Chirlane McCray and Deputy Mayor Richard Buery, the Administration launched ThriveNYC, a four-year investment to improve the mental health and well-being of all New Yorkers. As we enter year two, I am pleased to report that more than 80% of the initiatives in ThriveNYC are operational. These initiatives follow the six guiding principles of ThriveNYC: change the culture, act early, close treatment gaps, partner with communities, use data better and strengthen government's ability to lead.

I want to thank the Council and this Committee for being partners in this work. Over the last year you've held hearings, community town halls and naloxone trainings; shared your personal stories, putting a face to many of these shared struggles; and hosted a Mental Health First Aid training for 50 Council staff. I also want to thank my staff for tirelessly implementing the vision of ThriveNYC and the First Lady for making New York City a national leader in the field.

As we look forward, I am pleased to report that the agency's budget for fiscal year 2018 rises by about \$10 million for the continued implementation of ThriveNYC and the Department's other mental health programming. This continued investment is essential to addressing and reducing health disparities in our city. While mental health issues can affect any New Yorker, they disproportionately affect poor communities, immigrant communities and communities of color. At a time when access to health care is being challenged, this city's leadership and commitment to mental health highlights the importance of physical *and* mental well-being for *all* New Yorkers.

City Priorities

The Mayor's budget priorities reflect the need to better treat and prevent mental health issues and substance use, as well as the need to deal with current crises facing the city, including the opioid epidemic. In 2016, we estimate that more than 1,300 individuals died in New York City of an

unintentional overdose – more deaths than car crashes and homicides combined. Prescription drugs continue to play a role in the opioid epidemic. But since 2010, heroin and, more recently, fentanyl – a powerful synthetic opioid 50 to 100 times stronger than morphine – have driven the increase in overdose deaths. Opioid deaths are preventable. We are committed to ensuring that every New Yorker with a substance use disorder has access to the knowledge and resources to make informed decisions, including effective harm reduction and treatment options. Our goal is to help New Yorkers stay alive and take steps to improve their health.

As part of this goal, in the last year the Department educated more than 33,000 health care providers on judicious prescription of opioids and benzodiazepines. We trained more than 200 health care practitioners on how to prescribe buprenorphine and launched an innovative nurse care manager model, which combines care management services with Medication Assisted Treatment. We have also invested heavily in the lifesaving medication naloxone; more than 10,000 naloxone kits were distributed citywide in fiscal year 2016, and late last year we launched the first phase of “Save a Life, Carry Naloxone,” a \$3 million public awareness campaign.

However, more must be done. Last week, the Mayor announced HealingNYC, the City’s comprehensive effort to reduce overdose deaths by 35 percent over 5 years. The City will leverage previously funded programs and make new investments to prevent opioid overdose deaths, misuse and addiction, and provide effective substance use disorder treatment. I am happy to report that this plan will add \$9.5 million to the Department’s fiscal year 2018 budget. With this funding, the Department will:

- Provide 65,500 naloxone kits each year to more than 100 registered opioid overdose prevention programs when fully ramped up
- Conduct outreach to treatment and harm reduction programs that serve those at high risk of overdose. This outreach includes overdose prevention education, naloxone training, and information on risks associated with fentanyl
- And expand access to buprenorphine treatment by including buprenorphine induction in emergency departments referring patients to ongoing care, working with Health + Hospitals to expand treatment through outpatient services and increasing the number of nurse care manager sites

I want to thank my fellow Commissioners at the Departments of Social Services, Corrections, and Police, the Office of Chief Medical Examiner, the Mayor's Office of Criminal Justice, and NYC Health + Hospitals for their commitment to this work.

Through the Mental Health Council, Community Services Board, Regional Planning Consortium and RxStat, the Department is able to coordinate with City agencies, community-based organizations, service providers and advocates to ensure data sharing, program coordination and strategic planning. Together I am hopeful that we will be able to reverse the overdose trend that has plagued the city by providing effective services and treatment, and preventing addiction before it starts.

Federal Priorities

While our City budget prioritizes the mental health needs of New Yorkers, we are closely monitoring the impact that changes in Washington D.C. may have on local services.

It would be naïve to say that the results of the presidential election will not affect our work. As the Mayor said in the days after the election, we will continue to keep our people safe – all our people, regardless of who they are or where they come from – and protect New Yorkers' access to affordable behavioral health care and substance use treatment, regardless of insurance or immigration status. The future of insurance coverage for mental health and substance use disorder services is uncertain. While we still do not know the outcome of the ACA repeal plan currently under discussion in the House, we will persist in advocating for mental health parity and we encourage you to do so as well.

ThriveNYC Updates

As you know, many agencies participate in ThriveNYC, reflecting the Administration's commitment to cross-agency work. But this Department has a key role. I would like to take a moment now to discuss the considerable progress the Department has made in implementing ThriveNYC's initiatives in the last year.

Last October we launched **NYC Well**, a universal point of entry to New York City's behavioral health system. This enhanced call center provides crisis counseling, peer support, information and referrals to behavioral health services via text, chat and phone. It is free, confidential and available 24/7

in English, Spanish, Mandarin and Cantonese – with the ability to connect with an interpreter for all other languages as needed. This truly unique model connects the public to trained behavioral health personnel based on their needs, insurance and location. Since its launch, NYC Well has fielded more than 80,000 calls, texts and chats; referred more than 27,000 New Yorkers for services; made more than 3,000 follow-up calls, and has directly connected more than 1,000 callers to behavioral health services by assisting in the introductory call with a provider. In a comparable time period last year, our previous call center received only 42,000 contacts. The number is 888-NYC-WELL. We appreciate your ongoing support in encouraging your constituents to use this service.

The **Mental Health Service Corps** has currently deployed 110 clinicians – including psychiatrists, psychologists and social workers – to primary care and behavioral health clinics in communities with limited access to mental health care. This was done at no cost to the facilities or the community members. In fiscal year 2018 we will add an additional 130 clinicians. Once at full capacity in year three, we will spend \$48 million to fund up to 400 corps members, who will provide approximately 400,000 additional hours of clinical services. To aid in efforts to reduce opioid overdose deaths, all Corps members will be trained to distribute naloxone and to counsel clients about overdose risk.

We are making progress towards our goal of training 250,000 New Yorkers in **Mental Health First Aid** by 2020. To date, 12,060 New Yorkers have been trained along with 252 Mental Health First Aid volunteer instructors, who will exponentially expand our training capacity. Through this work, we will equip a critical mass of New Yorkers with tools to broaden the reach of mental health treatment and shatter the stigma of mental illness.

Through **NYC Safe**, we are providing behavioral health support to the small subset of New Yorkers who have both displayed or threatened violence against the public and struggle with a mental illness or substance use disorder. Through a reorganization of NYC Safe, all such client referrals now come directly to the Department. Trained Department clinicians provide clinical assessments and connect clients to appropriate care through our Single Point of Access network and a suite of enhanced mobile and community treatment teams. This new approach also allows the Department to work more closely with our contracted behavioral health providers to ensure continuity of quality care and access to

other social supports. We are proud to report that 96 percent of NYC Safe clients in the community have not been charged with a violent offense since being referred to the program, and there has been an 86 percent increase in housing stability among the same group.

Finally, we are working with the Department of Education to ensure that every school is aware of available mental health services to better support students and help them thrive in their education and lives. We are implementing universal programs that promote mental health for all students, more intensive prevention services for students who are at higher risk and targeted crucial services for students with identified mental health conditions – all while building mental health competency in school staff. This three-tiered model is currently being implemented at all 130 Community Schools and being expanded to an additional 900 New York City schools through the support of 100 **Mental Health Consultants**. This represents a nearly 800% increase in mental health staffing levels throughout the system. Also, there are now school based mental health clinics providing mental health services in 285 schools, up from 190 in 2014.

Looking Ahead

ThriveNYC is a guidepost in our work to promote and protect the health of all New Yorkers by addressing the effects of mental illness and substance misuse in New York City. I want to thank again Mayor de Blasio, the First Lady and the Council for their leadership as we pursue the ambitious and needed work required to transform the mental health landscape and motivate other jurisdictions to follow our lead. Thank you for the opportunity to testify, for your support of this work and for the partnership between this Committee and the Department. I am happy to answer any questions.

Center for Court Innovation Testimony
New York City Council
Committee on Mental Health, Developmental Disability,
Alcoholism, Substance Abuse and Disability Services
Preliminary Budget Hearing
March 20, 2017

Good afternoon **Chair Cohen** and members of the Committee. My name is **Dipal Shah**, and I am the **Director of Strategic Partnerships** at the **Center for Court Innovation**. Thank you for giving me the opportunity to speak today.

The Center for Court Innovation has created problem solving courts and programs of all varieties with the goal of responding to crime by using meaningful alternatives to incarceration and linking offenders to treatment and other services. Often these services include robust evaluation and support for mental health and substance abuse needs. Through its community courts and court-based programs, which include the Midtown Community Court, Bronx Community Solutions, Red Hook Community Justice Center, and more, the Center has provided thousands of individuals with interventions that include screenings for signs of behavioral and mental health needs and, in response, providing them with individual case management, group interventions, and referrals to community-based services as an alternative to incarceration.

In addition, the Center has provided training and technical assistance to the mental health courts throughout New York. The Center has worked with partner agencies to launch Court-based Intervention Response Team (CIRT) projects in Brooklyn and the Bronx. The CIRT programs work in close partnership with the Department of Corrections, the Department of Health and

OPERATING PROGRAMS

Brooklyn Justice Initiatives | Brooklyn Mental Health Court | Brooklyn Treatment Court | Bronx Community Solutions | Brownsville Community Justice Center
Bronx Child Witness Program | Crown Heights Community Mediation Center | Domestic Violence Court | Harlem Community Justice Center | Legal Hand
Midtown Community Court | Newark Community Solutions | Parent Support Program | Parole Reentry Court | Peacemaking Program | Project Reset
Poverty Justice Solutions | Queens Youth Justice Center | Red Hook Community Justice Center | Save Our Streets | Staten Island Youth Justice Center
Strong Starts Court Initiative | Westchester Court Education Initiative | UPNEXT | Youth Court | Youth Justice Board

Mental Hygiene and the Mayor's Office of Criminal Justice to offer robust services as an alternative to incarceration for misdemeanor and felony offenders with mental health needs.

And, a complement to S.O.S Crown Heights, the Make It Happen program, uses a trauma-informed approach to provide supportive services for young men of color who have been negatively impacted by community violence. Make It Happen provides mentorship, intensive case management, clinical interventions and supportive workshops, allowing participants to recognize and process their own mental health trauma and get on the right track towards healthy productive lives.

The Center has also piloted a host of innovative programs that treat New Yorkers trapped in a cycle of exploitation, crime, and violence, as victims, rather than perpetrators. For example, women and transgender individuals who are victims of commercial sexual exploitation, trafficking, and prostitution find themselves in the criminal justice system labeled as "defendants." They often present with very serious mental health needs and associated trauma. In response, the Center's Human Trafficking Intervention Initiative, a project supported by the Council, offers a trauma-focused approach to aid individuals arrested for prostitution with their mental health needs. Instead of jail time, Center clinicians, working in the Bronx, Manhattan, and Brooklyn, identify and address each person's complex needs and shape a plan to stop the cycle of re-arrest and re-victimization.

I am here to urge the Council to support continued funding for the Center for Court Innovation and its efforts to improve public safety and the mental health of New York residents, promote and expand the use of community-based alternatives to incarceration, respond to substance abuse, and increase equal access to justice for vulnerable New Yorkers. The Center for Court Innovation is seeking \$700,000 in City Council support. This includes a continuation of \$500,000 to support ongoing core operations in communities across the city, and an enhancement of \$200,000 to expand alternatives to incarceration in several key neighborhoods.

The Center is committed to improving outcomes for young people impacted by the justice system and offering them pathways to academic, social and vocational success as well as

supportive mental health services. Through both court and community-based programs, such as Project Reset, our adolescent and young adult diversion courts in Manhattan and Brooklyn, and Youth Justice Centers in Queens and Staten Island, we provide judges, prosecutors, and police with meaningful alternatives to business as usual. Our programs serve more than 6,000 youth each year, providing them with opportunities to avoid Rikers Island, and in many cases, a trip to court.

In addition to diverting New Yorkers out of the justice system, we are helping people transition back to community life after spending time in jail or in detention. One such project is the Harlem Community Justice Center, which, together with its faith-based community partners, provides support, including mental health supportive services, to hundreds of individuals who are released from prison each year. Council support would allow us to increase the number of individuals served by 30 percent.

The City Council's support has been invaluable to the success of the Center for Court Innovation, helping us maintain core operations and expand our demonstration projects throughout New York City. The Center for Court Innovation looks forward to continuing to work with the New York City Council to create new alternatives to incarceration that result in a fairer, more accessible justice system for all New Yorkers. Thank you again for the opportunity to speak, and I would be happy to answer any questions you may have.

HARLEM UNITED

March 20, 2017

Testimony to the New York City Council Committee on Mental Health, Developmental Disability, Alcoholism, Substance Abuse and Disability Services

My name is Jason Cianciotto and I am the Vice President of Policy, Advocacy, and Communications at Harlem United Community AIDS Center, Inc. (Harlem United). For nearly three decades, Harlem United has changed lives by helping New Yorkers most in need improve their health and well-being through compassionate, client-centered care. From our roots, planted in the basement of a church in Harlem at the height of the AIDS crisis, we have grown into a full-fledged, community-based, healthcare, and housing provider. Across the decades, our founding ethic has remained the same: Harlem United is a family, and no matter what we're here to help.

On behalf of the Harlem United family, I want to thank the New York City Council and the many city agencies who provide critical financial support for our programs and services. During Harlem United's fiscal year 2016, at our nine service locations—including our three Federally Qualified Health Centers (FQHCs), two AIDS Adult Day Health Care (ADHC) programs, mental health and substance use treatment services, and mobile medical, dental, and harm reduction vans—support from New York City helped Harlem United:

- Provide medical care to over 9,300 unique clients, 96% of whom live at least 200% below the federal poverty level;
- Serve 165 HIV-positive, low-income adults per day;
- Conduct over 4,000 HIV tests;
- Serve over 50,000 hot, nutritious meals;
- Exchange 200,000 clean syringes;
- House 750 New York City residents;
- Cured nearly 50 New Yorkers with Hepatitis C.

In this time of great uncertainty about the extent of federal budget cuts proposed by President Trump and Congress, continued financial support from New York City is even more critical. Based on what we all hear in the news every day, our clients, particularly those who are immigrants, are frightened that the services they rely on to stay housed—to stay alive—will be taken away. Harlem United is committed to ensuring that everyone who comes through our doors receives the care they need, regardless of what happens in Washington. To help support our commitment, I would like to highlight the City Council Discretionary requests we have made for the Fiscal Year 2018 budget.

Harlem United's Injection Drug User Health Equity Initiative FY18 Request: \$147,000 (Speaker's Request)

In fiscal year 2016, the Council's support for Harlem United's injection Drug User Health Equity Initiative enabled the agency's Expanded Syringe Access Program (ESAP) team to:

- Distribute nearly 10,000 clean syringes;

HARLEM UNITED

- Conduct nearly 1,900 educational encounters with injection drug users (IDUs) on a variety of issues like Buprenorphine, Hepatitis C (HCV) prevention, and HCV care and treatment;
- Provide over 260 rapid HIV tests;
- Conduct over 75 each of tests for Chlamydia, Gonorrhea, and Syphilis
- Conduct 90 HCV screenings to IDUs
- Distribute 250 hygiene kits

Check Hep C Viral Hepatitis Initiative

FY18 Request: \$67,380 (Council Initiative)

In fiscal year 2016, the Council's support for Harlem United's Check Hep C Viral Hepatitis Initiative enabled the agency to hire a patient navigator, conduct outreach events, and provide incentives for client participation. Of the 119 total unique clients enrolled, 96 (81%) were determined to be HCV treatment candidates, and of those eligible candidates 48 (50%) completed treatment, meaning they were cured of HCV.

Food and Nutrition Services (FNS):

FY18 Request: \$10,000 (Discretionary Request)

This is a new request for FY18, as Harlem United has experienced an increase in demand for services. Harlem United's FNS program operates Monday through Friday from 9:00 AM to 7:00 PM year-round, excluding federal holidays. Clients served are all living in poverty, living with HIV/AIDS, and most have co-morbid condition including unstable housing and homelessness, mental illness, and chronic substance use. For these reasons, most have difficulty purchasing, preparing, and storing nutritious food safely. By providing this basic need for nutritious food, the FNS program is a gateway to Harlem United's continuum of medical and other support services that are critical not only to ending the HIV epidemic, but also to help avoid expensive hospitalizations.

Mobile Food Pantry (MFP)

\$5,000 (Discretionary Request)

This is a new request for FY18 that will help expand the outreach and effectiveness of our mobile Harm reduction, Recovery Readiness, and Relapse Prevention (H4RP) program. H4RP conducts outreach and provides services to people primarily at street-based locations and engages those who are HIV positive and high-risk HIV negative substance users in a variety of interventions, including syringe exchange, HCV and HIV education and treatment escorts, overdose prevention, Buprenorphine education, safer injection and sex counseling, mental health counseling, care coordination, and referral services. This funding will provide approximately 1,100 snack bags for H4RP clients, which consist of food items like granola bars, fresh fruit, and water. In 2015, Harlem United's H4RP program delivered nearly 3,900 snack bags and 400 pantry bags to these clients.

HARLEM UNITED

Veterans Housing Initiative

FY18 Request: \$50,102 (Veterans Community Development)

In April 2016, with funding from the NYC Human Resources Administration, Harlem United launched its Veterans Housing Initiative (VHI), the agency's first supportive housing program for veterans. VHI currently provides supportive housing to 92 formerly homeless and chronically homeless veterans who are single adults, primarily people of color (64% Black and 15% Hispanic/Latino), and who face multiple barriers to achieving housing stability, a healthy recovery, and the capacity for independent living. For example, 63% have mental illnesses, 41% are active substance users, 25% suffer from more than one chronic condition, and 14% have a history of prior suicidality. In FY17, the Council provided \$20,000 in support of the VHI through a Veterans Community Development grant. In FY18, the additional \$30,000 we are requesting will enable us to hire a full-time nurse who would be responsible for monitoring the medical care of all VHI residents, working closely with the on-site staff to assess each resident and to ensure each receives the care they need. Currently, these services are provided by case managers, who do not have the medical training and certification to manage the complex needs of these veterans.

In addition to the above program and services, Harlem United respectfully requests that the Council take action to ensure that City residents who receive critical housing and related support services through the Housing Opportunities for People with AIDS (HOPWA) Program do not lose their housing due to the projected \$14M gap in HOPWA funding. Based on a meeting with the City Office of Management and Budget (OMB), DOHMH, and HRA on February 2, 2017, which included HOPWA residents and programs, providers understand that this gap is primarily caused by the new HOPWA funding formula approved by Congress in 2016, as well as additional decreases due to the lower number of new HIV infections thanks to NYC's historic and successful efforts to end the AIDS epidemic by 2020. Harlem United currently has approximately 150 HOPWA clients, households that often include children and relatives who are undocumented immigrants. For clients who are undocumented, HOPWA is the only source of funding that can provide housing support. And, 52% of Harlem United's HOPWA clients access other services the agency provides, including health care, dental, mental health, and substance use treatment services. Given the continued assault of the federal government on undocumented immigrants, it is critical that the City fill this \$14M gap so that these vulnerable clients do not end up homeless and lost to care.

Finally, I want to especially thank Mayor de Blasio, Charlene McCray, and DOHMH for the ThriveNYC initiative, which has brought unprecedented attention to the mental health needs of New Yorkers. As the city continues this commitment to mental health care, it is important to note that, in addition to the city's hospitals, community-based providers like Harlem United are also working on the front lines to provide routine mental health services, including medication assisted treatment (MAT), to minority populations particularly affected by non-serious mental illnesses, such as depression, anxiety, and post-traumatic stress disorder (PTSD). These populations include New Yorkers who are LGBTQ, youth under age 18 living below poverty, seniors over age 65 living in poverty, substance users, and veterans unable to access the VA system. Combined, these New Yorkers represent the largest group in need with the least

HARLEM UNITED

dedicated resources for a variety of reasons, including but not limited to: Lack of behavioral health professionals culturally competent to serve these populations, lack of infrastructure, lack of enough providers to meet demand, and high turnover among providers, all of which results in long waiting lists, lack of continuity in care, and expensive hospitalizations. Given that proposed legislation to repeal the Affordable Care Act (ACA) includes removing the Essential Benefits, which forces health insurers to provide parity between mental and physical health benefits, the need for culturally-competent, non-serious mental illness services to these populations is likely to increase significantly. Harlem United has been brainstorming with the Community Health Care Network on how to meet this critical mental health need, and we invite the Council and DOHMH to join us in the creation of a research document that would provide both valuable data and informed policy recommendations to address these critical mental health needs.

Again, on behalf of the Harlem United family, I want to thank the Council and City for its historic and generous support of the agency's commitment to serving New Yorkers most in need. If there is any additional information we can provide as you further develop the City's fiscal year 2018 budget, please contact me by phone at 347.703.3865 or by email at jcianciotto@harlemunited.org.

Beverly's Law: A Law To Improve The Plight Of People On Social Security

My name is Beverly Johnson.

I am writing this support legislation to extend disability rights to those with psychiatric disability. The ADA has resulted in great advances for people with disabilities who require reasonable accommodation and an adaptive work environment. Unfortunately, individuals with psychiatric disabilities do not have the same level of accommodations extended to them.

This legislation would require Mental Health Advocates in all government funded and contracted workplaces. It would also assure that reasonable accommodations are in place for those who have a psychiatric disability. The law would be called Beverly's Law. And, though it is informed from my personal experience, it is a shared experience with many others who work and want to work, but are shut out of the work force due to mental illness. This law under the ADA (The Americans with Disabilities Act) will require all organizations that receive funding and contracts from the City, State, and Federal Government to take part and provide support and accommodation to assure the full rights of those with mental illness to work.

In large part, mentally ill people may be responsible for causing the drain on social security's resources. The problem is that they are not adequately accommodated in the work environment. Therefore, they are often limited to receiving social security benefits, depriving them of equal access to employment, and causing dependency on the government for themselves and their families. This plan is designed to help rectify this problem; it would provide mentally ill people with the needed support in order to be self-sufficient and free of social security.

Mental illness is a serious disorder and the effects can be devastating and debilitating. However, with supports recovery is possible. Mentally ill people may need an adaptive work place, emotional support, flexible leave arrangements, and ability to access as needed benefits without lengthy delay. Adequate protections for those with mental illness can avert relapse. A supportive environment can unleash their abilities and help an able group to make great contributions. These individuals should be given an opportunity to function as productive people in society.

A primary need for mentally ill people to reenter, enter and remain in the job market is to have a professional advocate in the office of human resources. This professional (a psychologist or social worker) would help with on the job-related coping skills for the mentally disabled. The necessity of having a professional advocate would be to help the mentally disabled remain on the job, and therefore be free from social security.

Mentally ill people may qualify for various jobs. However, in order to successfully remain on the job, they will often need the continued support of a mental health advocate to provide the necessary job-related accommodations. This proposal could significantly impact the social security system by improving its effectiveness, efficiency, and cost. This new law should take effect immediately upon approval.



**Remarks of the Samaritans Suicide Prevention Center to the
NYC Council Committee on Mental Health, Developmental Disability,
Alcoholism, Substance Abuse and Disability Services**

March 20, 2017

Good afternoon. My name is Fiodhna O'Grady, and on behalf of Samaritans Suicide Prevention Center, our staff and volunteers, I want to thank Chairman Cohen and all the members of the NYC Council Committee on Mental Health, Developmental Disability, Alcoholism, Substance Abuse and Disability Services for the opportunity to present testimony at today's hearing.

As you know, the most recent statistics show that suicide--the tragic and ultimate symbol of untreated mental health--has increased in NYC for the 3rd straight year, now causing *almost as many fatalities as homicide and automobile accidents combined*.

So we certainly agree with DOH Commissioner Bassett's statement last year that *this increase in suicide shows we are not reaching New Yorkers early enough when they need support*.

What's the answer? "Enhance protective factors and reduce access to lethal means," says Dr. Eric Caine, a nationally respected suicide prevention expert with the University of Rochester Medical Center.

Research by Caine and his team evaluating the US Air Force's suicide prevention program—one of the most comprehensive ever implemented in this country—found that *the more points of access available to those in distress, the greater the likelihood of their receiving care and treatment*.

In addition to support from family, friends, spiritual and religious advisors—crisis hotlines, schools, community education programs, well-trained health providers all *enhance protective factors*.

Basically, people are less likely to drown when, if they are swimming with someone else.

Samaritans—which operates NYC's 24-hour suicide prevention hotline—has been on the front lines providing: immediate and ongoing support to those in distress; a path to healing for those touched by suicide; trainings on effective crisis interventions for health providers; and an essential alternative to existing clinical/government-run programs for the underserved, untreated and those impacted by stigma for over 35 years.

And what have we learned from our over 35 years working on the front lines in NYC? Work that includes responding to over 1.3 million hotline calls from those in distress;

training over 40,000 health care providers in the keys to effective crisis responses; and support to thousands of people who have lost a loved one to suicide?

We've learned that trying to reduce the incidence of suicide and self-harming behavior is a very humbling experience that requires tremendous humility.

For, in spite of all the policies designed by highly intelligent people with years of experience; in spite of adherence to evidence-based programs and best practices; in spite of the development of new initiatives—***suicide is still increasing in this city, as it has nationally for the past 10 years.***

"Have great respect for that which you do not know," participants are taught in Samaritans suicide prevention hotline training. A lesson that applies to the challenges we face in reducing suicide in NYC.

Samaritans own history confirms this—founded over 60 years ago in England by an Episcopalian minister who was also a psychotherapist who sought to help the people in his parish who were so intimidated by the stigma tied to suicide that they were resistant to acknowledge that they even had a mental health problem, let alone seek help.

So Reverend Varah announced he would be available, behind closed doors, to meet with any parishioner who was troubled; and set-up office hours, intending to provide counseling to those in need. Many people came and while they waited to see Varah, the volunteers who worked in his office offered them tea and sat and talked with them.

To his surprise, Varah learned very quickly that, while he thought he would be helping those in need by providing them with therapy, the majority of people felt better after spending some time talking in confidence to the "tea servers,," and left.

And so a man of faith with a clinical background accidentally discovered the power of lay people to provide relief and alleviation to those in distress, and the world's oldest and largest suicide prevention network, with over 400 centers in 42 countries, was born.

Bigger is not always better. New is not always improved. People who are in distress will decide what, if any, service they are or are not comfortable utilizing. They cannot be directed. It is out of our control.

There are too many highly respected community programs that have successfully worked with targeted at-risk populations that have seen their funding eliminated or reduced by the Mayor. Too many services that have established relationships with high-risk individuals that have been left out of newly funded initiatives. Too many groups with years of experience that have been left out of the conversation altogether.

We applaud the City Council's continued leadership in fighting these limitations and utilizing the rich diversity of services available to New Yorkers when they need support.

And we encourage you to do everything in your power to provide New Yorkers at-risk for suicide with more points of access for care and support in order to save more lives.

Samaritans thanks you for your ongoing support and asks that you, like last year, the Council restore our \$297,000 Suicide Prevention Hotline funding for FY 2018.



PLEASE SUPPORT SAMARITANS FY 2018 SPEAKER/ CITYWIDE \$297,000 SUICIDE PREVENTION HOTLINE RESTORATION

The increase in suicide in NYC tells us we are not reaching New Yorkers early enough when they need support, NYC DOH Commissioner Dr. Mary Bassett, September 2016

SUICIDE IS INCREASING NYC DOH reports that suicide has increased in NYC for the third straight year, causing almost *as many deaths as homicides and auto accidents combined*; with the greatest increases found in neighborhoods with higher rates of poverty. This increase parallels a national trend, with the CDC noting increases in youth, for whom suicide is the 2nd leading cause of death (causing more fatalities than all major diseases combined), middle-age men, and women (whose rate is now three times that of men).

THE PROBLEM One out of 5 people experience a mental health problem annually and as many as 60% of them never receive help. Add the many myths there are about mental illness—that people are “crazy,” a danger to the public, are just looking for attention, etc.—and the stigma many cultures associate with seeking care, and you have a growing public health issue that requires every effective approach available.

A WORLD LEADER IN PREVENTING SUICIDE Part of the international suicide prevention network that created the world’s first suicide hotline 65 years ago that has responded to over 25 million calls from those who are depressed and in crisis, Samaritans is utilized as an essential mental health service in cities from Paris, London, Madrid, Rome and Bangkok to Mumbai, Tokyo, Hong Kong, Colombo and Harare, Zimbabwe.

NYC’S LONGEST- RUNNING CRISIS RESPONSE HOTLINE Samaritans has been saving lives in NYC for over 35 years, by providing: immediate and ongoing support to those in distress; a path to healing for those touched by suicide; trainings on effective crisis interventions for health providers; and an essential alternative to existing clinical/government-run programs for the underserved, untreated and those impacted by stigma.

SAVES LIVES AND MONEY Samaritans availability at any point during a person’s crisis, often many times a day, helps to alleviate their emotional distress and diffuse a self-destructive or violent episode. And, on an economic level, averaging 80,000 calls from New Yorkers in distress annually, the hotline reduces the work losses and medical costs tied to suicide attempts and depression, and the amount of times costly medical and clinical services, emergency room and hospital visits, ambulances and police responses are required.

CARING VOLUNTEERS MAKE A DIFFERENCE Research has shown that well-trained hotline volunteers are more effective than their clinical counterparts. Samaritans hotline is staffed by over 100 volunteers from NYC’s culturally diverse communities who donate over 30,000 hours of free labor a year (worth \$750,000); and are empathetic, non-judgmental, trained in active listening and connect with a caller on their own level.

PROVIDING A SAFETY NET The hotline helps people cope by providing an immediate point of contact and connection, a place they can call in confidence and maintain their right to make their own decisions, without fearing someone may take action against their will; reasons, SAMHSA states, prevents millions of Americans from seeking needed health care. The hotline also provides an essential bridging and transition role, while a person is seeking care for the first time, is between visits or is waiting for their medication to take effect.

COLLABORATIONS ARE THE KEY Working collaboratively with community, government, faith-based and academic organizations, Samaritans has provided crisis response, technical support and training to NYC DOE ACS, Catholic Charities, NYCHA, Coalition for the Homeless, Safe Horizon, NYPD, NYC AIDS Task Forces, Mt. Sinai Rape Crisis, Alzheimer’s Foundation, GMHC, Trevor Project, Comunilife, LOISADA Corp, Asian-American Mental Health, DC37 Municipal Employees Union, UFT, Salvation Army and, even, the Girl Scouts.

The City Council has been the primary force in maintaining Samaritans \$297,000 Hotline funding the past three years. Funding Samaritans in FY 2018 maintains a cost-effective safety net for New Yorkers in times of crisis.

Samaritans

SUICIDE PREVENTION CENTER

presents a
special professional
development training

Samaritans provided suicide awareness and prevention education professional development workshops and presentations Citywide in FY16 to 2,218 individuals, including 1,470 guidance counselors, social workers, counselors, social workers, psychologists, alcohol and substance abuse counselors and others psychologists, alcohol and substance abuse counselors and others working in 587 NYC DOE schools and 88 community-based and government agencies, 714 students and 34 members of the public.

With discretionary funding from Council Members Cumbo, Deutsch, Levin and Williams in Brooklyn staff from 208 schools and 20 CBO's attended a Brooklyn **TALKING SUICIDE... and how to listen and communicate more effectively with those in distress**, a Citywide **Children and Suicide: Beyond the Taboos** led by an international expert on early childhood suicide, Dr. Brian Mishara as well as on-site presentations in schools.

School Name

Council Member Barron

Brooklyn Scholars Charter School
East New York Family Academy
FDNY High School for Fire and Life Safety
Frederick Douglass Academy VIII
JHS 218 James P. Sinnott
Performing Arts and Technology
PS 066
PS 159 Isaac Pitkin
PS 213 New Lots
PS 224 Hale A Woodruff
PS 233 Langston Hughes
PS 273 Wortman
PS 306 Ethan Allen
PS 346 Abe Stark
Riverdale Avenue Community School
World Academy for Total Community Health High School

School Name

Council Member Cumbo

ALC - Albany
ALC - W.E.B. Dubois
Brooklyn Academy of Science
Brooklyn Technical High School
Ebbets Field Middle School
HS for Global Citizenship
Medgar Evers Preparatory School
PS 009 Teunis G. Bergen
PS 011 Purvis J. Behan
PS 067 Charles A. Dorsey
PS 161 The Crown
PS 167 The Parkway
PS 221 Tossaint L'Ouverture
PS 270 Johann Dekalb
PS 287 Bailey K. Ashford
Science Skills Center High School

Council Member Cornegy

Frederick Douglass Academy IV
K534
Madiba Prep Middle School
MS 267 Math, Science and Technology
MS 394K
PS 003 The Bedford Village
PS 021 Crispus Attucks
PS 023 Carter C. Woodson
PS 025 Eubie Blake School
PS 059 William Floyd
PS 081 Thaddeus Stevens
PS 138K Annex
PS 256 Benjamin Banneker
PS 262 El Hajj Malik Shabazz
PS 297 Abraham Stockton
PS 308 Clara Cardwell
PS 335 Granville T. Woods
PS 368
School of Business, Finance and Entrepreneurship

Council Member Deutsch

Brighton Beach ALC
IS 098 Bay Academy
IS 381
James Madison High School
JHS 014 Shell Bank
Leon M. Goldstein High School
PS 153 Homecrest
PS 195 Manhattan Beach
PS 199 Frederick Wachtel
PS 206 Joseph F. Lamb
PS 209 Margaret Mead
PS 209 Margaret Mead (1)
PS 225 The Eileen E. Zaglin
PS 253
PS 771K
William E. Grady Career and Technical
Education High School

Council Member Espinal

Brooklyn Environmental Exploration School
Brooklyn Lab School
Brooklyn Landmark Elementary School
Bushwick Community High School
Cypress Hills Collegiate Preparatory School
Evergreen Middle School for Urban Exploration
PS 045 Horace E. Greene
PS 086 The Irvington
PS 106 Edward Everett Hale
PS 108 Sal Abbracciamento
PS 116 Elizabeth L. Farrell
PS 158 Warwick
PS 214 Michael Friedsam
PS 345 Patrolman Robert Bold
PS 377 Alejandrina B. Degautier

Council Member Eugene

JHS 062 The Ditmas
MS 061 Gladstone H. Atwell
PS 006
PS 092 Adrian Hegeman
PS 217 Colonel David Marcus School
PS 397 Foster-Laurie
PS 399 Stanley Eugene Clark
The School for Human Rights

Council Member Gentile

IS 030 Mary White Ovington
JHS 259 William McKinley
New Utrecht High School
PS 102 The Bayview
PS 131 Brooklyn
PS 163 Bath Beach
PS 170 Lexington
PS 229 Dyker
PS/IS 104 The Fort Hamilton School

Council Member Greenfield

Edward R. Murrow High School
IS 096 Seth Low
JHS 223 The Montauk
PS 048 Mapelton
PS 099 Isaac Asimov
PS 192 Brooklyn
PS 231K
PS 238 Anne Sullivan

Council Member Lander

Magnet School for Science and Technology
MS 266 Park Place Community Middle School
PS 039 Henry Bristow
PS 179 Kensington

Council Member Levin

Automotive High School
Cobble Hill School of America
Downtown Brooklyn Young Adults Borough Center
George Westinghouse Career
JHS 117 Francis Scott Key
Juan Morel Campos Secondary School
PS 008 Robert Fulton
PS 016 Leonard Dunkly
PS 034 Oliver H. Perry
PS 157 Benjamin Franklin
PS 307 Daniel Hale Williams
Satellite West Middle School
The Math and Science Exploratory School (8)
Westinghouse Evening High School
Williamsburg High School for Architecture and Design

Council Member Maisel

Academy for Conservation and the Environment
International High School
IS 068 Isaac Bildersee
JHS 078 Roy H. Mann
JHS 278 Marine Park
PS 114 Ryder Elementary
PS 115 Daniel Mucatel School
PS 194 Raoul Wallenberg
PS 203 Floyd Bennett
PS 207 Elizabeth G. Leary
PS 236 Mill Basin
PS 272 Curtis Estabrook
PS 279 Herman Schreiber
The Science and Medicine Middle School

Council Member Mealy

Brownsville Academy High School
IS 392
Mot Hall Bridges Academy
MS of Marketing and Legal Studies
PS 005 Dr. Ronald McNair
PS 040 George W. Carver
PS 091 The Albany Ave. School
PS 135 Sheldon A. Brookner
PS 150 Christopher
PS 156 Waverly
PS 178 St. Clair McKelway
PS 189 Lincoln Terrace
PS 189 The Bilingual Center
PS 219 Kennedy-King
PS 235 Lenox
PS/IS 323
Teachers Preparatory High 15K697
Teachers Preparatory High School

Council Member Menchaca

IS 136 Charles O Dewey
IS 187
JHS 088 Peter Rouget
JHS 220 John J. Pershing
PAVE Academy Charter School
PS 001 The Bergen
PS 015 Patrick F. Daly
PS 069 Vincent D. Grippo School
PS 094 The Henry Longfellow
South Brooklyn Community High School
Sunset Park High School

Council Member Reynoso

Conselyea Preparatory School
EBC High School For Public Service
IS 347 School of Humanities
IS 349 Math, Science and Technology
PS 084 Jose Dediego
PS 120 Carlos Tapia
PS 132 Conselya
PS 147 Issac Remsen
The School for Legal Studies

Council Member Treyger

Abraham Lincoln HS
Brooklyn Studio Secondary School
IS 228 David A. Boody
IS 281 Joseph B. Cavallaro
Liberation Diploma Plus High School
Mark Twain IS 239 for the Gifted and Talented
PS 090 Edna Cohen School
PS 095 The Gravesend
PS 097 The Highlawn
PS 128 Bensonhurst
PS 186 Dr. Irving A. Gladstone
PS 205 Clarion
PS 212 Lady Deborah Moody
PS 215 Morris H. Weiss
PS 247 Brooklyn
PS 288 The Shirley Tanyhill
PS 329 Surfside
Rachel Carson High School for Coastal Studies

Council Member Williams

Andries Hudde
Andries Hudde (2)
IS 285 Meyer Levin
Midwood High School
Midwood High School (3)
PS 119 Amersfort
PS 181 Brooklyn
PS 244 Richard R. Green
PS 269 Nostrand
PS 326
PS 361
School of Science and Technology

Brooklyn Community Based Organizations & Government Agencies

Brooklyn South Borough Field Support Center
CAMBA
Catherine Laboure special education program
Department of Health
Department Of Earlychildhood
DOE Diocese
FIAU
Good Shepherd Services
Home Based Crisis Intervention Program
Interboro
Interfaith Medical Center - Center for Mental Health
JASA
Kings County Hospital HHC
Mobile Crisis
New York City Department of Health & Mental Hygiene
New York Police Department
PDHP
Program for development of human potential
Puerto Rican Family Institute, Inc.
Visiting Nurse Services of NY

Samaritans provided suicide awareness and prevention education professional development workshops and presentations Citywide in FY16 to 2,218 individuals, including 1,470 guidance counselors, social workers, counselors, social workers, psychologists, alcohol and substance abuse counselors and others psychologists, alcohol and substance abuse counselors and others working in 587 NYC DOE schools and 88 community-based and government agencies, 714 students and 34 members of the public.

With discretionary funding from Council Member Gibson in the Bronx, staff from 127 schools and 15 CBO's attended a Bronx **TALKING SUICIDE... and how to listen and communicate more effectively with those in distress**, a Citywide **Children and Suicide: Beyond the Taboos** led by an international expert on early childhood suicide, Dr. Brian Mishara as well as on-site presentations in schools.

School Name

Council Member Cabrera

Creston Academy
East Fordham Academy for the Arts
IS X303 Leadership and Community Service
PS 033 Timothy Dwight
PS 279 Captain Manuel Rivera, Jr.
PS 306
The Marie Curie High School for Medicine, Nursing,
and Health Professionals

Council Member Cohen

Bronx Early College Academy
Bronx High School of Science
JHS 080 The Mosholu Parkway
Jonas Bronck Academy
Kingsbridge International High School
PS 007 Kingsbridge
PS 008 Issac Varian
PS 024 Spuyten Duyvil
PS 037 Multiple Intelligence School
PS 056 Norwood Heights
Riverdale/Kingsbridge Academy

Council Member Gibson

Bronx Career and College Preparatory High School
Bronx Collegiate Academy (3)
Bronx High School for Medical Science
Bronx Latin
Bronx School for Law, Government, and Justice
Eximius College Preparatory
Family School
Grant Avenue Elementary School
IS 219 New Venture School
KAPPA - Knowledge and Power Preperatory Academy)
Morris Academy for Collaborative Studies
MS 301 Paul L. Dunbar (3)
New Directions Secondary School

School Name

New Millennium Business Academy
PS 035 Franz Siegel
PS 053 Basheer Quisim
PS 063 Author's Academy
PS 088 S. Silverstein Little Sparrow School
PS 110 Theodore Schoenfeld
PS 114 Luis Llorens Torres School
PS 132 Garret A. Morgan
PS 146 Edward Collins
PS/IS 218 R. Hernandez Dual Language
Science and Technology Academy: A Mott Hall School
Science and Technology Academy: A Mott Hall School (1)
Sheridan Academy for Young Leaders
South Bronx Classical Charter School III

Council Member King

Cornerstone Academy for Social Action
Cornerstone Academy for Social Action Middle School
IS 181 Pablo Casals
MS 180 Daniel Hale Williams
One World Middle School at Edenwald
PS 041 Gun Hill Road
PS 068 Bronx
PS 076 The Bennington School
PS 103 Hector Fontanez
PS 111 Seton Falls
PS 153 Hellen Keller
PS 176
PS 178 Dr. Selman Waxman
PS 723
The Forward School

Speaker Mark-Viverito

PS 018 John Peter Zenger
PS 025 Bilingual School
PS 043 Jonas Bronck
PS 049 Willis Avenue

School Name**Council Member Palma**

Archimedes Academy for Math, Science, and Technology
Blueprint Middle School
Bronx Guild
HS of World Culture
JHS 125 Henry Hudson
JHS 127 The Castle Hill
JHS 131 Albert Einstein
Millennium Art Academy
Monroe Academy for Visual Arts and Design
PS 036 Unionport
PS 100 Issac Clason
PS 138 Samuel Randall
The Cinema School
The School for Inquiry and Social Justice

Council Member Rodriguez

Bronx Engineering and Technology Academy
Bronx School of Law And Finance
Bronx Theatre High School

Council Member Salamanca Jr.

Academy for Scholarship and Entrepreneurship
Academy of Public Relations
Bronx Arena High School
Bronx Community High School
Bronx Leadership Academy II High School
Bronx Studio School for Writers
Crotona Academy High School
Fairmont Neighborhood School
Hyde Leadership Charter School
IS 190
JHS 098 Hermanridder
Passages Academy
PS 001 Courtlandt School
PS 006 West Farms
PS 093 Albert G. Oliver
PS 130 Abram Stevens Hewitt
PS 140 Eagle
PS 152 Evergreen
PS 157 Grove Hill
PS 211
School for Tourism and Hospitality
School of Performing Arts
The Hunts Point School
Urban Assembly School for Careers in Sports
Vida Bogart School for All Children

Council Member Torres

Bronx Academy for Software Engineering
IS 254
JHS 118 William W. Niles
MS 391
PS 028 Mount Hope

School Name

PS 032 Belmont
PS 046 Edgar Allan Poe
PS 057 Crescent
PS 058
PS 163 Arthur A. Schomburg

Council Member Vacca

Bronx Park Middle School
Bronx River High School
Mott Hall Community School
Peace and Diversity Academy
Pelham Gardens Middle School
Pelham Preparatory Academy
PS 014 Senator John Calandra
PS 083 Donald Hertz
PS 089 Bronx
Westchester Square Academy

Bronx Community Based Organizations & Government Agencies

Bronx Field Support Center
BronxWorks
Claremont Neighnorhood Center
Department of Education
Inner City Gun Violence Prevention
James J. Peters Medical Center (VA)
Legal Services NYC - Bronx
Luica Francis VA Hospital
Neighborhood Association for Inter-Cultural Affairs, Inc.
NYC H&H - Lincoln
Pelham Family Center
Phipps Neighborhoods Town & Country
The Jewish Board - Bronx
Unique People Services
Veterans ADM Hospital
VIP Community Services

Samaritans provided suicide awareness and prevention education professional development workshops and presentations Citywide in FY16 to 2,218 individuals, including 1,470 guidance counselors, social workers, counselors, social workers, psychologists, alcohol and substance abuse counselors and others psychologists, alcohol and substance abuse counselors and others working in 587 NYC DOE schools and 88 community-based and government agencies, 714 students and 34 members of the public.

With discretionary funding from Council Members Garodnick, Kallos and Mendez in Manhattan, staff from 93 schools and 21 CBO's attended a Manhattan **TALKING SUICIDE... and how to listen and communicate more effectively with those in distress**, a Citywide **Children and Suicide: Beyond the Taboos** led by an international expert on early childhood suicide, Dr. Brian Mishara as well as on-site presentations in schools.

School Name

Council Member Chin

Battery Park City School
Henry Street School for International Studies
Lower East Side Prep High School
Murry Bergtraum High School
PS 042 Benjamin Altman
PS 137 John L. Bernstein
PS 140 Nathan Straus
PS 89
Spruce Street School
Stuyvesant High School
University Neighborhood Middle School
University Settlement (1)

Distric 9

Bread and Roses Integrated Arts
Frederick Douglass Academy
Frederick Douglass Academy III
Kappa IV
PS 030 Hernandez/Hughes
PS 149 Sojourner Truth
PS 154 Harriet Tubman
PS 200 James McCune Smith
PS 208 Alain L. Locke
PS 79M Horan School
The Opportunity Charter School
The Storefront Academy Harlem
The Urban Assembly School for Global Commerce
Thurgood Marshall Academy

Council Member Johnson

City as School High School
Forsyth Satellite Academy
Harvest Collegiate High School
HS of Fashion Industries
HS of Hospitality Management

School Name

Manhattan Bridges High School
NYC Lab School for Collaborative Studies
NYC Museum School
PS 111 Adolph S. Ochs
Urban Assembly Gateway School for Technology
Urban Assembly School for Emergency Management
Urban Assembly School of Design and Construction

Council Member Garodnick

Art and Design High School
Hunter College Campus School (1)
PS 006 Lillie D. Blake
The River School

Council Member Kallos

Richard R. Green High School
Urban Academy Laboratory High School

Council Member Levine

Mott Hall II
New Design Middle School
PS 004 Duke Ellington
PS 028 Wright Brothers
PS 153 Adam Clayton Powell
PS 192 Jacob H. Schiff
Twenty-First Century Academy for Community Leadership

Speaker Mark-Viverito

Esperanza Preparatory Academy
MS 224 Manhattan East School for Arts and Academics
PS 096 Joseph Lanzetta
PS 108 Assmblyman Angelo Del Toro Educational Complex
PS 155 William Paca
River East Elementary
Tag Young Scholars

Council Member Mendez

Bard High School Early College
East Side Community High School
Gramercy Arts High School
Murray Hill Academy
PS 034 Franklin D. Roosevelt
Technology, Arts, and Science
The 47 American Sign Language
The East Village Community School

Council Member Rodriguez

Gregorio Luperon High School
HS for Health Career
HS for International Business and Finance
HS for Law and Public Service
HS for Media and Communications
Inwood Early College for Health & Information Technologies
IS 218 Salome Ukena
JHS 052 Inwood
MS 319 Maria Teresa
MS 322
MS 326 Writers Today and Leadership
MS 328 Manhattan Middle School
Professor Juan Bosch Public School
PS 098 Shorac Kappock
PS 115 Alexander Humboldt
PS 128 Audubon
PS 132 Juan Pablo Duarte
PS 173
PS 187 Hudson Cliffs
Washington Heights Academy

Council Member Rosenthal

Beacon High School
Metropolitan Montessori School
MS 256 Academic and Athletic Excellence
PS 009 Sarah Anderson
PS 087 William Sherman
PS 191 Amsterdam
PS 452

Manhattan Community Based Organizations & Government Agencies

Achievement Initiative
Association to Benefit Children
Bank Street College of Education: Liberty Leads Program
Camilla Hsiung, MS
CarinKind, a heart of Alzheimer's caregiving
Children's Aid Society
Chinese-American Planning Council
Early Childhood Development and Education
Good Old Lower East Side
Grand Street Settlement
Greenhope services for women
Human Resources Administration/Domestic Violence
Liberty Leads
New York - Presbyteria CAN
New York Police Department
New York Presbyterian/Columbia University Medical
Center School Based Health Clinic
Northern Manhattan Improvement Corporation
NYS Courts
One Stop at JASA
University Settlement
Waterside Tenants Association

Samaritans provided suicide awareness and prevention education professional development workshops and presentations Citywide in FY16 to 2,218 individuals, including 1,470 guidance counselors, social workers, counselors, social workers, psychologists, alcohol and substance abuse counselors and others psychologists, alcohol and substance abuse counselors and others working in 587 NYC DOE schools and 88 community-based and government agencies, 714 students and 34 members of the public.

With discretionary funding from Council Members Crowley, Koo, Vallone, Weprin and Wills in Queens staff from 120 schools and 11 CBO's attended a Queens **TALKING SUICIDE... and how to listen and communicate more effectively with those in distress**, a Citywide **Children and Suicide: Beyond the Taboos** led by an international expert on early childhood suicide, Dr. Brian Mishara as well as on-site presentations in schools.

School Name

Council Member Constantinides

ALC - IS 126
Immaculate Conception School
Long Island City High School
PS 085 Judge Charles Vallone
PS 151 Mary D. Carter
Young Women's Leadership School

Council Member Crowley

Grover Cleveland High School
IS 119 The Glendale
IS 119 The Glendale (4)
IS 73 The Frank Sansivieri Intermediate School
Maspeth High School (4)
PS 113 Isaac Chauncey
PS 58 School of Heroes

Council Member Dromm

Fire Fighter Christopher A Santora School
IS 230
Pan American International High School
PS 069 Jackson Heights
PS 089 Elmhurst
PS 102 Bayview

Council Member Ferreras

East Elmhurst Community School
IS 061 Leonardo Davinci
PS 143 Louis Armstrong
PS 330

Council Member Grodenchik

Irwin Altman Middle School 17
Jean Nuzzi Intermediate School
JHS 074 Nathaniel Hawthorne (2)
Martin Van Buren High School
PS 033 Edward M. Funk

School Name

PS 178 Holliswood
PS 224Q
PS 993Q
PS/IS 208
PS/IS 295Q (4)
Queens High School of Teaching (2)
The Bellaire School

Council Member Koo

Flushing High School
Flushing International High School
Flushing YABC
IS 237
IS 237 (2)
JHS 189 Daniel Carter Beard
NYC DOE Linden Academy, ALC
NYC DOE Linden Academy, ALC (1)
PS 022 Thomas Jefferson
PS 120 Queens
PS 163 Flushing Heights
Queens High School for Language Studies
Veritas Academy

Council Member Koslowitz

PS 051
Forest Hills High School
JHS 190 Russell Sage
PS 139 Rego Park
PS 144 Col Jeromus Remsen

Council Member Lancman

ALC - Jamaica Academy
High School for Community Leadership
Hillcrest High School
IS 250 The Robert F. Kennedy Community Middle School
JHS 216 George J. Ryan
JHS 217 Roberta Van Wyck

John Bowne High School
PS 082 Hammond
PS 086 Queens
PS 154 Queens
Queens Alternate Learning Center
The Queens School of Inquiry
Thomas A. Edison Career and Technical Education HS

Council Member Miller

Benjamin Franklin High School for Finance and
Information Technology
Business, Computer Applications, and
Entrepreneurship High School
Eagle Academy for Young Men III
Humanities and Arts Magnet High School
Institute for Health Professions at Cambria Heights
IS 192 The Linden
IS 238 Susan B Anthony
Law, Government and Community Service High School
Mathematics, Science Research & Technology
Magnet High School
PS 034 John Harvard
PS 095 Eastwood
PS 118 Lorraine Hansberry
PS 147 Ronald McNair

Council Member Reynoso

IS 077
Robert E. Peary School

Council Member Richards

PS 043
Academy of Medical Technology
ALC@MS53
Excelsior Preparatory High School
Goldie Maple Academy
IS 053 Brian Piccolo
PS 156 Laurelton
Queens Preparatory Academy

Council Member Ulrich

JHS 210 Elizabeth Blackwell
PS 097 Forest Park
PS 207 Rockwood Park
Rockaway Park High School for Environmental Sustainability

Council Member Vallone

Alley Pond Environmental Center (1)
IS 025 Adrien Block (4)
JHS 185 Edward Bleeker
PS 032 State Street
PS 098 The Douglaston School
PS 184 Flushing Manor

Council Member Van Bramer

ALC @ Wagner HS
Frank Sinatra School of the Arts
Queens Vocational and Technical High School
Robert F. Wagner Jr. Secondary School
The Riverview School

Council Member Wills

August Martin High School
August Martin HS
JHS 072 Catherine and Count Basie
JHS 226 Virgil I. Grissom
PS 030 Queens
PS 045 Clarence Witherspoon
PS 055 Maure
PS 062 Chester Park (2)
PS 108 Captain Vincent G. Fowler
PS 123
PS 155
PS 160 Walter Francis Bishop
PS 223 Lyndon B. Johnson
Queens School for Careerds
Richmond Hill High School
Voyages Preparatory High School - South Queens

Queens Community Based Organizations & Government Agencies

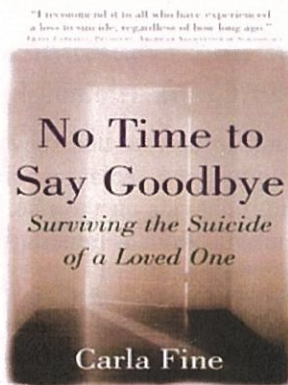
Charles B Wang Community Health Center
Claire Heureuse Community Center, Inc.
Committee on Special Education 3 NYCDOE
Helping Hands for the Disabled
New York Department of Health and Mental Hygiene
NYC Department of Education Family Welcome
Center Office of Student Enrollment
Office of Student Enrollment Family Welcome
Center Sutphin Boulevard
PDHP
Saratoga Family Inn
SQPA - Families in Need
The Child Center of New York



Samaritans Organization Highlights 2016

Children & Suicide: Beyond the Taboo, with Brian Mishara (professional development)

Children as young as 5 are aware of suicide, and the understanding of suicide that they develop as children and their ways of coping with hardships can greatly influence their self-harming and suicidal behavior in later life. Responding to requests from *NYC Department of Education* guidance staff, Samaritans collaborated with international suicide prevention expert, Brian Mishara, *Director, the Centre for Research and Intervention on Suicide, Université du Québec*, in presenting a professional development workshop for 200 health providers that addressed the concepts children have about death and dying, the challenges about talking with children about suicide and the myths and misconceptions tied to children's self-destructive and suicidal behavior.



Carla Fine, Surviving the Suicide of a Loved One

Samaritans was pleased to host our good friend and groundbreaking author, Carla Fine, "No Time to Say Goodbye," for an evening of readings, reflections and conversation about surviving suicide loss.

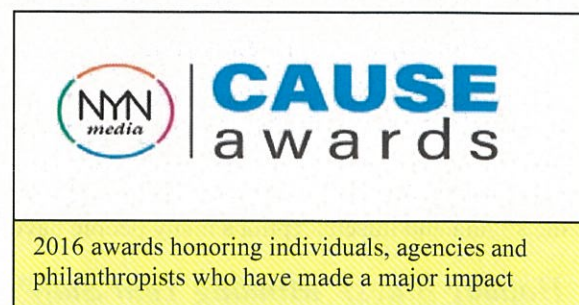
Combining her own deeply personal experience of the loss of her husband with the stories and perspectives of others who have also survived suicide loss, Carla provided insight, warmth, humor and a path to healing for those who have been touched by suicide directly, their families and friends, colleagues, caregivers and health providers, addressing many of the challenges and obstacles faced when coping with suicide loss.

NYC's 24-Hour Suicide Prevention Hotline Responds to 80,000 Calls (direct service)

NYC's only completely confidential 24-hour suicide hotline is often the first place people call when they are in distress or are concerned about a friend, loved one or client. Last year, our 100 volunteers from the city's culturally diverse communities answered 80,000 hotline calls from people in distress, who were depressed or suicidal, donating 30,000 hours (equal to \$750,000) in free labor. Samaritans hotline continues to provide a *safe* alternative to clinical services that those who are *underserved*, resistant to seeking help or wish to maintain their confidentiality and are often hesitant to access. In contract with the *NYC Department of Health*.

Samaritans Honored to Receive 2016 NYN Cause Award in Mental Health

Samaritans Suicide Prevention Center was honored to be selected out of all the NYC nonprofits doing important work to receive the first-ever *New York Nonprofit Media's 2016 CAUSE Award* in mental/behavioral health for making a "major impact on the most pressing human services issues of NYC."



Free Suicide Prevention Guide Provides Resources to Save Lives (public education)

A comprehensive primer on responding to and providing care, support and treatment to individuals who are in distress, experiencing trauma and/or feeling suicidal, the free Guide (available in hard copy or on-line) provides warning signs, risk and protective factors; linkages to free training, webinars, research, resources, safety planning and assessment tools; and referrals to NYC-based text, chat and support services; with phone numbers and websites for community and emergency resources. samaritansnyc.org/nyc-resource-guide

Friends of Samaritans Gather to Fight Stigma and Make 4th Annual Walkathon a Huge Success

Wanting to bring attention to the stigma attached to suicide and mental illness, *Friends of Samaritans*, current and former volunteers, board members, staff, survivors of suicide loss and members of the public gathered on a beautiful September Day and helped to raise \$60,000 in needed funds in support of Samaritans hotline, public education and survivor programs making our 4th Annual *Be A Friend Walkathon*, held at Hudson River Park, a tremendous success.



Advancing Suicide Prevention on an International, National & Local Level (advocacy)

Expanding its advocacy role from a national and local level to include international, Samaritans has accepted the request of *Befrienders Worldwide* (which works with Samaritans centers in 40 countries) to represent their crisis centers in North America. Samaritans continues to be an active member of the *National Council for Suicide Prevention* (working with SAMHSA, NIMH, other government bodies helping shape national suicide prevention policies), NYS Office of Mental Health (advancing effective statewide prevention and education goals) and NYC Council (expanding awareness, access to resources and the needs of at-risk populations).



Talking Suicide! Listen and Communicate Effectively with People in Crisis (training)

Many health professionals admit in private that they are uncomfortable talking to people who are feeling suicidal. With violence and self-harming behavior on the rise, the need to enhance caregiver communications is imperative.

Based on 33 years responding to 1.3 million hotline calls, Samaritans presented its *Talking Suicide* professional development workshop to over 1,000 NYC guidance counselors, social workers, psychologists and other health professionals working in schools and community settings.

NYC Department of Education 'Continuity of Care' Program (community resources)

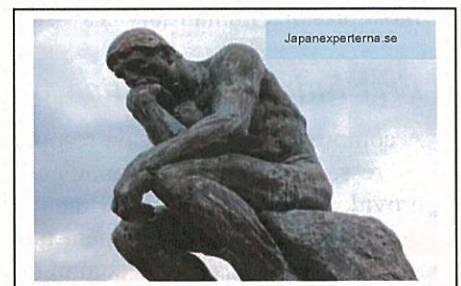
Samaritans suicide prevention and awareness community resource program was designed to increase students, parents, teachers, guidance counselors, social workers and other DOE student support personnel's ability to access needed mental health and substance abuse services, as required by the Excellence in Mental Health Act (2014). The program consisted of: workshops, training programs and professional development conferences attended by 2,218 students, parents, guidance counselors, social workers, patient advocates and consumers from 89 non-profit organizations and government agencies and 608 schools covering all five boroughs.

Survivors of Suicide Loss Support Program Continues to Thrive (direct service)

The interest in Samaritans *Safe Place* support groups for those who have lost a loved one to suicide continues to thrive, with 278 attendees participating in our monthly meetings last year, 72 of them attending for the first time. Samaritans support groups and other survivor programs provide emotional support and a safe, confidential environment for people who are not only grieving the loss of someone they loved, but are also often dealing with the stigma and misconceptions many people have about suicide. Go to: samaritansnyc.org for more information.

Holiday Blues? Minding Your Staff's Mental Health is Good Business (*New York Business Journal*)

The often misguided belief of many corporate executives that--since their employees already have access to health care--they do not need to be concerned about their mental health, which is estimated to cost businesses 200 million workdays each year at a cost of \$17 billion. Samaritans Director Alan Ross' examined this issue and provided guidelines and suggestions for business execs on how to address it.





OFFICE OF THE PRESIDENT
BOROUGH OF MANHATTAN
THE CITY OF NEW YORK

1 Centre Street, 18th floor, New York, NY 10007
(212) 669-8300 p (212) 669-4306 f

431 West 125th Street, New York, NY 10027
(212) 531-1609 p (212) 531-4615 f

www.manhattanbp.nyc.gov

Gale A. Brewer, Borough President

November 10, 2015

Mr. Alan Ross
Executive Director
The Samaritans of New York
PO Box 1259
Madison Square Station
New York, NY 10159

Dear Mr. Ross: *Alan*

I write to acknowledge my appreciation for the high quality of services provided by your program to the people of New York, particularly in the areas of suicide prevention, and preparedness. Advocates, teachers and administrators from around the city call to tell me what an incredible resource the Samaritans provide. I would like to express my full gratitude and support for your efforts to expand such services to schools across the city.

I am in awe that since 1981 The Samaritans have supported those at risk of suicide or who have suffered the loss of loved ones. The Samaritans have also raised public awareness about mental health and suicide city-wide, done on-site training at hundreds of schools, and helped create a learning environment where students' mental and emotional needs are a priority. In conjunction with City Council, you also held New York City's first-ever public hearing on suicide.

Your efforts mark a watershed in public awareness about a once-taboo subject, and are helping stimulate a long-overdue conversation about the role of mental health in socio-emotional and academic success – a focus of Samaritans for over 24 years. On behalf of our city schools, parents, and students, thank you for all you do in each of these critical efforts, and I look forward to our continued partnership.

Sincerely,

Gale A. Brewer
Gale A. Brewer



**Department of Veterans Affairs
Hudson Valley Health Care System
PO Box 100
Montrose, New York 10548**

Castle Point Campus
Castle Point, NY 12511

FDR Campus
Route 9A
Montrose, NY 10548

April 29, 2016

Alan Ross, Executive Director
The Samaritans of New York
Box 1259 Madison Square Station
New York, NY 10159

Dear Mr. Ross:

I am writing this letter in support of the work performed by the Samaritans of NYC. In my current role as a Suicide Prevention Coordinator at the VA Hudson Valley Health Care System, I include the phone number for the Samaritans Suicide Prevention hotline on each and every one of my Suicide Safety Plans, as an adjunct to the National Veterans Crisis Hotline phone number that we provide on a routine basis.

Unlike calls to other crisis hotlines, at Samaritans all calls are confidential and anonymous. This allows veterans an option to choose between disclosing their identity and location to the VA with the risk that police may be called to initiate a rescue, or allowing the veteran an opportunity to choose a time and place for this needed care. Both systems have their merits and drawbacks. However, offering veterans choices undoubtedly increases the possibility that a veteran contemplating suicide will reach out to one of these crisis lines and almost certainly guarantees fewer suicides in the long run!

At the VA Hudson Valley Health Care System, we regard the Samaritans of NYC as an important ally for safeguarding and promoting the mental health of Veterans in our catchment area of Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster and Westchester counties and beyond. As a former volunteer (2000-2001), the training experiences I received were some of the most comprehensive, thoughtful,

and effective as any I received in my graduate training on my path to becoming a clinical psychologist. As a result, I have deep admiration and respect for the contribution of Samaritans volunteers and look forward to a long and productive collaboration in service of our nation's veterans.

Sincerely,

Jonathan Weinstein, Ph.D.
Suicide Prevention Coordinator
VA Hudson Valley Health Care Service
2094 Albany Post Road
Montrose, NY 10548
914-737-4400 x2892

NYBG/125

Good Afternoon, my name is Angel Santana and I have the honor of serving as Director of Government Relations at The New York Botanical Garden (NYBG). I would first like to thank Chairman Corey Johnson and members of the City Council's Committee on Health for affording me the opportunity to submit testimony highlighting some of the work being done by the NYBG and our sister cultural institutions - with budget support from the Mayor and City Council - to address health disparities in the Bronx.

Today, I will highlight 3 of our programs as representative of the types of health outreach that funding for New York City's Department of Cultural Affairs is able to leverage with the private sector. Our work, along with that of our colleagues, is made possible by the City's long-term funding to cultural institutions, a commitment that has resulted in innovative and exciting partnerships throughout the five boroughs.

For over 100 years, NYBG has been a leader in garden-based education for teachers and children from the Bronx and throughout the New York metro region. Given the alarming problems of childhood obesity and hunger in the Bronx, the Garden's role in teaching New Yorkers about growing fresh fruits and vegetables and how to cook, eat, and benefit from the many health benefits of plants is now more critical than ever.

Historically, the borough of the Bronx has suffered from persistent negative health outcomes including childhood obesity, high asthma rates, diabetes etc. Last year, the County Health Rankings & Roadmaps report by the Robert Wood Johnson Foundation in coordination with the University of Wisconsin Population Health Institute once again ranked the Bronx last out of New York's 62 counties in health outcomes. While a number of factors have contributed to the health disparities faced by many Bronxites, the lack of healthy food options, access to green space, and food insecurity have played a key role in preventing many in the Borough from living a healthier lifestyle. NYBG's role as an anchor institution in the Bronx has allowed for long-term partnerships with local schools and community groups to tackle many of the aforementioned health issues faced by the community we serve, notably:

- Since 1988, the **Bronx Green-Up** program of NYBG has helped Bronx residents transform over 200 vacant, abandoned lots into vibrant green spaces – the community gardens of the Bronx. Gardens like these are places where people of many ages and cultures build new relationships and work together to improve their communities. Gardeners grow fruits, vegetables, and flowers and share them with their neighbors or reach the larger community through neighborhood farmers markets. NYBG staff provide workshops and certificate programs, technical assistance, and a robust composting and education program through a partnership with Department of Sanitation.
- **Edible Academy:** NYBG, the City Council, and the Mayor are building the Edible Academy, an innovative campus and classrooms that will operate year-round and double NYBG's capacity to instruct even more students from 50,000 to 100,000 and develop more robust curriculum for nutrition education. This capital project is anticipated to be completed in the spring of 2018.
- **NYBG's Ethnobotany program** led by Dr. Ina Vandebroek seeks to connect ethnobotany, floristics and community health by researching medicinal plant usage amongst Caribbean immigrants in New York City and its health care implications. Currently, Dr. Vandebroek's work with Dominican owned *Botanicas* in New York City has led to the development of training activities with healthcare providers in New York City to help establish a better dialogue and

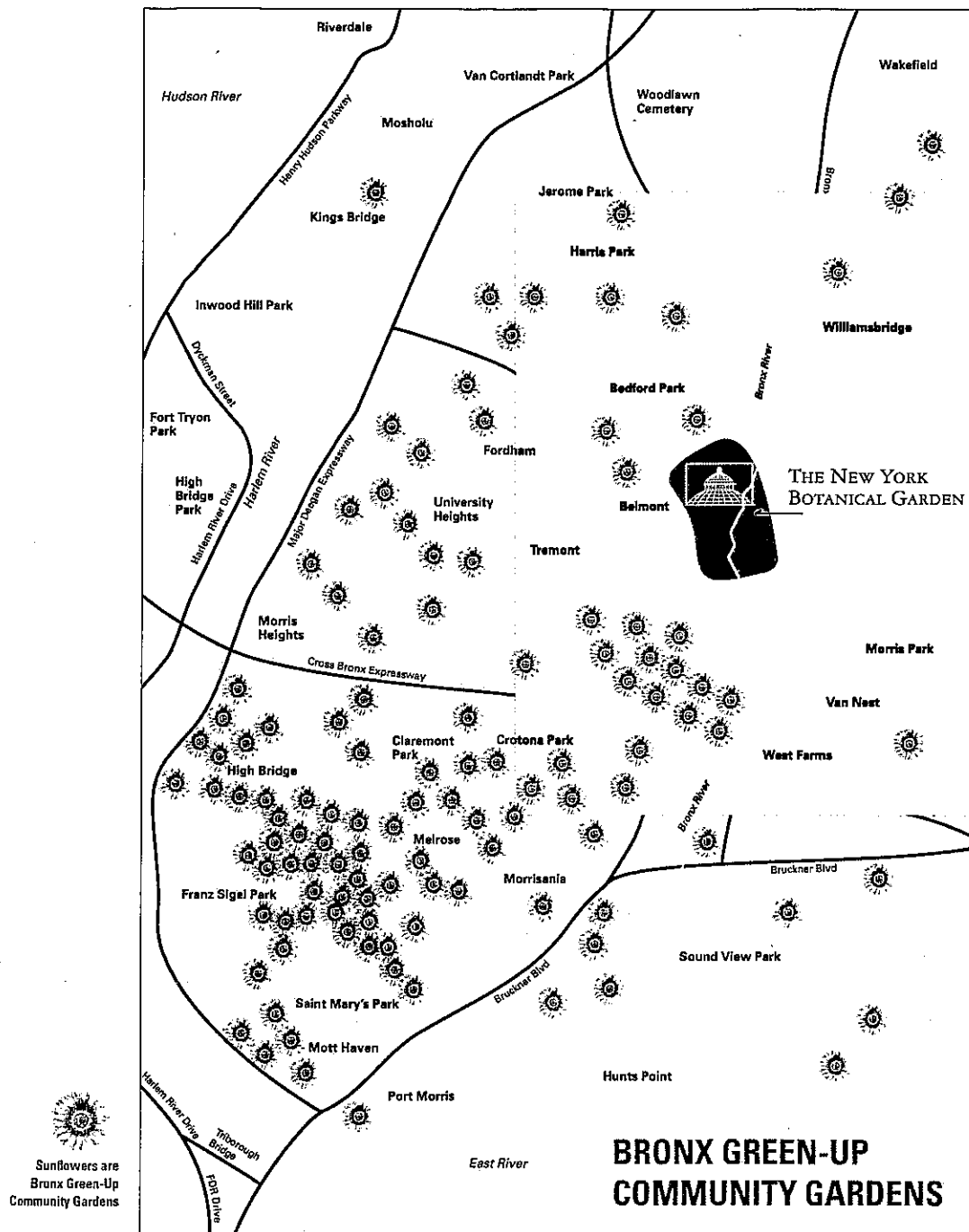
trusted relationship between providers and their Caribbean patients, and promote culturally sensitive healthcare for underserved communities.

Museums, arts groups, botanical gardens, zoos, and more — New York City's cultural organizations are the lifeblood of the city. Serving communities across the five boroughs, they've been an inspiration to generations of New Yorkers from artists and musicians to scientists and historians. They create jobs, attract visitors to local businesses, and provide educational opportunities, while enriching our lives, our health and our well-being. They make New York City great and strong. . . Operating support from the City helps make it all possible. But more can be done.

Therefore, as part of a large and dynamic coalition, I am respectfully requesting that the City Council work with the Mayor to add \$40 million for the Department of Cultural Affairs in the FY 2018 adopted budget. While NYBG's programs are just one snapshot of one institution's work. All communities, students, seniors, and local businesses will benefit from an increased investment of \$40 million in New York City's 1,500+ cultural organizations in all five boroughs.

Thank you for your time.

Angel Santana
Director of Government Relations
The New York Botanical Garden, asantana@nybg.org, 718.817.8694



211th Street Community Garden
811 Family and Friends Association
A. Badillo Community Rosa Garden
Aguada Garden
Anderson Avenue Community Garden
Angie-Lee Gonzalez Garden
Anthony Avenue Garden
Aqueduct Homeowners Association
Bainbridge Avenue Garden
Belmont Little Farmers
Bettes Rose Garden
Bjssel Gardens
Botanical Square Community Garden
Bronx Community and Cultural Garden
Bronx River Garden
Brook Park
Bruckner Mott Haven Garden
Bryant Hill Garden
Bush Community Garden

C.S. 57 - Garden of Hope
C.S. 6 - West Farms Garden
Cabo Rojo
Carpenter Avenue Community Garden
Cauldwell Youth Garden
Claremont Homeowners Community Garden
Claremont Neighborhood Garden
Clinton Avenue Community Garden
Community Improvement Garden (C.E.S. 134)
Community Rock Garden Park
Concerned Tenants of Daly Avenue Garden
Courtlandt Community Garden
Creston Jungle
Dalia Group Community Garden
Davidson Avenue Community Garden
Davidson Avenue Green Thumb
Demera Santiago Garden
Dred Scott Bird Sanctuary
Drew Gardens

Edith Community Garden
El Batey Boricano
El Batey de Dona Provi
El Flamboyant Community Garden
El Girasol Community Garden
El Jardin de la Familia
Enchanted Garden
Family Group Garden
Fordham Bedford Lotbusters
Franklin Memorial Garden
Garden of Eden
Garden of Happiness
Garden of Life
Garden of Youth
Genesis Park Community Garden
Glover Street Community Garden
Grant Avenue Block Association Garden
Harding Park Beautification Project
Havemeyer Garden Association
Hispanos Unidos
Isla Verde
Jackson Forest Garden
Jacqueline Denise Davis

Jane Addams Vocational High School
Jardin de las Rosas
Jennings Street Community Garden
Jim Mackey Garden
Krystal Garden
La Isla
Las Casitas Community Garden
Latinos Unidos
Learning Tree
Little Green Garden
Manor Avenue Seniors Garden
Mapes Avenue Garden
Mildred T. Rhodebeck Garden/
Garden of Eden
Miracle Garden
Model T Senior Citizen Garden
Morris Avenue Park
Mosaic Center Success Garden
Neighborhood Advisory Committee Community Garden
New Hoe Avenue Garden
P.S. 112 Community Garden
P.S. 306/M.S. 306

P.S. 42 Little Claremont Park
P.S. 59
Padre Plaza Community Garden
Palmas Del Caribe Community Garden
Paradise on Earth
P.S. 32 Belmont Garden
Randall Community Garden
Rincon Criollo Cultural Center
Risse Street Community Garden
River Garden
Roberto Clemente Community Garden
Rock Site
Schomberg Satellite Academy High School
Sheridan Manor Community Garden
Sherman Avenue Community Garden
South Bronx High School
Star Gardens of M.S. 201
Stevenson Campus Community Garden
Sunflower Garden Association

Taqwa Community Farm
Theodore Roosevelt High School/
Belmont
Townsend Community Garden
Tremont Community Garden
United We Stand Garden
University Heights High School
Victory Garden
Vogue Community Garden
Volky Flower Garden
Walton High School/Kingsbridge
Wanauqua Garden
Waterfront Garden
William Rainey Garden
Wishing Well Garden
Woodycrest Community Garden
Woodycrest Memorial Garden

TESTIMONY

New York City Council Fiscal Year 2018 Preliminary Budget

**Committee on Mental Health, Developmental Disability, Alcoholism,
Substance Abuse and Disability Services**

Committee Chair – Andrew Cohen

March 20th, 2017



Shaun D. Francois I – President

Donald Nesbit – Executive Vice President

Maria DeLaura – 2nd Vice President

David Keye – Secretary - Treasurer

Local 372 –Board of Education Employees

District Council 372 – AFSCME, AFL-CIO

125 Barclay Street, 6th Floor

New York, NY 10007

Local372.org

Mental Health, Developmental Disability, Alcoholism, Substance Abuse and Disability Services Committee Chairman Andrew Cohen, and distinguished members of the committee, it is the honor of Local 372 - NYC Board of Education Employees, District Council 37 - AFSCME to present testimony on behalf of the 300 Substance Abuse Prevention and Intervention Specialists (SAPIS) we represent, under the leadership of President Shaun D. Francois I.

SAPIS counselors provide essential substance abuse prevention and intervention services for the 1.2 million children in New York City (all students K-12, as well as special education), including drug and gang intervention, peer mediation, and mental health services. SAPIS counselors help youth become learning-ready as they assist students and families through the use of coordinated and collaborative proven methodologies and interventions to cope with the myriad of societal pressures which detract from healthy academic, social, and home environments. SAPIS counselors are responsible for monitoring, offering resources and services to support students when they find themselves struggling and/or struggling to improve.

Today, 300 SAPIS serve 1.2 million NYC children. That is a distribution of 4,000 students per SAPIS worker; or one SAPIS per every five schools. With those numbers, there are simply not enough SAPIS counselors to address the needs of all of these children and their families. And despite the important work our existing SAPIS perform, it shows – many have pointed out what they see as a correlative link between the laying off of over 200 SAPIS since 2006 and a steep rise in drug use in our youth. According to the Center for Disease Control, heroin use among 18-25 year olds has doubled in the past decade. According to a 2013 Youth Risk Behavior Survey from the NYC Department of Health and Mental Hygiene, 8.0% of NYC public high school students in grades 9-12 reported lifetime use of an illicit drug (cocaine, heroin, ecstasy, or methamphetamine). In addition to drinking and drug use, prescription drug abuse among high school youth is also on the rise.

Our message is a simple one: the more support and resources we can offer to our at-risk youth, the more productive they will be in their future. That is why we have set a goal to reach one SAPIS in every school. We also support efforts in the state legislature to help meet this goal, such as legislation sponsored by Assemblyman Michael Miller and Senator James Sanders, Jr., as well as funding support for SAPIS proposed in the Assembly's one-house budget.

We recognize there are never enough resources to address all of the many issues and necessary services required throughout the City; and that tough decisions must be made over how to allocate limited funds.

In each of the previous two fiscal years, Mayor de Blasio's office allocated \$2 million in the city budget to fund SAPIS in Renewal Schools. The \$2 million in additional funding was used to add

a net 25 new SAPIS counselors who assist in reaching an additional 8,500 children in need. If this allocation is not renewed, it will result in the loss of these positions and the progress we made. Today we ask for your continued commitment to our students by providing an additional \$2 million in next year's budget for SAPIS. The \$2 million additional appropriation is vital source of funding to the positive trajectory of adding 25 additional SAPIS counselors to the workforce. Last year's appropriation paved the way for SAPIS Counselors to reach an additional 8,500 children in need. The more resources we can offer to our youth, the more opportunity they will have for a productive future. We ask for your support to help continue providing life-saving services to students and their families.

We recognize there are not enough resources to address every issue and service required throughout the city, and that tough decisions must be made over how to allocate limited funds. As the Mayor is proposing spending upwards of \$38 million a year in response to the growing scourge of drug addiction and overdose, we ask you consider that SAPIS counselors' role is to work with our youth to prevent them from succumbing to these devastating pressures in the first place. Investing in SAPIS counselors will save money by preventing drug use in our youth, thus reducing addictions and overdoses in the long run.

More importantly, every one of our youth – each a unique individual with his or her own hopes, dreams, and aspirations – who might succumb to bullying, peer pressure, drinking and drugs, or gang affiliation absent the support of a SAPIS counselor, but with SAPIS support can instead strive forward to chase those aspirations, is priceless. We at Local 372 thank you for the opportunity to provide this testimony.



70 West 36th Street, Fifth Floor, New York, NY 10018

Tel: 212-967-0322 Fax: 212-967-0792

www.unhny.org

**Testimony of United Neighborhood Houses
Before the New York City Council
Committee on Mental Health, Developmental Disability, Alcoholism, Substance Abuse and
Disability Services**

**Presented by Nora Moran, LMSW, Policy Analyst
Preliminary Budget Hearing
March 20, 2017**

**Honorable Andrew Cohen, Chair, Committee on Mental Health, Developmental Disability,
Alcoholism, Substance Abuse and Disability Services**

Thank you for convening today's hearing. My name is Nora Moran, and I am here on behalf of United Neighborhood Houses (UNH), New York City's federation of settlement houses and community centers. Rooted in the history and values of the settlement house movement begun over 100 years ago, UNH promotes and strengthens the neighborhood-based, multi-service approach to improving the lives of New Yorkers in need and the communities in which they live.

UNH's membership includes 37 organizations employing 10,000 people at over 600 sites across the five boroughs to provide high quality services and activities to over 500,000 New Yorkers each year. UNH member agencies provide a broad range of services in a neighborhood-based, multi-generational setting ranging from early childhood education, afterschool, adult literacy, homelessness prevention, services for older adults, and mental health and substance abuse services. Settlement house staff understand the importance of providing holistic services within a neighborhood, and this includes mental health services. Collectively, settlement houses provide mental health services to approximately 19,000 individuals annually, and substance abuse services to approximately 33,000 individuals annually.

This testimony will focus on preserving community-based behavioral health services in New York City, including by strengthening the human services sector. UNH's recommendations include increasing funding for all human services contracts by 12%, restoring the City Council's Mental Health Initiatives, and assisting community based organizations as they continue to transition their systems under Medicaid Redesign, specifically as they prepare for value based payments.

Increase funding for all human services contracts by 12% in Fiscal Year 2018.

UNH has worked closely with the City Council for years to ensure the stability of core services for New York City's neighborhoods. This year, we need to work with you both to preserve critical services and to stabilize the nonprofit organizations that provide these services. For that reason, our first and most urgent request is that the City Council include in its budget response a request that the Mayor fund an across-the-board increase of 12% for all human services contracts, used for the area of greatest need within a contract. This increase would help organizations with Department of Health and Mental Hygiene contracts to better serve their clients by allowing for greater financial stability.

The underfunding of city contracts is forcing nonprofits to make difficult decisions about whether to apply for funding and offer services that neighborhoods need. For example, this recently had implications regarding mental health programs procured by DOHMH in 2016. DOHMH, via Public Health Solutions, released three RFPs for mental health programs: the Early Childhood Mental Health Network, Decreasing Depression and Increasing Social Connectedness Among NYC's Older Adults, and Recreational & Socialization Services for Individuals with Autism Spectrum Disorders (ASD). None of these RFPs were funded at a price point high enough to be viable for settlement houses and other community based organizations with well-established credibility in their communities and records of successful delivery of these services. As a result, many of these organizations did not apply, and others were forced to rely on City Council funding to fill the funding gaps in these contracts.

The ultimate goal of this budget request is to stabilize the human services sector so that organizations can continue to serve communities and remain fiscally healthy and solvent.

Restore the City Council's Mental Health Initiatives, and increase funding for organizations providing behavioral health services to immigrant populations.

UNH is a long-standing supporter of three Council-funded mental health initiatives: Geriatric Mental Health, Children Under Five, and Autism Awareness. The City Council was ahead of the curve when it had the foresight to bring mental health services to vulnerable populations in their own communities, and we are thankful for the Council's leadership in supporting this programming. Year after year, these initiatives provide crucial funding to non-profit providers to offer mental health services in non-clinical community settings, including community centers, senior centers, and early childhood programs. We applaud the City Council for continuing its support of these initiatives last year, after the new programs procured with baselined funds proposed changing scopes of services and were structured in a way that prevented existing providers from applying.

We also thank the City Council for enhancing the Autism Awareness Initiative by \$1.3 million in FY2017. This enhancement allowed for new organizations to receive funding to support high quality programming for individuals with Autism Spectrum Disorders, and preserved capacity within existing provider organizations.

UNH recommends that the City Council restore these three mental health initiatives, to ensure the continuity of services for the children, youth, and older adults served by these programs:

Restore the Geriatric Mental Health Initiative (GMHI) at \$1,827,000.

The GMHI program currently supports mental health services within 21 organizations, embedding individual and group counseling within senior centers, Naturally Occurring Retirement Communities, and food pantries, while also supporting in-home services for homebound elderly. In Fiscal Year 2015, GMHI providers served approximately 10,000 individuals, creating a strong network of services that reaches a significant number of older adults in New York City.

GMHI increases the capacity of community-based organizations serving older adults to identify mental health needs, provide immediate mental health interventions, and refer clients for further psychiatric treatment when necessary. By placing mental health services in “non-clinical” settings, GMHI providers are able to bring mental health services to places in the community where older adults gather, and can adapt their programs to meet the needs of the community they serve without stigma.

Staff within these programs are often the best resource for detecting mental health issues in seniors, as they work with seniors on a regular, even daily, basis. Symptoms of depression and anxiety in older adults frequently coincide with other illnesses and life events like mourning the loss of loved ones and coping with the onset of disabilities, causing these mental health issues to go undetected.¹ Increasing awareness and access to services within the places that seniors frequently attend ensures that people are receiving depression and substance abuse screenings, and are being connected to appropriate interventions as needed.

Restore the Children Under Five (CU5) Initiative at \$1,002,000.

The Children Under 5 program currently supports five organizations providing mental health services in Article clinics, early childhood classrooms, in the home, and in legal settings when families are involved with court proceedings.

CU5 provides early childhood mental health services to infants, toddlers and pre-school aged children and their families, allowing organizations to work with children to develop psychosocial and educational skills, as well as to cope with trauma resulting from witnessing or experiencing domestic violence, sexual abuse, or physical or mental abuse. Using a trauma-informed lens, providers are able to provide screening and clinical evaluation, individual, small group, and child-parent psychotherapy, and consultation to pediatricians, teachers, and child welfare workers. For years, CU5 providers have been testing new interventions and models of providing care, greatly contributing to the City’s understanding of the most appropriate ways to treat this population. Their expertise is essential in both working on complex cases and in putting forth new treatment options.

Restore the Autism Awareness Initiative at \$3,315,386.

The Autism Awareness Initiative supports programming for children with Autism Spectrum Disorder (ASD), at 33 organizations across New York City. Services offered include after-school programs, social skill development, and weekend programming, as well as supportive services for families and caregivers of children with ASD.

¹ National Alliance on Mental Illness. *Depression in Older Persons Fact Sheet*. 2009.

These programs often fill crucial gaps in services, such as extended support beyond State-funded Office of People with Developmental Disabilities Services (OPWDD), weekend and summer programming, and supports for young adults who have aged out of the OPWDD system but still need support around vocational and life-skills coaching. Autism Awareness providers also offer family support and coaching, so that parents of children with ASD have resources to care for their children, and supports for themselves to prevent against caregiver burnout.

Support community-based behavioral health services for immigrants by expanding the Mental Health for Vulnerable Populations Initiative.

UNH urges the City Council to consider the behavioral health needs of immigrants, particularly undocumented immigrants, in light of recent policy changes from the federal government around immigration. Executive orders around refugees and travel, increasing threats of mass deportation, and questions around the future of the Deferred Action for Childhood Arrivals (DACA) program have caused immigrant families to feel targeted and unsafe in their neighborhoods. UNH member organizations are reporting increased levels of anxiety from families with mixed immigration statuses, as well as concerns around lapses in sobriety. These concerns often become apparent during legal clinics or know your rights trainings.

In FY2017, the Mental Health for Vulnerable Populations Initiative was funded at \$1,093,000, with each provider receiving an average of approximately \$91,000. Increasing this initiative by \$1 million could help to expand the City's reach to behavioral health services to immigrants, and could support approximately 10 new organizations. Targeting these funds to organizations with trusted reputations in the community is of utmost importance.

Support community based behavioral health providers to prepare for New York State's impending shift to a value based payment reimbursement methodology.

Restore the Medicaid Redesign Initiative at \$500,000.

New York State is undergoing extensive changes to how Medicaid pays providers for mental health and substance abuse treatment. As of October 2015, behavioral health services are now covered under a managed care model instead of a fee-for-service model. This has resulted in high administrative and financial burdens for Article 31 and substance use services providers. New billing and compliance requirements, as well as an emphasis on tracking program outcomes, have placed demands on staff time, and there is little financial support for these providers to plan and prepare for the managed care transition. Current Medicaid reimbursement rates do not cover the total cost of providing mental health services, and these rates are only guaranteed until 2018.² At that point, providers will have to negotiate contracts, including reimbursement rates, with individual managed care organizations, creating uncertainty about the future financial viability of their programs.

Additionally, the State is moving toward a value based payment model, where services will be reimbursed only if certain outcomes are met. This will lead to providers taking on increased risk,

² The proposed New York State Fiscal Year 2017-18 Executive Budget proposes changes to Ambulatory Patient Group rates, to extend them through 2020 while requiring that Medicaid payments move toward a value based reimbursement model. The outcome of that proposal is still pending at the time of this hearing.

and will require them to track outcomes and partner with managed care organizations and other service networks in new ways. A recent report from the Independent Budget Office on ThriveNYC highlights that the City's overall behavioral health network is facing substantial change, and that social service organizations will likely have to adapt substantial resources to adapt.³

The City should provide funding for community-based mental health providers as they plan to transition their programs to operate in a managed care environment that prioritizes value-based payments. In the FY 2016 budget, the City Council began a Medicaid Redesign Initiative to support providers in this transition. Planning grants for community-based organizations are scarce, making this initiative a key source of funding. UNH urges the Council to continue this initiative to provide support to more community-based organizations.

Thank you for your time. I can be reached for questions at nmoran@unhny.org or at 917-484-9322.

³ New York City Independent Budget Office. *Fiscal Brief: Detailing the Expansion of Behavioral Health Services: City-Funded Spending Drives New & Growing Programs Under the Mayor's ThriveNYC Initiative*. February 2017.

NYC Public Committee Hearing on Mental Health, Developmental Disability,
Alcoholism, Substance Abuse and Disability Services

20 March, 2017

Testimony Offered by:
Sara Van Eerde
NYU Silver School of Social Work
Master's Student
saravaneerde@gmail.com

thriveNYC

invest resource

Hello everyone. Thank you so much to the members of this committee for the opportunity to deliver testimony today.

My name is Sara Van Eerde, and I am currently a graduate student at the NYU Silver School of Social Work. Last year, I worked at the Ali Forney Center, which is a non-profit agency dedicated to serving LGBTQ homeless youth who are 16 to 24 years old. ~~The agency offers services such as shelter, food, mental and physical health services, STD testing, drug prevention, and harm reduction information.~~ I worked closely with many ~~young individuals~~ ^{teens} who struggled with substance use, and I saw how helpless they often felt. Because of this experience, along with a great deal of research on harm reduction and drug treatment strategies, I am incredibly passionate about the issues taken up by the committee today.

First, I would like to support the ~~generous~~ ⁱⁿ investments made by the Mayor's budget ~~in that~~ ^{order to} address the heroin and Opioid addiction crisis in New York. Investing \$200 million dollars in funding to support prevention, treatment and recovery programs is a great start, and I ask the committee to support the proposed investments ~~in Substance Use Disorder services.~~

Now I am here today, because the support for these initiatives is essential, but it is not enough. ~~I am here to represent those who believe in public health, harm reduction techniques, drug treatment, and recovery for our vulnerable community members.~~ In this budget session, action must be taken to support the growing need to tackle heroin and opioid addiction in New York City. We must invest in more harm reduction approaches, such as needle exchange sites, and look to implement Supervised Injection sites. We need to think critically about what is and is not working in NYC in our policy efforts to tackle the increasing problem of overdoses and public injection drug use.

* which are legally sanctioned spaces where people can inject a pre-obtained drug under the supervision of a trained staff member.

In 2016, the Health Department released information stating that heroin overdose deaths ~~rates~~ have increased by 158% from 2010-2015, ~~and heroin was involved in 59% of drug overdose deaths in 2015.~~

Furthermore, a recent survey by the Injection Drug Users Health Alliance shows that public injectors are twice as likely to have overdosed in the past year compared to injection drug users who do not inject publicly. They are also twice as likely to not have a consistent supply of new, sterile injection equipment and ^{are} more than 4 times more likely to re-use injection equipment, which can lead to permanent vein damage, and HIV, viral hepatitis, and other infectious disease transmission. ~~Public injection drug use is an increasing problem in New York City and we must confront the reality that nearly half of people who participate in needle exchanges then have to inject in a public place.~~

→ meaning they inject in a public place like an alley

SIF'S
this is where we

need to start, b/c it is a devoting our energy to harm reduction strategies that works.

to make clean needles

So, now, I encourage you to look towards other states that have realized the potential of ^{supervised injection sites} ~~this funding~~ and are working hard to implement ^{their} ~~a harm reduction strategy~~. As of February 1st, 2017, Seattle has approved the nation's first Supervised Injection Facility. This approval of two sites, one in Seattle and one in King County, comes in response to an increase in heroin and prescription opioid overdose deaths that are occurring in the region. Another step forward for the nation is happening in Maryland, where three bills were recently introduced by delegate Dan Marhaim with a harm reduction focus. The first bill, HB 515, would require certain acute care hospitals to have an addiction counselor available 24/7. The second bill, HB 488, would decriminalize certain low-level, nonviolent drug offenses, and the third bill, HB 519, would allow for the creation of "safe consumption programs," to provide spaces where people can use drugs in a safe, controlled environment. With this new legislation, Maryland joins a growing number of cities and states that have begun to shift their attention away from punitive drug-related measures and towards harm reduction ~~and decriminalization~~.

~~And the research on the positive effects of these sites is nothing new. Going back to the 1990's, one study of over 1,600 injection drug users in New York city found that those who didn't use a syringe exchange were more than three times as likely to contract H.I.V.~~
Supervised Injection sites would also help mitigate the fatal overdose epidemics that are associated with prescription opioid misuse. These sanctioned spaces have been proven to reduce HIV and hepatitis transmission risks, overdose deaths, public injections, discarded syringes, and public disorder ~~associated with illicit drug use~~. Not only are Supervised Injection sites already in 66 cities around the world ^{and} in ten countries, they are proven to be working. As demonstrated by international research, there is significant evidence supporting the many health and social benefits for these sites. For example, the site in Vancouver, Canada has been proven to save lives with no negative impact on the public safety and health objectives.

As you may already be aware, the primary reason these sites are so controversial is because many believe it would endorse drug use. But, all you have to do to quell these fears is look to the research. Look at the objective scientific studies that have been done over and over again to show that, in reality, the restriction of access to ^{these sites} ~~supervised and controlled health care settings where people can safely inject drugs~~ only leads to an increase in problems such as the spread of infection, fatal overdose, the unsafe discarding of needles, vein damage, and the use of drugs in public places.

Of course, supervised Injection Facilities must be operated within a framework that offers treatment and rehabilitation services as well as social reintegration measures, and the

primary objective of the sites must be to mitigate drug abuse through treatment, information, rehabilitation and reintegration measures, without condoning drug abuse or encouraging drug trafficking. ^{And these spaces do also offer sterile injection equipment, harm reduction information & health care, treatment}

Now, I know that when it comes to policy, we also have to talk money. From a financial perspective, New York City, which has been "the epicenter of injection drug use in the U.S. for decades," could drastically benefit from ~~the financial implications~~ ^{of} a harm reduction approach. For example, syringe exchange programs have been found to be ^{so} effective and far cheaper than the lifetime cost of treating H.I.V., hepatitis B or hepatitis C, that they save taxpayers money. A cost-effectiveness analysis done in 2014 found that a dollar invested in syringe exchange programs saves at least six dollars in avoided costs associated with H.I.V. alone. ~~Therefore, investment in safe needle exchange sites and supervised injection sites today will save countless people and dollars tomorrow.~~

In New York City, there is already a campaign known as "SIF NYC: For a Safe and Healthy City" that involves a growing coalition of public health groups, criminal justice reform groups, and New York City residents, to fight for support for Supervised Injection Facilities. However, this campaign needs support on a policy level.

As I mentioned in the beginning of my testimony, many of the kids at the Ali Forney Center felt alone and unsupported in their struggle with drug use. Often times, their addiction was their only friend. I talked to teenager after teenager who had to inject drugs in an alleyway...alone, scared, and in the dark, without a clean needle or a medical assistant preventing them from overdose. And these kids aren't bad kids. They want to get better. They want to go to treatment ~~and get off their drugs.~~ But, in order for them to get there, they need our support and they need a realistic harm reduction approach. Sites like needle exchanges and safe injection spaces create an opportunity for people to get the care ^{they} need and provide a transition into treatment, ~~for people in the community.~~

The discussion on drug strategy today must include harm reduction initiatives and treatment in their funding plans, and it is up to the public to show a strong support for an increase in needle exchange programs and an implementation of safe injection supervision in the United States. Therefore, I ask the City Council to include ~~safe~~ ^{safe these sites} ~~needle exchanges~~ in their budget response and I am calling on New York City ~~and~~ ^{and} New York State government to take all necessary steps to authorize and establish supervised injection facilities.

Thank you so much for hearing my testimony today.

President
Jeffrey A. Schoenfeld*

Chair of the Board
Robert S. Kapito*

Chief Executive Officer
Eric S. Goldstein

Treasurer
Jeffrey M. Stern*

General Chairs
2017 Campaign
Alisa F. Levin*
David L. Moore*

Chair, UJA Women
Judith K. Baum*

Chair, Planned Giving
& Endowments
Gary Claar*

General Planning Chair
Jonathan Plutzik*

Commission Chairs
Brett H. Barth*
Amy A.B. Bressman*
Karen S.W. Friedman*
Roni Rubenstein*

Executive Committee
at Large
Jacob W. Dofft*
Martine Fleishman*
Jonathon C. Held*
Barry A. Kaplan*
Suzanne F. Peck*

Special Advisor to
the President
Aaron L. Zises*

Executive Vice President
Financial Resource
Development
Mark D. Medin

Chief Planning Officer
for Community Planning
and Agency Resources
Deborah A. Joselow

Senior Vice President
External Relations
and Public Policy
Louisa Chafee

Chief Financial Officer
Irvin A. Rosenthal

General Counsel
Chief Compliance
Officer & Secretary
Ellen R. Zimmerman

Chief Marketing Officer
Graham Cannon

Executive Vice Presidents
Emeriti
Ernest W. Michel**
Stephen D. Solender
John S. Ruskay



130 East 59th Street, New York, NY 10022
Tel: 212.980.1000 • Fax: 212.888.7538
www.ujafedny.org

TESTIMONY: UJA-FEDERATION OF NEW YORK

NYC Council, Committee on Mental Health, Developmental Disability, Alcoholism, Substance Abuse and Disability Services Preliminary Budget Hearing FY 2018

Honorable Julissa Ferreras-Copeland, Chair, Committee on Finance
Honorable Andrew Cohen, Chair, Committee on Mental Health

Submitted by:

Ariel Savransky, UJA-Federation of New York

March 20, 2017

Honorary Officers: Meshulam Riklis • Laurence A. Tisch** **Life Trustees:** Robert H. Arnow • Lawrence B. Buttenwieser • William Kahn** • Irving Schneider** • Stephen Shalom • Daniel S. Shapiro** • Samuel J. Silberman**
Sanford Solender** • Wilma S. Tisch • James L. Weinberg** • Elaine K. Winik **Life Benefactors:** The Belfer, Ruben & Saltz Families • Jack E. & Zella B. Butler Foundation • The Fisher Family • Leo & Julia Forcheimer Foundation
Ruth & David Gottesman • Kathryn & Alan** C. Greenberg • The Jesselson Family • Leni & Peter W. May • Paul & Irma Milstein Foundation • Seymour & Vivian Milstein Family • Henry & Lucy Moses Fund, Inc. • Samuel I. Newhouse
Foundation, Inc. • Milton Petrie** • The William Rosenwald Family • Jack & Lewis** Rudin • Family of S.H. & Helen R. Scheuer • Helen** & Irving** Schneider & Family • Marvin & Donna Schwartz • Joseph and Marcy** Sirulnick
The Sheldon H. Solow Foundation • The Tisch Family • Wachtell, Lipton, Rosen & Katz • Weil, Gotshal & Manges LLP • The Weiler Arnow Family • The Harry & Jeanette Weinberg Foundation **Past Chairs, Board of Directors:** Morton
A. Kornreich** • Joseph Gurwin** • Irwin Hochberg • Larry A. Silverstein • Judith Stern Peck • Larry Zicklin • Morris W. Offit • Susan K. Stern • Jerry W. Levin • Alisa R. Doctoroff • Linda Mirels • **Past Presidents:** Peggy Tishman**
David G. Sacks** • Alan S. Jaffe • Louise B. Greilsheimer • James S. Tisch • Larry Zicklin • Morris W. Offit • John M. Shapiro • Jerry W. Levin • Alisa R. Doctoroff

*Executive Committee member **Deceased

TESTIMONY: UJA-FEDERATION OF NEW YORK

NYC Council, Committee on Mental Health, Developmental Disability, Alcoholism, Substance Abuse and Disability Services Preliminary Budget Hearing FY 2018

Good afternoon Chairperson Cohen and members of the Committee on Mental Health, Developmental Disability, Alcoholism, Substance Abuse and Disability Services. My name is Ariel Savransky and I am an Advocacy and Policy Advisor at UJA-Federation of New York. Established 100 years ago, UJA-Federation of New York is one of the nation's largest local philanthropies. Central to our mission is to care for those in need. We identify and meet the needs of New Yorkers of all backgrounds and Jews everywhere. We connect people to their communities and respond to crises in New York, Israel and around the world. We support nearly 100 nonprofit organizations serving those that are most vulnerable and in need of programs and services.

On behalf of UJA, our network of nonprofit partners and those we serve, thank you for the opportunity to testify on the importance of maintaining and expanding mental health and disability services. Before discussing the specific needs of our mental health and disability service providers, I would like to discuss the need to adequately compensate the work of nonprofits funded through city contracts.

Employees working on the frontlines require resources to meet the needs of the diverse and complex populations they interact with daily. The minimal investment in human service contracts in recent years has impacted our agencies in many ways, including their ability to upgrade their technology and computer systems they use to serve and treat members of the NYC community. The rising costs of health insurance have been placed on employees while retirement plan options have been reduced. Most importantly, contracts for services are being funded at such low levels that providers are being forced to either not apply or return underfunded contracts because they are not receiving the financial resources needed to properly serve individuals. We, along with our partners throughout the human services sector, **request a flexible 12-percent increase to all human services contracts** to address existing OTPS costs, appropriately raise salaries, and support reasonable fringe benefits to ease the unstable financial situation many of our nonprofits have been placed in due to past underfunded contracts.

Restore the City Council's Mental Health initiatives Geriatric Mental Health, Children Under Five and Autism Awareness.

UJA has been a strong supporter of three Council-funded mental health initiatives: Geriatric Mental Health, Children Under Five, and Autism Awareness. For years, these programs have used non-traditional, community-based settings to help identify individuals and families in need and offer developmentally appropriate services and support. We thank the Council for continuing its support of these programs, after the new programs procured with baselined funds both changed the services offered as well as prevented existing providers from applying.

The Children Under Five initiative has provided screening and psychotherapy as well as mental health consultation services to numerous pediatricians, preschool teachers and child welfare workers. It represents the only dedicated funding in New York City providing this level and type of expertise to young children and families in need. We therefore **urge the City Council to restore the Children Under Five Initiative at \$1.002 million** to continue to support the five organizations providing these mental health services across the city.

The Autism Awareness Initiative supports programming for children with Autism Spectrum Disorder (ASD) including after-school programs, social skill development and weekend programming. The program often fills gaps in the services provided by the Office of People with Developmental Disabilities (OPWDD) as well as provides programming for those who have aged out of the OPWDD system. One of our providers in Manhattan receives funding through the Autism Awareness Initiative, and uses the funding to produce a program called "Transitions" which "is a social program for teens and young adults with a variety of special needs, including those on the autism spectrum with a high potential for independence and those with varied communication and

learning differences.” We thank the City Council for enhancing the Autism Awareness Initiative by \$1.3 million in FY2017 allowing our providers to reach members of the autism community through programs like Transitions. This enhancement also allowed for new organizations to receive funding to support other high quality programming for individuals with Autism Spectrum Disorders, and preserved capacity within existing provider organizations. We therefore urge the Council to **continue to fund this initiative at \$3.315 million** this fiscal year.

The Geriatric Mental Health Initiative supports mental health services at a variety of community based settings including senior centers, Naturally Occurring Retirement Communities (NORCs), and food pantries as well as services for homebound elderly. This initiative helps to eliminate the stigma of seeking help for mental health issues that older adults experience by bringing services to community settings, ensuring that these individuals receive the necessary supports. We therefore urge the Council to **restore the Geriatric Mental Health Initiative at \$1.827 million** so that seniors can continue to receive these services.

Support community based behavioral health providers to prepare for the shift to a value based payment reimbursement methodology

New York State is currently undergoing multiple Medicaid reforms. The transition from a fee-for-service model of reimbursement for mental health and substance abuse treatment services to a managed care model has placed additional workforce and administrative burden on a workforce already facing significant challenges. The rates at which services are reimbursed currently will not cover total cost of providing these services, and these rates are only guaranteed until 2018, after which providers will have to negotiate contracts with managed care organizations, creating further uncertainty. Furthermore, the transition to a value based payment model, in which services are reimbursed using an outcome-based model, will force providers to not only take on increased risk with uncertain reimbursement, but also to begin to track outcomes and create new partnerships with managed care organizations, requiring substantial new investment of resources. In FY16, the City Council began a Medicaid Redesign Initiative to support providers in their efforts associated with this transition. We urge the Council to **continue their support of this initiative and restore the \$500,000 as well as expand this initiative to provide support to more community-based organizations.**

UJA-Federation of New York respectfully urges your consideration and support of these vital programs that assist New York City’s most vulnerable and neediest youth and the organizations that serve them. Thank you for your time and if you have any questions please contact me at savranskya@ujafedny.org or 212-836-1360.

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Vivienne Laborde

Address: _____

I represent: Lincoln Center

Address: 70 Lincoln Center Plaza

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Beverly Johnson

Address: _____

I represent: peer's

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: Nov. 20th 2017

(PLEASE PRINT)

Name: Sara Van Eerde

Address: 510 East 82nd street, NY

I represent: _____

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. 18 Res. No. _____

☐ in favor ☐ in opposition

Date: 3/20/2017

(PLEASE PRINT)

Name: Jason Caranto

Address: 306 Lenox Ave, 3rd floor

I represent: Harken United

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Oxiris

Address: First Deputy Commissioner

I represent: UIMDOHMA

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Nora Moran

Address: _____

I represent: United Neighborhood Houses

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Sandy Rozza

Address: Deputy Commissioner

I represent: DOMINI

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Dipal Shah

Address: _____

I represent: The Center for Court Innovation

Address: 8520 8th Ave New York, NY 10018

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Ariel Savran sky

Address: _____

I represent: UJA-Federation

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 3/20/2017

(PLEASE PRINT)

Name: Fiodhna O'GRADY

Address: 197 VERNON AVE. Bklyn

I represent: SAMARITANS Suicide Prevention Center

Address: 61 Gramercy Park No. NYC

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Jason Lippman

Address: _____

I represent: The Coalition for Behavioral Health

Address: 123 William St. Suite 1901 NY, NY 10038

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Rodger Murray

Address: 125 Barclay St

I represent: Local 372 - DC37

Address: _____

THE COUNCIL THE CITY OF NEW YORK

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____
☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Dr. Mary Bassett

Address: Commissioner,

I represent: DOHMH

Address: _____

Please complete this card and return to the Sergeant-at-Arms

THE COUNCIL THE CITY OF NEW YORK

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____
☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Dr. Gary Belkin

Address: Asst. Deputy Commissioner, DOHMH

I represent: Commissioner

Address: D

Please complete this card and return to the Sergeant-at-Arms