

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

of the

COMMITTEE ON CHILDREN AND YOUTH

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Tuesday, June 17, 2025

Start: 1:17 P.M.

Recess: 4:21 P.M.

HELD AT: 250 Broadway - Committee Room,
14th Floor

B E F O R E: Hon. Althea Stevens, Chair

COUNCIL MEMBERS:

Jumaane Williams, *Public Advocate*

Rita C. Joseph

Linda Lee

Julie Menin

Chi A. Ossé

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COMMITTEE ON CHILDREN AND YOUTH

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Integration, and Evaluation at the New York City
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COMMITTEE ON CHILDREN AND YOUTH

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Omar Jackson,
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SERGEANT MARINO: This is a microphone check for the Committee on Children and Youth, located in the 14th Floor Hearing Room, recorded by James Marino on June 17, 2025.

SERGEANT AT ARMS ONE: Good afternoon
(BACKGROUND NOISE)...

SERGEANT AT ARMS TWO: Quiet down!

SERGEANT AT ARMS ONE: Good afternoon, and welcome to the New York City Council hearing for the Committee on Children and Youth. At this time, we ask that you silence all electronic devices. Please note that no one is to approach the dais at any time. I repeat, no one is to approach the dais.

If you would like to sign up for in-person testimony or have any other questions throughout the hearing, please see one of the Sergeant at Arms.

Chair Stevens, we are ready to begin.

CHAIRPERSON STEVENS: [GAVEL] Everyone, relax. Good morning, well, no, it's not good morning - Good afternoon. Good afternoon, everyone. I'm Council Member Althea Stevens, Chair of the New York City Council Committee on Children and Youth. I want to thank everyone for joining us today for the Oversight Hearing: *Evaluating the Crisis Management*

System Under DYCD, the cornerstone of New York City's gun violence prevention program.

We also look forward to hearing the feedback from the Administration on the following bill that will be directed to DYCD: Introduction 992, sponsored by Council Member Narcisse, in relation to requiring the Office for Neighborhood Safety And The Prevention of Gun Violence to provide notice and report on the Crisis Management System.

We will also have a number of other bills to hear today, which are also related to ACS (Administration for Children's Services), but we will still be addressing them today:

Introduction 1077, sponsored by Council Member Joseph, in relation to the provision of luggage to foster care children.

Introduction 1245, sponsored by Speaker Adams, in relation to additional information collected and reported about foster care youth.

Introduction 1246, sponsored by Speaker Adrienne E. Adams, in relation to establishing a program to support youth aging out of the foster care system.

And Introduction 1259, Council Member Lee, in relation to requiring basic training in behavioral support strategies for certain staff at juvenile detention facilities.

The last four bills, as I mentioned, address ACS, although they are not here. However, we will be hearing from those sponsors in a little while to discuss their bills.

I would like to begin by saying that I am extremely excited about this hearing. The Crisis Management System has been something that I, Council Member Williams, and Council Member Riley, since we got here, have really tried to be instrumental in supporting this work. But we have faced some hiccups, so today we will hopefully be able to get some answers around some of the questions that we have had. I have traveled across the country, speaking and collaborating with other CMS groups to see how other cities have adapted the Crisis Management System and tailored it to make sense for their city's specific needs. I am interested in hearing how we plan to do that here, because the current model seems like something we need to ensure is specific to New York City.

This hearing is particularly timely as June is Gun Violence Awareness Month, a period of reflection and action and recommitment to addressing the tragic and preventable loss of life that gun violence continues to cause across our city and our country. We know that building truly safe communities demands long-term investments in our neighborhoods and credible messengers in coordination with public health-based systematic strategies. CMS was created with that vision in mind.

Since its launch in 2012, it has grown into a network of more than 20 community-based providers across 41 service areas. Working to interrupt cycles of violence and connect individuals to services that promote stability and safety, these organizations operate on the front line, deploy credible messengers, people who live in the community they serve, and who often have firsthand experience with the justice system or violence. Their lived experience, coupled with targeted programming, allows CMS providers to build trust, mediate conflict, and connect young people and adults alike to jobs, counseling, mental health, educational supports, and other services that promote long-term stability.

Today's hearing also arrives at a pivotal point in the structure and future of CMS. In 2022, Adams' administration shifted over oversight of the amount from the Mayor's Office of Criminal Justice to the Department of Youth and Community Development. The stated goal was to align CMS and DYCD expertise in youth development and community engagement. The transition prompted several important questions from both providers and advocates. It is clear that consistent coordination between agencies and our providers, who receive timely payments, technical assistance, and the support they need to sustain and scale their work, is necessary. Has the shift led to measurable improvements or challenges? How are programs administered? How is data collected and shared? How are outcomes evaluated? Perhaps most importantly, are communities seeing the importance and impact of those changes on the ground?

This work is powerful, but it is not easy. It is trauma-informed, relationship-driven, and for many staff, it is personal. Interrupting violence is not a 9-to-5 job. It is work that continues into the hour on weekends and during moments of crisis.

I am also curious to see how the Gun Violence Task Force is driving the policies and data needed to push this work forward. Ultimately, our goal is to ensure that CMS continues to be a national model for crisis management and how cities can invest in public safety through prevention, rather than just punishment. This means providing the necessary funding, training, and oversight to support organizing, doing the work on the ground, and preventing cycles of violence.

We also hope to engage in a constructive dialogue with the Administration today about how those bills interact with ongoing agency work and what steps can be taken to move them forward.

I would like to thank the staff for their hard work in preparing for this hearing: Elizabeth Arzt, Senior Legislative Policy Analyst, Committee Counsel, and Christina Yellamaty, as well as my team back in District 16.

Now, I would like to take a moment to allow some of my colleagues to give brief opening statements. I will start with Council Member Lee.

COUNCIL MEMBER LEE: Thank you so much, Chair. Good afternoon, Chair, Colleagues, and members

of the public. Thank you for the opportunity to speak on Intro 1259. This legislation was directly inspired by what we learned in roundtable meetings with youth-serving community-based organizations. Staff on the front lines truly expressed a desire for more training to support justice-involved youth in ways that are trauma-informed, developmentally appropriate, and effective.

Intro 1259 responds to that need by requiring foundational behavioral training for all direct service staff in juvenile detention facilities who do not hold a clinical or behavioral health license.

This training would cover key principles of behavioral support, positive reinforcement, de-escalation strategies, and culturally responsive care. The bill also makes this training available to our community-based organizations working with system-involved youth. That means the same tools and best practices can be accessed by the very providers who often serve as the bridge between youth and their communities. It is important that we extend this to CBOs, as they are essential to this work. It's a bill about capacity, it's about care, and it is about

equipping every adult in the ecosystem, from ACS facilities to grassroots nonprofits, with the tools to support youth with skill and compassion.

I would like to thank the Committee for hearing this bill today, and I look forward to hopefully passing it. Thank you.

CHAIRPERSON STEVENS: I would also like to acknowledge Council Members Menin and Williams.

And I will pass it over to Council Member Joseph for her opening statement.

COUNCIL MEMBER JOSEPH: Thank you, Chair. Good afternoon, Chair Stevens and Colleagues of the Committee on Children and Youth.

Today, I'm proud that you're holding a hearing on my bill, Intro 1077, which I introduced alongside co-prime sponsors Council Members Brewer, Ossé, and Riley.

This bill requires New York City ACS to provide luggage for foster youth when they enter the system, move between placements, exit care, head to college, or for any other reason.

As a foster mom of two, I've seen firsthand how painful and humiliating it is for children to carry their belongings in trash bags. This is simply

unacceptable. Intro 1077 will make sure New York City does better. States like Oregon, Texas, and Maryland have already addressed this issue. It's time for New York to follow their lead, and we are proud that this bill will make that happen.

Chair Stevens, with your permission, I'd like to share a few testimonies from foster youth that my office received. I shared them when the bill was first introduced and felt compelled to share them again today.

"I didn't feel like I mattered. It seemed like rushing me was more important than treating me with dignity. The least they could do is give us proper luggage." This was from a 23-year-old foster youth.

"When I was moved from group home to group home, my stuff was packed in garbage bags. Sometimes my things got mixed up with trash and thrown out. My belongings weren't treated as important; they picked what they felt like carrying and threw out the rest. Traveling with trash bags became my new normal."

It is heartbreaking to hear these stories from these young people that we have pledged to protect and support. I know this Council is committed

to correcting past wrongs. Passing this bill is one step we can take to ensure that no child in foster care ever has to carry a black trash bag again.

Thank you for your support and partnership in helping to get this bill across the finish line and for showing our foster youth and children that we value their dignity. We have worked with several organizations, spoken to the press, and launched campaigns to spread the message loud and clear: Foster children and youth matter.

Special thanks to Sophie and the entire team at the Next 100 Coalition for their help in drafting this bill, and to our youth advisors at Fair Futures, the staff at (INAUDIBLE) St. Vincent's for joining us at City Hall when we introduced the bill, to my staff for their dedication, and to the bill drafters for their collaboration, and to my coprime sponsors for their continued support. Thank you, Chair Stevens.

CHAIRPERSON STEVENS: At this time, I will pass it over to Committee Counsel to swear in the Administration.

COMMITTEE COUNSEL: Hi, please raise your right hand.

Do you affirm to tell the truth, the whole truth, and nothing but the truth, before this committee, and to respond honestly to council member questions?

Michael Williams?

DEPUTY DIRECTOR MICHAEL WILLIAMS:

(INAUDIBLE)

COMMITTEE COUNSEL: Jessica Rathel?

ASSISTANT COMMISSIONER RATHEL: (INAUDIBLE)

COMMITTEE COUNSEL: Denice Williams?

DEPUTY DIRECTOR WILLIAMS: (INAUDIBLE)

COMMITTEE COUNSEL: Dr. Clifford Larochel?

DR. CLIFFORD LAROCHEL: (INAUDIBLE)

COMMITTEE COUNSEL: Dr. Karina Christiansen?

DR. KARINA CHRISTIANSEN: (INAUDIBLE)

COMMITTEE COUNSEL: Thank you. You can begin when ready.

DEPUTY DIRECTOR WILLIAMS: Good afternoon, Chair Stevens and Members of the Children and Youth Committee. My name is Denice Williams, and I serve as Deputy Commissioner for Planning, Program Integration, and Evaluation at the New York City Department of Youth and Community Development. Today, I am joined by my colleague Jessica Rathel,

who serves as Assistant Commissioner in the same bureau; Dr. Clifford Larochel, Executive Director of the Office of Neighborhood Safety; and Dr. Karina Christensen, Deputy Executive Director of the Office of Neighborhood Safety. We are pleased to be here to discuss the Crisis Management System.

As you know, CMS has a longstanding history in New York City and has continuously evolved over time to best meet the needs of our communities. The Cure Violence model was originally brought to New York in 2010 and funded through state and federal funding, thanks to the advocacy and expertise of many of the community-based organizations that still run programs today. Back then, all the organizations decided to adopt the Ceasefire model out of Chicago, which later transformed into Cure Violence, and then again evolved into CMS or the Crisis Management System that supports many neighborhoods across the city.

Cure Violence was originally designed as an intervention program to engage those individuals who are driving violence in their communities. Cure Violence is a specific public health intervention that views gun violence as a contagious disease where

a very small number of individuals drive the outbreaks. To address the problem, trusted, credible messengers seek out those individuals and persuade them to change their behavior. To maintain the credibility of (INAUDIBLE) staff who are influential because they have similar backgrounds to those who drive the violence, including histories of criminal behavior and incarcerations, the programs operate independently from law enforcement. Cure Violence uses three major strategies:

1. Strategy one: interrupt and de-escalate incidents of gun violence to stop cycles of retaliation.
2. Connect the people who are driving violence to services that help steer them away from violence.
3. Change community norms by engaging residents in collaborative efforts to promote public safety.

Although challenges are abundant in assessing the impact of a program that is intertwined with so many community and individual factors, over the years, evidence points to a positive impact on

community safety and public perception for high-fidelity programs.

To further enhance this model, New York City has gone a step further to embed the Cure Violence model in individual, specifically designed support services that also act as prevention. This led to the development of CMS, or the Crisis Management System, which includes a spectrum of wraparound services to complement and expand support to individuals and communities. These include community healing and wellness programs, youth enrichment services, including mediation in schools, professional mental health services, and mobile trauma units.

The vision was further realized when DYCD stepped in to provide support and assume responsibility for the CMS programs. The move allowed for more intentional integration into DYCD's network of services, which can address a broader spectrum of needs, including workforce programs, community-based case management, and community centers.

Since assuming responsibility for ONS in 2023, DYCD has conducted a comprehensive assessment of CMS programs and outlined priorities to ensure a

successful onboarding. These included documenting fidelity to the Cure Violence model, strengthening connections to other DYCD-funded programs, increasing capacity building for community-based organizations, implementing CMS programs, structuring and launching a data reporting system for all programs, improving contracting and payment structures, and establishing a commitment to continuous quality improvement, both internally and externally.

Studies on the state of evaluation for Cure Violence programs have emphasized the importance of implementing the model with fidelity to be able to replicate findings and point to essential program components. To this end, DYCD has integrated CMS programs into our agency-wide evaluation and monitoring system, which tracks essential contractual and model requirements. CMS programs now receive standardized site visits from Initiative Managers to document adherence to requirements and provide coaching and additional resources where necessary. Thus far in FY25, ONS staff have conducted 102 evaluations, and 98% of those evaluations have ratings that meet or are above the standard.

Another key component of the model is to monitor violence and incidents through community intelligence, as well as live and historical data. To this end, DYCD has integrated NYPD data streams into its system of record to support real-time data-driven communication between ONS Initiative Managers and CMS providers. As opportunities to explore expansion have arisen, DYCD has actively analyzed shooting data to inform catchment areas and potential changes to the model. DYCD also regularly convenes with the NYPD to understand data trends and public safety needs to inform provider efforts while still maintaining independence from law enforcement. The data DYCD receives is shared with CMS providers to ensure that Interventions are targeted, timely, and community-informed. This process is operationalized through localized planning meetings, provided strategy sessions, and coordinated response efforts.

DYCD has also committed to expanding access to other DYCD programs for CMS participants and has intentionally hosted networking and informational sharing convenings with CMS providers and other providers within the DYCD network. Additionally, DYCD is building specific pathways for collaborations and

referrals through initiatives such as our CRED Workforce program and the Summer Safety Plan, which involves our community centers.

DYCD has also reimagined specific CMS wraparound services by aligning scopes to program goals and needed staffing, such as through the consolidation of YEPS programs, and has rolled out new professional mental health supports based on the needs on the ground.

DYCD has a robust technical assistance and professional development network of support for community-based organizations it funds, and has prioritized CMS, CV, and the CV providers within the network for these supports.

To introduce these resources, particularly in the area of financial management, is a recognized need among this cadre of organizations. DYCD staff and TA providers have conducted intentional outreach to CMS providers based on their identified needs, adding an on-site introductory meeting to the normal handoff to the consulting group. One particular engagement with a financial management firm and a CV provider focused on entering and reconciling 2024 transactions in QuickBooks to ensure the accounting

system accurately reflects all activity for the year. The consulting group also compiled the necessary backup documentation for expenses, allowing the CBO to invoice under their DYCD contract from July 2024 through March 2025. A highlight of our commitment to the professional development of the frontline staff was through our Family Development Credential Program, often referred to as FDC. During the spring 2024 semester, 15 credible messengers completed the FDC program and are eligible to earn nine college credits. DYCD also provides specific support and training for CMS providers to onboard into DYCD Connect, DYCD's data system of record. Thus far in FY25, nine data system trainings have been held specifically for CMS providers. Finally, model-specific support is provided by the nationally recognized Cure Violence Global.

This brings us to the development and launch of DYCD's data reporting system in DYCD Connect, our agency-wide system of record. As we onboarded the programs into our agencies, we assessed not only their scopes but also their data collection needs. The result was the need to further clarify metrics through contractual scopes and to develop a

system that protected participant confidentiality and safety while still ensuring that we can assess the program's activities and measure its reach in the community. The metrics we collect are aligned with the CV model and include measurement of the three main components of the model: Violence interruption through de-escalations, long-term mediations, and shooting responses. Through the first three quarters of FY25, Cure Violence programs have conducted 5,217 mediations, 6,458 de-escalations, and 189 shooting responses.

Participant connections to services through case load, contact tracking, and referrals are the second component that we track. During the first three quarters of FY25, Cure Violence programs averaged a caseload of 1,363 participants per month and had a total of 43,271 in-person contacts with participants, as well as 31,418 virtual contacts, resulting in 4,987 referrals to services, including job training, education, and counseling.

Lastly, community engagement through community events and broader community member interaction— DYCD currently collects metrics aligned to these and is working to provide further quality

assurance to ensure they fully represent the work on the ground. DYCD also tracks demographics of participants and staffing levels at programs.

Moving into FY26, CMS wraparounds will also report data using DYCD Connect, each with its own customized buildout based on the goals and structure of the program. DYCD is also committed to continuing to improve data collection and clarity of the metrics it collects. To this end, the agency had launched a data work group that is a collaboration with CMS providers, DOHMH, and DYCD to collectively recommend standard language for key metrics and to ensure understanding of the entire network.

DYCD remains committed to continuous quality improvement across all aspects of the programming and has partnered with the National Opinion Research Center (NORC) at the University of Chicago and John Jay Research and Evaluation (JJREC) evaluation teams to conduct a long-term study of the program's implementation on the ground. This evaluation launched in FY25 and has three aims:

1. Review Current Services, Data Utilization, and Quality
2. Conduct a Process Assessment of the CV Model.

3. Assess the ONS Transition to
DYCD.

This is being implemented through a review of program data, site visits to CMS provider sites, and interviews or focus groups with CMS providers. This study will serve as the foundation for further long-term outcome and impact assessments, as well as a tool for DYCD to improve programming, inform future program models, and develop RFPs. As I've mentioned, the foundation of any solid outcome assessment is an implementation assessment, and DYCD is committed to doing the work to ensure the foundation is solid.

DYCD has also built in feedback loops with providers on an ongoing basis through full network provider meetings, a steering committee of key provider leadership, and close contact between initiative managers at ONS and providers on the ground. This allows for ongoing adjustment and the ability of DYCD to be responsive to emerging needs and concerns.

As mentioned earlier in the testimony, since assuming responsibility for ONS in 2023, DYCD transferred all contracts from MOCJ effective July 1st, 2024, and took over both the contracting and

payment processes with CMS providers. In FY25, CMS providers transitioned from subcontract to direct contracts with DYCD, allowing for greater transparency, support, and accountability. DYCD provides the CMS network access to one-on-one budgeting and invoice support, which will continue to be available all next year. All CMS contracts are registered and active heading into FY26. Per the Administration's recent commitments on additional advances, providers will receive an advance of 50% of their registered FY26 budget. Additionally, providers have been trained, and we continue to actively engage them to ensure budgets and invoices are submitted and approved in a timely manner.

In terms of Intro 992, we support the intent of the bill, but have concerns, such as disclosing why a contract was not renewed. We look forward to negotiations with the Council post-hearing.

Finally, we appreciate the Council's strong support of DYCD and the CMS provider network. Thank you, once again, for this opportunity to testify today. We are pleased to answer your questions.

CHAIRPERSON STEVENS: Okay, thank you. I guess I'll jump right into it.

One of the things I'm always inquiring about is how we evaluate and what data we collect. And so the Comptroller's Report in 2025 analyzed the CMS programs and found that the City lacks a standard approach to data collection across the providers. What specific metrics are CMS providers currently required to report? And what systems are in place for uploading and submitting that data?

I know you talked about DYCD Connect, but I know that system was not originally meant for this. That was a system that you guys are now integrating into. So, I would love to know what other systems you are using to collect this data.

ASSISTANT COMMISSIONER RATHIEL: Thank you for the question, Chair Stevens.

As we mentioned earlier, DYCD has spent the last year onboarding CMS into DYCD's system of record, DYCD Connect. DYCD Connect is a DYCD-developed system that allows us to customize the metrics collected for each program scope and have the flexibility to meet the unique needs of each program. So the metrics that providers are required to report

are aligned with key program requirements. So, for Cure Violence, the metrics are aligned with the three areas of the program, such as de-escalations, mediation, shooting responses, caseload, participant contacts, referrals, community events, and community members engaged.

On the other hand, you know, for others in the CMS network, the development has been more specific. For example, with MTU, the mobile trauma units, the programs collect metrics specific to their deployments. For youth enrichment programs, they track metrics specific to peer mediation workshops, safe passage work in schools, etc., etc. So each CMS program has a build that is really specific and geared toward its program scope and goals.

CHAIRPERSON STEVENS: You said a lot there, and you're reading really fast. So, I have a lot of responses to that, but I'm going to go to the next question.

One of the things I know we talked about when we were in the very beginnings, and we were looking into getting the contracts when they were under MOCJ, is even around the shooting response, what are we trying to get there, and what are we

trying to solve with that? Because I've always had an issue with shooting response, since a shooting has already happened, often there in the middle of the day, and how is that effective use of time for the CMS groups when speaking to a lot of them, they're already stretched so thin? How are we making sure that we're using the best use of their time when we're thinking about these metrics that we're coming up with?

EXECUTIVE DIRECTOR LAROCHEL: Thank you so much for the question, Chair Steven.

So shooting responses are part of the public health approach to violence. It's a community response to a shooting that happens in the catchment area. And... (CROSS-TALK)

CHAIRPERSON STEVENS: I know what it is, so you don't have to tell me. Because I'm very aware of it, and we all have a lot of time. I'm asking how that is the best use of the time, especially when we know these CMS groups are stretched so thin. And a lot of times it's them trying to organize and get people there, when they can actually be out there mediating and doing some other things. And it doesn't seem like a good use of time. And it often feels like

poverty pimping, because, at that time, we'll get every news camera to come out to see that and look at the pain of our community, as opposed to them being more useful with their time.

So I would just love to understand and get a deeper understanding of how that is effectively a good use of the time? Because we know what happened.

EXECUTIVE DIRECTOR LAROCHEL: Right. So, the goal, and I'll just be very quick, with a shooting response, is to put messages of nonviolence before the community. So, shooting happens, and the community coalesces and says, "Hey, we're not going to allow this to overtake our community, we're not going to allow community violence to overtake our community." And so that's the broad goal of the issue... (CROSS-TALK)

CHAIRPERSON STEVENS: I just want us to start thinking about whether that is effective. Because I know you listed it as having 189 shooter responses. So if we have 189 of them, clearly they're not working. I think that's a place where we need to look to ensure this is working and effective. Because if we're collecting the data, it's showing that they're still happening, and it's consistent. But I

also just think, especially with the CMS groups being stretched so thin and having sometimes, I heard where their Crisis Management and Violence Interrupters are maybe a group of eight of them— I don't think that that's the best use of their time to stand out and tell people not to be violent in the community when they're doing that on an individual basis already.

My next question is, providers have noted inconsistencies in what different organizations track. What steps is your agency taking to standardize the data collection and reporting across all of the CMS providers?

ASSISTANT COMMISSIONER RATHIEL: Thank you for the question, Chair Stevens.

So, yeah, some CMS providers, like other DYCD-funded program areas, may use proprietary systems and collect their own metrics as well. However, DYCD does require data entry in our agencywide system, DYCD Connect, to ensure... (CROSS-TALK)

CHAIRPERSON STEVENS: But they are collecting data in the other systems. Are you guys also working with them to see why they're collecting that data? Again, I know you've only had this for a

year, and it's lived in multiple places. So you know, I don't want us to have a program that's coming to DYCD, and you're trying to make it fit your system and not the other way around, because that wouldn't make sense.

So if they're collecting data in other places, and that's why there are inconsistencies, have you guys looked at, okay, well, the DYCD Connect is what we have, and this is what makes sense?

ASSISTANT COMMISSIONER RATHIEL: Yes, so there are a few approaches we're taking here. One is that we recently launched a data work group to really look into definitions— what people are collecting, what's happening on the ground. Making sure we're all aligned across the whole network. We are also, in our implementation assessment, which we're doing with the University of Chicago and John Jay, one of the things that we specifically wanted to focus on was speaking to the folks who were managing the data in these programs to understand what their process is. Are there improvements? Are there challenges, and how can we address them? Because, as you said, they have just launched this past fiscal year, or this current

fiscal year, I guess. So, we have some learning to do, and we're committed to continuing to improve.

CHAIRPERSON STEVENS: I hear that you're working on figuring out the data system. But how are you working with providers? Because many of them express interest in technical support to improve their data collection and capacity. Is there funding available to help and support these groups, supporting them and helping them upgrade their systems, forms, and technical support? Is there money around that to support them with funding?

ASSISTANT COMMISSIONER RATHIEL: Thank you for the question.

DYCD has been providing training on its data system, DYCD Connect, to onboard users. We do have a vendor who's specific to that. ONS Initiative Managers also support providers in ingesting data, understanding how it is used on the ground, and providers have access to DYCD's entire suite of capacity-building and technical assistance services. We have a vendor, for example, who specializes in developing outcomes, ensuring things are aligned with a theory of change, and collaborating with providers on the ground. And again, as I mentioned, our

research partners are specifically planning to speak with the data coordinators, and we look forward to really understanding the needs on the ground and making sure we're able to address those.

CHAIRPERSON STEVENS: So, your data coordinators are folks who work in-house with you to figure out the data systems, is that correct?

ASSISTANT COMMISSIONER RATHIEL: So there are folks who are-- and you all can speak to you, know maybe more on the ground... So, there are folks who are working in the programs and the providers who are responsible for doing, uhm... (CROSS-TALK)

CHAIRPERSON STEVENS: No, no, I understand. I'm asking, is the data that's being driven mostly in-house? How are you getting the feedback and working with the providers? I think some of my issues stem from the fact that this program has expanded significantly and done so very quickly. So, my question is, what support are we providing to providers to help them keep up with the pace? So, yes, understanding that, but I'm asking, do you have people who support them on that data piece to help with this expansion (INAUDIBLE) the way it has?

ASSISTANT COMMISSIONER RATHIEL: Yes, the ONS Initiative Managers are their key contacts on the ground. So they're providing coaching in both terms of program implementation and data. They bring back any issues that arise with data systems and any type of support they need. They either bring it back to our bureau, which houses our Analytics and Evaluation teams, or our Information Technology teams, to ensure the systems are aligned with their needs.

CHAIRPERSON STEVENS: While CMS providers currently report on some key metrics, others have some long-term outcomes, such as the number of conflicts successfully mediated over time, participant retention, and reduction in recidivism. Those things are not tracked. Do you plan on expanding the scope and requirements of metrics to better evaluate the impact of CMS?

ASSISTANT COMMISSIONER RATHIEL: So thank you for the question.

We're always trying... (CROSS-TALK)

CHAIRPERSON STEVENS: You don't have to thank me. It's fine, you could just answer the question. We're family now. We... (CROSS-TALK)

ASSISTANT COMMISSIONER RATHIEL: (LAUGHS)

Grateful for the opportunity...

CHAIRPERSON STEVENS: We're in the conversation.

ASSISTANT COMMISSIONER RATHIEL: So we're always striving to improve data collection and build out our knowledge of the program. We currently do have an evaluation contract with the University of Chicago and John Jay to do a more specific implementation assessment. We are trying to lay a foundation here. So, we have the data that we're collecting through our system of record, and we have that data collection that they're doing on the ground. They're going out to providers and conducting site visits to gain a deeper understanding. And we are using this as a foundation to really get to those longer-term outcomes. And we look forward to really defining those, understanding how we want to do that tracking in the long term, to build out our data collection for longer-term, kind of participant outcomes in a way that really protects confidentiality and safety, while being able to get some of that longer-term assessment that you're asking about.

CHAIRPERSON STEVENS: Honestly, I'm a little disappointed that we're not further along. Because it's not like this is a new program, and there have been so many different iterations. It kind of feels like, now that (INAUDIBLE) done DYCD, it feels like we're starting from scratch when we shouldn't be. And I'm specifically talking about this data collection piece. I feel like we should be much further along. This is like an echo in my ear, uh, much further along. I'm a little disappointed that we're still trying to figure out the data collection piece. Because honestly, this work affects lives. So if we're not tracking the right thing and trying to use this to drive the work, it's really unfortunate that we're still trying to figure that out, especially when it's clear that some groups are collecting it. So I don't understand why we're not talking to them to allow them to drive what that would look like. Because, as it said, a lot of them, when I was meeting with these groups, they're talking about some of them are collecting, like the long-term mediation stuff that they're doing. And we're still at the very basic and lower level of collecting data. So I'm a little disappointed.

Cities like Chicago and Oakland have successfully implemented data dashboards that serve as a central two-way data-sharing system for CMS providers, tracking shootings, data, violence trends, and public health data. Without access to this data, CMS groups have been forced to operate on incomplete information, relying solely on community intelligence, rather than citywide data.

How are CMS providers currently notified of community incidents, such as shootings or potential retaliatory violence that may require an immediate response or intervention?

EXECUTIVE DIRECTOR LAROCHEL: Thank you so much.

There are various ways to track violent incidents. We're able to track it through street intel from our credible messengers. We're also...

(CROSS-TALK)

CHAIRPERSON STEVENS: But that's part of the problem, right? Because they should not have to get the information only from there. And we should be further along. This was in the Department of Health. It was also in MOCJ. We are still at a point where our providers have to go out on the ground just to

gather street intel. That's part of it, but we should definitely have a better system.

EXECUTIVE DIRECTOR LAROCHEL: Right.

CHAIRPERSON STEVENS: So, not to interrupt you, but I'm a little disappointed, just so you know. I thought we were so much further along.

EXECUTIVE DIRECTOR LAROCHEL: So it's not just street intel. It's street intel, as well as PD alerts that we receive daily, along with hospital data. So, receive hospital admission... (CROSS-TALK)

CHAIRPERSON STEVENS: Is it in real-time?

EXECUTIVE DIRECTOR LAROCHEL: Hospital data... (CROSS-TALK)

CHAIRPERSON STEVENS: Okay, I heard it. They said 'no'.

EXECUTIVE DIRECTOR LAROCHEL: In near real time, in near real time... (CROSS-TALK)

CHAIRPERSON STEVENS: (LAUGHS) They said no, I heard the providers. I'm not deaf.

UNKNOWN: He said near (INAUDIBLE)...

(LAUGHTER)

EXECUTIVE DIRECTOR LAROCHEL: I said near real-time, yes.

UNKNOWN: (INAUDIBLE) real-time.

CHAIRPERSON STEVENS: Somebody already shot that, that's what...

UNKNOWN: (UN-MIC'D) (INAUDIBLE)

CHAIRPERSON STEVENS: Nobody cares about time, (INAUDIBLE) if it's not real-time, it's not real-time. But that's a problem for me, so that's a place that we need to hone in on. Because I think that we should be at a place where this is much further along.

Has DYCD explored creating a real-time data dashboard, allowing providers to access and contribute to real-time information that improves intervention effectiveness?

ASSISTANT COMMISSIONER RATHIEL: So we have integrated NYPD data streams into our DYCD Connect, so we have that real-time data coming into the system. And ONS Initiative Managers are able to communicate that to CMS providers. So we're using that to ensure that the, uhm... (CROSS-TALK)

CHAIRPERSON STEVENS: When you say you're integrating NYPD's stream, what does that mean? Tell me. Like, explain that, please.

ASSOCIATE COMMISSIONER RAMIREZ: (INAUDIBLE)

CHAIRPERSON STEVENS: You have to go over there to the mic so that they can hear you online.

ASSOCIATE COMMISSIONER RAMIREZ:
(INAUDIBLE)

CHAIRPERSON STEVENS: Oh, you have to get sworn in as well.

COMMITTEE COUNSEL: Yes, please raise your right hand. Do you affirm to tell the truth, the whole truth, and nothing but the truth before this committee and to respond honestly to council member questions?

ASSOCIATE COMMISSIONER RAMIREZ: I do.

COMMITTEE COUNSEL: Thank you.

ASSOCIATE COMMISSIONER RAMIREZ: Hi. Good afternoon, I'm Denise Ramirez, Associate Commissioner for Diversity, Equity, and Inclusion. Our team also leads the mapping and data analysis for our agency.

Our agency receives real-time alerts from the NYPD on incidents, and the data is automatically mapped and visualized in a map that displays the location of the incident and the type of incident. There are three maps that are... (CROSS-TALK)

CHAIRPERSON STEVENS: So everyone has access to this in real time?

ASSOCIATE COMMISSIONER RAMIREZ: The ONS Initiatives Managers have access to this in real-time.

CHAIRPERSON STEVENS: So...

UNKNOWN: (UN-MIC'D) (INAUDIBLE)

ASSOCIATE COMMISSIONER RAMIREZ: And that... they're the ones who coordinate with our providers.

CHAIRPERSON STEVENS: Could you make it make sense? Because you're saying that the manager, who's not in the field and not responding, has access, but the people who are actually going to be out in the field and in the community have to get notified by them? So, let's be clear: the NYPD is notified, then the ONS folks are notified, and then the CMS people are notified?

ASSOCIATE COMMISSIONER RAMIREZ: (UN-MIC'D) Yes.

CHAIRPERSON STEVENS: That doesn't make sense, guys,

COUNCIL MEMBER WILLIAMS: Not at all.

(LAUGHTER)

CHAIRPERSON STEVENS: That doesn't make sense.

COUNCIL MEMBER WILLIAMS: (UN-MIC'D) It does not.

CHAIRPERSON STEVENS: Because that's overlapping a lot of time. So, I think that's a place we've got to clean up. That doesn't make sense.

COUNCIL MEMBER WILLIAMS: (UN-MIC'D) And what do they know about the community? (LAUGHS) What do they know?

CHAIRPERSON STEVENS: They don't, I agree. (LAUGHS)

My question is, why can't we simply have that data go directly to the ONS sites? Why? What's the lag? What's the reservation around that?

EXECUTIVE DIRECTOR LAROCHEL: Right now, the agreement we have with the NYPD is for the data alerts to come to DYCD, ONS...

CHAIRPERSON STEVENS: But why is that the agreement?

EXECUTIVE DIRECTOR LAROCHEL: It's the agreement that has been in place, Chair Stevens. What we do is, we're able to triage that data. Now, to understand something, when I mention the... (CROSS-TALK)

CHAIRPERSON STEVENS: When you say triage, what does that mean? How are you triaging the data?

EXECUTIVE DIRECTOR LAROCHEL: Well, to take the data in-- and we want to make sure that we're translating the data. What I mean by that is that it's reliable, right? We're getting data from the NYPD... (CROSS-TALK)

CHAIRPERSON STEVENS: So the police department isn't sending you reliable data?

EXECUTIVE DIRECTOR LAROCHEL: I'm not saying that. I'm ...

CHAIRPERSON STEVENS: I'm just asking the questions. I'm asking the questions for the answers. That's all I'm doing.

EXECUTIVE DIRECTOR LAROCHEL: Totally, totally, but again, we have data that comes in from street intel. We have data that comes in from the PD... (CROSS-TALK)

CHAIRPERSON STEVENS: But I'm talking specifically-- I'm not talking about the street intel, because you guys aren't collecting the street intel information, the providers are. That information will come from them, not you.

My question is, why can't we have live data from the NYPD directly transmitted to the providers, allowing them to respond more efficiently to crises in the community on the ground?

EXECUTIVE DIRECTOR LAROCHEL: And that's something that, you know-- That's something that we definitely could look into, Chair Stevens.

Right now, as it stands, we triage the data, and then we have our Borough Managers and our Initiatives Managers triage that data and coordinate with folks on the ground.

CHAIRPERSON STEVENS: I don't like stuff that doesn't make sense. And that don't make sense to me. I don't like it.

Was this a decision from the NYPD or DYCD?

EXECUTIVE DIRECTOR LAROCHEL: I wasn't privy to those discussions. I'm imagining that discussion happened between NYPD and DYCD... (CROSS-TALK)

CHAIRPERSON STEVENS: That makes me so sad that you weren't privy; you're the ED. So I want you to be privy to those discussions.

UNKNOWN: (UN-MIC'D) (INAUDIBLE)

EXECUTIVE DIRECTOR LAROCHEL: Can I ask one of my colleagues to come up to... (CROSS-TALK)

CHAIRPERSON STEVENS: Of course, it's a party.

EXECUTIVE DIRECTOR LAROCHEL: It's a party, it's a party.

CHAIRPERSON STEVENS: You don't have to ask permission, just come up. You have to be sworn in.

COMMITTEE COUNSEL: I swore him in.

CHAIRPERSON STEVENS: Oh, you swore him in? Okay.

DEPUTY DIRECTOR MICHAEL WILLIAMS: Chair Stevens, we're in-- we're in the process of actually providing a direct link between PD alerts and our CMS providers. What we've done over the course of this year is roll out, early in the year, the ability to connect with executive directors and program administrators. And we asked them to designate a supervisor, either their VI Supervisor or OW Supervisor, to receive the alerts.

To clarify, DYCD is in the process of moving to a system where PD alerts can come directly to providers. We have some providers... (CROSS-TALK)

CHAIRPERSON STEVENS: Ya'll know it's not this hard. Ya'll know it's technology. And all this stuff can be done really quickly. I don't know why

1 we're making it seem like it's brain surgery and
2 saying we have to designate. I'm almost positive all
3 these providers are going to get up here as soon as
4 you guys move from the dais and tell us that they've
5 requested this information, they want this
6 information, they have the person designated, and all
7 the things.
8

9 So, I... this is where I get frustrated in
10 these hearings, because there's such a disconnect
11 between the work that you're doing and what the
12 providers are saying is happening. And so it does
13 not-- it should not take a year, because this has
14 been under DYCD for a year. And let's be clear, it
15 was under MOCS for even longer. So that's why I'm
16 even more frustrated. This isn't a new program, and
17 it's something we should be continually evolving.
18 This is where my frustration comes in.

19 I hope that by the next time we have a
20 hearing, you'll be saying, "Oh, all of this is done,"
21 because it doesn't take that long. I'm telling you,
22 as soon as y'all get up, these providers are going to
23 say, "We asked for this information." I already got
24 text messages saying that they've asked for this
25 information, they've emailed, and they have emails

showing that they've asked for this information, and they're not getting it. It's just very frustrating.

In addition to the real-time shooting, CMS providers do not have access to public health data, such as substance abuse trends, mental health crises, and hospital admissions for violence-related injuries, which could allow organizations to connect at-risk individuals to appropriate services and address the underlying causes of violence before they escalate. Has DYCD explored granting CMS providers access to that data?

(PAUSE)

EXECUTIVE DIRECTOR LAROCHEL: Again, I think for us, the major thing here is...

CHAIRPERSON STEVENS: (LAUGHS) They set you up, let me tell you.

ALL: (LAUGHTER)

CHAIRPERSON STEVENS: You need to text them.

EXECUTIVE DIRECTOR LAROCHEL: (LAUGHS)

Well, no, I think, again, part of this...

UNKNOWN: (UN-MIC'D) (INAUDIBLE) works hard.

ALL: (LAUGHTER)

CHAIRPERSON STEVENS: (LAUGHS) I didn't say he didn't work hard. I said they set him up.

ALL: (LAUGHTER)

EXECUTIVE DIRECTOR LAROCHEL: (LAUGHS) Well, I want to say this, I want to say this, because I've been part of this work for a long time, so we can have straight talk... (CROSS-TALK)

CHAIRPERSON STEVENS: I told you they like you, so...

EXECUTIVE DIRECTOR LAROCHEL: So we can have straight talk... (CROSS-TALK)

CHAIRPERSON STEVENS: Look, they are defending you, but they set you up, bro.

EXECUTIVE DIRECTOR LAROCHEL: (LAUGHS) Well, listen, a lot of these data sources we don't have access to. These are not primary data sources for us. We're working in collaboration with other City agencies, such as the DOHMH, ACS... (CROSS-TALK)

CHAIRPERSON STEVENS: Well, don't get me started; that's part of the problem.

EXECUTIVE DIRECTOR LAROCHEL: (INAUDIBLE)

CHAIRPERSON STEVENS: It pisses me off that we sit here and act like the City isn't one city. There's no reason why this city agency should not be getting information from this city agency when all this work is intertwined. So this is something I've

CHAIRPERSON STEVENS: They mobilize with other agencies? But we don't got none of the information?

EXECUTIVE DIRECTOR LAROCHEL: So... (CROSS-TALK)

CHAIRPERSON STEVENS: I don't like stuff that don't make sense...

EXECUTIVE DIRECTOR LAROCHEL: In addition-- in addition to helping to mobilize other city agencies around our public health approach to violence prevention, they also support internal analysis of our data, and they're the ones who are coordinating our Summer Safety Plan, which is an activation of spaces throughout the city over the summer, uh, increasing hours that we make safe spaces available to young people.

CHAIRPERSON STEVENS: What's going on with the expansion of that? Because I know they are-- what precincts are they in again?

EXECUTIVE DIRECTOR LAROCHEL: So, we have 13 precincts that have been written down. We're in the 40th Precinct, 42nd, 44th, 47th, 73rd, 75th, the 40th-- excuse me the 40th, the 44th, the 46th, the 42nd, the 73rd... (CROSS-TALK)

CHAIRPERSON STEVENS: You're in the 46th as well?

EXECUTIVE DIRECTOR LAROCHEL: Yes.

CHAIRPERSON STEVENS: No, you're not, because that's where y'all need to expand to. I know.

UNKNOWN: (UN-MIC'D) (INAUDIBLE)

CHAIRPERSON STEVENS: You know, y'all know I know the answer to the questions I'm asking.

EXECUTIVE DIRECTOR LAROCHEL: This is a Summer Safety Plan.

CHAIRPERSON STEVENS: No, no, no, I asked the Task Force, what precincts are you guys in in the Task Force? We didn't get to the Summer Safety Plan, because, you know, I have a whole lot of questions to ask... (CROSS-TALK)

EXECUTIVE DIRECTOR LAROCHEL: I'm sorry (INAUDIBLE) mentioned the Summer Safety Plan...

CHAIRPERSON STEVENS: Mm-hmm?

EXECUTIVE DIRECTOR LAROCHEL: We're in 13 precincts for the Summer Safety Plan (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: Yeah, yeah, I know that one, mm-hmm.

EXECUTIVE DIRECTOR LAROCHEL: (INAUDIBLE)...

CHAIRPERSON STEVENS: Yeah, no, I didn't get to the Summer Safety Plan. I was still asking about the Task Force. What precincts are you guys in for the Task Force?

UNKNOWN: (UN-MIC'D) (INAUDIBLE)

EXECUTIVE DIRECTOR LAROCHEL: Yeah, just the first six: the 40th, 42nd, 44th, 47th, 73rd, and the 75th.

CHAIRPERSON STEVENS: And when were those precincts decided?

EXECUTIVE DIRECTOR LAROCHEL: I'd like to get back to you on that, but I want to say that they were defied at... (CROSS-TALK)

CHAIRPERSON STEVENS: I know, it's 2022.

EXECUTIVE DIRECTOR LAROCHEL: Yeah, 2022.

CHAIRPERSON STEVENS: Mm-hmm.

EXECUTIVE DIRECTOR LAROCHEL: Yep
(INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: What year is it now?

EXECUTIVE DIRECTOR LAROCHEL: It's 2025.

CHAIRPERSON STEVENS: Yeah, so why are we using old data to guide that information? How are we updating the data if that was from 2022, and it's 2025? And we know those trends have changed and

shifted. Because a prime example, the four-six is on fire, and so we're not in the 46th with the Task Force, around a Gun Violence Task Force. And it's been for the last two years. So, how are we using updated data to kind of guide this work?

EXECUTIVE DIRECTOR LAROCHEL: So, again-- you did mention that I was set up...

CHAIRPERSON STEVENS: (LAUGHS)

EXECUTIVE DIRECTOR LAROCHEL: (LAUGHS) But, seriously, Chair Stevens, I think, for us, we're always looking at the data. Right? We're always examining data because this approach to violence prevention requires us to analyze the data so that it informs the work happening on the ground. Sometimes it doesn't move as quickly as we would like, but we are looking (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: But violence does. So we have to move quickly. So I don't think that's an excuse, this work-- we're going to do this, (SILENT HAND GESTURE) because I don't want Sergeant at Arms to start yelling at me. Because y'all know I'm always in trouble. (LAUGHS) But violence moves, and so we can't be using old data and not moving. This work needs to be fluent, and I'm a little disappointed

that we have a task force that was created with really good intentions. And, after meeting with them, I know that they're working on some stuff and looking at policy. Still, we're also looking at data from 2022, and it hasn't changed. And so that's another huge red flag for me. Right? Because when we're talking to folks, and especially in communities, and they're like, "What are the CMS groups doing and blah, blah, blah, blah blah?" They're getting the backlash of it because we're not moving fast enough. We need to put some fire under this work.

I'm going to pause here, because I know Council Member Williams has some questions. I have a whole bunch of other questions, but she's been chiming in, so I want to give her some space. Go ahead.

(BACKGROUND NOISE)

EXECUTIVE DIRECTOR LAROCHEL: Thanks, Mike.

(PAUSE)

CHAIRPERSON STEVENS: Oh, look at that, I'm sorry, hello, how are you doing? Our Public Advocate is in the building, and he has an opening statement. So I will let him speak. I didn't know you were here.

PUBLIC ADVOCATE WILLIAMS: Thank you so much—peace and blessings, love, and light to everybody. I am giving an opening statement in the middle of the hearing. So thank you, Madam Chair.

I am not in the greatest mood. I just came from 26 Federal Plaza, where our Comptroller is being held by federal agents. So, on the record, I want to just thank him for trying to be present in the horror that's going on there. And I'm going to call on Mayor Eric Adams to step up and condemn what happened and demand his release immediately.

ALL: (APPLAUSE)

PUBLIC ADVOCATE WILLIAMS: Good afternoon, my name is Jumaane Williams, and as mentioned, I'm the Public Advocate for the City of New York. Thank you to Chair Stevens and the Members of the Committee for holding this hearing.

Today, the Council is holding an oversight hearing about the Crisis Management System under DYCD, so I would like to take a moment to discuss youth crime, an increasingly popular topic of coverage in the media. Fearmongering about youth crime has existed for decades, with perhaps the most well-known example—the idea of the teenage “super

predator”—contributing to a travesty of injustice in our city with the wrongful conviction and incarceration of five teenage boys for assault and rape in Central Park, one of whom is now a member of this body.

Headlines about rising youth crime blame Raise the Age, the 2018 law that raised the age of criminal responsibility from 16 to 18 years old. Arrests of people under the age of 18 have increased since 2022, and Mayor Adams, the NYPD, and publications like *The New York Times* are quick to posit that gangs are enticing young teenagers to commit crimes because the penalties are less harsh. At the same time, the data paints a more nuanced picture. Research has found that arrest trends among people under age 18 generally mirror the scale and direction of trends among adults age 18 and older.

This is not to say that any young person committing a violent crime or wielding a gun is not cause for deep concern, but we must also be truthful about what the data shows, and not cherry-pick statistics. Increases in youth arrests are generally proportional to increases in arrests across other age groups. The bottom line is that, if recent changes in

crime were due to the implementation of Raise the Age, age-specific patterns would be observable in the data, and they're not. I also just want to mention that youth crime across the nation has also increased, and that certainly cannot be blamed on New York's Raise the Age.

The Crisis Management System (CMS) recognizes that youth crime is something that can be prevented through non-carceral, non-punitive means. I'd like to quote DYCD Commissioner Keith Howard: "By the time a young person picks up a gun, the system has failed them." CMS, which deploys teams of credible messengers who mediate conflicts on the street and connect high-risk individuals to services that can reduce the long-term risk of violence, is an inter-agency collaboration between DYCD, the Department of Probation, NYC Public Schools, and Health + Hospitals. In 2023, Mayor Adams announced that the Office of Neighborhood Safety (ONS) would shift to DYCD from MOCJ in order to integrate community violence intervention programming into the existing programs it runs. From 2010 to 2019, there was an average of a 40% reduction in shootings across

all CMS program areas, compared to a 31% decline in shootings in the 17 highest-violence precincts.

In a report published by Comptroller Brad Lander's office in March, an analysis found that Community Violence Intervention (CVI) programs are limited by data gaps and inconsistent leadership, as well as long and growing payment delays to program providers.

Additionally, I wanted to mention that I am a cosponsor of all of the pieces of legislation being introduced today. I think it will help provide better and dignified services for youth in NYC detention centers.

But, I also want to mention, as someone who is the Chair of the Task Force that helped to expand this greatly, and someone who was a cosponsor of the bill that started the Gun Violence Task Force, I have seen stagnation in this work for many numbers of reasons. I have also not seen it allowed to be structuralized so that it is a real part of the public safety discussion. I don't see any folks from CMS during press conferences. I don't know if there are any discussions about what's happening. All public-facing discussions typically involve the

police and the Police Department. That does not make sense if we are trying to integrate a different way of thinking about this.

There is very real violence that occurs here, so I don't want to undermine people who are harmed by this. But we do know, simply going forward and trying to arrest the children of the people that we arrested 20 years ago, it is probably not going to have a different result than it did 20 years ago.

I am infuriated because when I used to speak with Mayor Eric Adams, when he was Borough President Adams, we had many discussions about how we could do public safety differently. I know that he is a complicated person, like we all are, but I only seem to hear from the Republican cop and not the person who was the head of 100 blacks in law enforcement. And that is very frustrating, because we had the opportunity and we've wasted it. We have wasted a golden opportunity to show how we can integrate a public safety model that shows that public safety is a shared responsibility.

So, when we hear these questions that we've been asking for years, years, probably over a decade now, it is the same crap over and over and over

again. Folks are not even getting paid. CMS people are getting shot. And they don't even know what to do after that. There is a huge disconnect, and I believe that disconnect is because there is no real buy-in from the top— from the Mayor. There is no real buy-in to this work that is being done. And that is why it is not integrated and why we have the problems that we have. That is the fundamental problem that we have here. There are so many issues that could be easily resolved if there were a real buy-in. It is different from precinct to precinct—whether that precinct has buy-in or does not have buy-in, that is also from the top not giving the orders that should be given.

I believe there is also stagnation because, now, people try to figure out where they can get a contract when we should be building on the infrastructure that's already there. There are so many things that we could have built across that. There are things that I have funded that were taken away and given to other agencies, and nothing was done with it. We have a golden opportunity here. I will say my hope is that the next mayor, because I don't want this mayor anymore, will actually use that opportunity to build out the thing that we know we

can build out and be a real, true beacon for folks. These people are doing amazing work in the streets and not even getting paid. At the very least, we could integrate them. And there is an overlay now for many other programs that we could put directly on.

And I am going to be honest, this is not a panacea. It's not. But it is a thing that we know is working. I also stood with the Mayor three years ago when there was a great plan to micro-target resources in some of these same communities. I don't know what the hell happened to that. I haven't heard anything about it since that press conference. This is a problem because we actually know what to do. We know what to do, we know how to do it, we're just not doing it. And that's really the crux of frustration that I have here.

So I am so thankful to the Chair for having this hearing so that voices can be heard. I hope somebody cares enough to make some changes so that at the next hearing, we're not asking the same questions and getting the same answers that we've been getting for years and years.

And I do want to give a shoutout to K Bain, he's my brother from another. He's going through some

things right now. This administration has treated him very poorly. Other groups have gone through the same thing, and there's a lot here.

This is a great program; we should be expanding it and building upon it, and providing infrastructure so that it is a part of the public safety discussion and not an aside. Thank you.

CHAIRPERSON STEVENS: Thank you, Public Advocate. We appreciate you being here. And we know how passionate you are about this work. And thank you for spearheading this when others didn't see it. I am happy to continue this work, push forward, and hold them accountable. Because I think we're all on the same page about the frustration of how this work has not really evolved. Do you have any questions?

Okay, so I will jump back in and give Council Member Williams (INAUDIBLE) time.

How did DYCD determine which schools would host conflict mediation programs? What criteria and data were used to inform this decision?

EXECUTIVE DIRECTOR LAROCHEL: Thank you for the question.

We are currently participating in the YES or Youth Enrichment Services Initiative with New York

City Public Schools. They provided us with a list of the top 50 schools, including stand-alone schools and campuses, that have the highest levels four and five cases, which include suspensions of students carrying weapons to school, among other incidents.

CHAIRPERSON STEVENS: Thank you.

How many schools are you currently in?

EXECUTIVE DIRECTOR LAROCHEL: Fifty.

CHAIRPERSON STEVENS: Fifty?

Some providers have declined or withdrawn from the Youth Enrichment Services contract, citing that the \$40,000 allocated is insufficient for operating a program effectively, which is true. Is this service still being offered across CMS sites? If so, how many schools is this program operating in? Are you currently experiencing challenges in identifying providers who are willing to take the contracts at the existing funding levels?

EXECUTIVE DIRECTOR LAROCHEL: Yes, the price point currently is not \$40,000. For standalone schools, the cost is \$93,000, and for campuses, it is \$135,000.

CHAIRPERSON STEVENS: With \$93,000, still not a lot, what's the program model that, I guess, or the vision around that for the providers?

EXECUTIVE DIRECTOR LAROCHEL: It's conflict mediations in schools...

CHAIRPERSON STEVENS: Mm-hmm?

EXECUTIVE DIRECTOR LAROCHEL: Workshops...

CHAIRPERSON STEVENS: Can you talk about the structure? What do you want the staffing structures to be with \$93,000?

EXECUTIVE DIRECTOR LAROCHEL: Yes, so we have Conflict Mediation Specialists that are in the schools. We also have ancillary staff that's part of the model. (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: So in the model, how many staff are there supposed to be?

EXECUTIVE DIRECTOR LAROCHEL: I think-- I will allow Karina to answer, but I think it's four staff. We have a flexible staffing structure...

(CROSS-TALK)

CHAIRPERSON STEVENS: So it's supposed to be about four staff members? Mm-hmm.

EXECUTIVE DIRECTOR LAROCHEL: Yeah.

CHAIRPERSON STEVENS: So four staff?

1 COMMITTEE ON CHILDREN AND YOUTH 65

2 EXECUTIVE DIRECTOR LAROCHEL: And they also
3 provide...(CROSS-TALK)

4 CHAIRPERSON STEVENS: Are they all part-
5 time?

6 EXECUTIVE DIRECTOR LAROCHEL: No, they're
7 not all part-time. And that's the change in the model
8 structure. This... (CROSS-TALK)

9 CHAIRPERSON STEVENS: At \$93,000?

10 EXECUTIVE DIRECTOR LAROCHEL: At \$93,000.
11 Yes, so at \$93,000 that allows them to, uh, right
12 now, with the standalone... (CROSS-TALK)

13 CHAIRPERSON STEVENS: That's a salary.

14 EXECUTIVE DIRECTOR LAROCHEL: Right.
15 Absolutely, absolutely. And these folks do a lot,
16 they do conflict mediation, they do safe passage, but
17 yes, for the most... (CROSS-TALK)

18 CHAIRPERSON STEVENS: So the model is four
19 staff?

20 EXECUTIVE DIRECTOR LAROCHEL: Yes... (CROSS-
21 TALK)

22 CHAIRPERSON STEVENS: And so what is-- so
23 what's the range, and it's full-time, what's the
24 range? Because at this point, you're spending all the
25

money on staffing, you have (INAUDIBLE) or anything with this. What are the expectations around this?

EXECUTIVE DIRECTOR LAROCHEL: Yeah, so the expectation, again, is that we went from \$40,000 to \$93,000 or stand-alone to \$135,000 for campuses. Right? We know that's still not, you know, the best... (CROSS-TALK)

CHAIRPERSON STEVENS: I just want to tell providers: Do not take this contract. That is ridiculous. When we talk about underfunding contracts—ridiculous. Uh, \$93,000 for a program to run effectively, you're setting people up for failure.

EXECUTIVE DIRECTOR LAROCHEL: So, I want to be very clear, the \$93,000 is for one standalone school. The \$135,000 is for a school campus. Which is, again... (CROSS-TALK)

CHAIRPERSON STEVENS: That didn't make it better.

EXECUTIVE DIRECTOR LAROCHEL: Right. It doesn't make it better...

ALL: (LAUGHTER)

EXECUTIVE DIRECTOR LAROCHEL: But I just want to clarify for the record...

CHAIRPERSON STEVENS: Oh my gosh. All right, I just want to say that didn't make it better— \$93,000, and the staffing model is four. Is that something that rolled over from MOCJ?

EXECUTIVE DIRECTOR LAROCHEL: Yes.

CHAIRPERSON STEVENS: Okay.

EXECUTIVE DIRECTOR LAROCHEL: Yes, it did roll over from MOCJ.

CHAIRPERSON STEVENS: Yeah, I wouldn't take this contract. That's a setup.

All right, providers have expressed concerns about the lack of dependability of year-to-year funding, which creates instability, and are calling for CMS funding to be baselined. Has the agency had discussions with OMB about baselining CMS funding?

EXECUTIVE DIRECTOR LAROCHEL: Yeah, really, really good question. I would say this, and you heard this in the opening remarks; however, we're excited that this year, in FY26, all the contracts have been registered and that these folks have been... (CROSS-TALK)

CHAIRPERSON STEVENS: They've all been registered?

EXECUTIVE DIRECTOR LAROCHEL: Yes, all have been registered.... (CROSS-TALK)

CHAIRPERSON STEVENS: Oh!

EXECUTIVE DIRECTOR LAROCHEL: And then they will be receiving 50% of their registered contracts.

CHAIRPERSON STEVENS: Because I remember, it was two years ago, didn't the Commissioner say that they were going to have an RFP that came out two years ago? That hasn't come out, did it? Hmm, okay. Well, he told me that. I remember Darryl was there in the meeting. I remember that. You were there.

COUNCIL MEMBER WILLIAMS: (UN-MIC'D)
(INAUDIBLE) the office?

CHAIRPERSON STEVENS: Yeah, at the office, yeah. They told me...

COUNCIL MEMBER WILLIAMS: (UN-MIC'D)
(INAUDIBLE)

CHAIRPERSON STEVENS: It was like a year ago, mm-hmm.

Providers have...

COUNCIL MEMBER WILLIAMS: (UN-MIC'D)
(INAUDIBLE)

CHAIRPERSON STEVENS: Huh?

COUNCIL MEMBER WILLIAMS: (UN-MIC'D)

(INAUDIBLE) she was there, too.

CHAIRPERSON STEVENS: She was? Didn't your guy say that? The RFP was coming out like a year ago?

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:

No, that the RFP process would begin.

CHAIRPERSON STEVENS: Nah, y'all said it was coming out. I was in that meeting.

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:

RFPs take...

CHAIRPERSON STEVENS: I know how long the RFP-- remember, I'm a provider. I know how long an RFP takes, but the concept paper, I remember in that meeting, they said it would be out that year, and yet, here we are.

The current CMS contract only funds eight-hour work days, five days a week, yet providers are often working around the clock in their communities. What changes can we expect to see in the upcoming RFP or content paper to ensure staffing levels, compensation, and operational support reflect the true demand of this work?

EXECUTIVE DIRECTOR LAROCHEL: Yeah, really good question.

So, a few things, folks do only work what we would call one "tour". Uh...

CHAIRPERSON STEVENS: Say that again, I'm sorry?

EXECUTIVE DIRECTOR LAROCHEL: One tour, one, tour, one...

CHAIRPERSON STEVENS: Oh, one tour?

EXECUTIVE DIRECTOR LAROCHEL: Yeah, one tour. Right? But we do... (CROSS-TALK)

CHAIRPERSON STEVENS: (INAUDIBLE)

EXECUTIVE DIRECTOR LAROCHEL: We are actively working with our providers on the ground to make sure that when there are high-violence periods, such as evenings and weekends, those times are staffed. Right? We understand that one tour is not enough; however, we want to ensure that when the providers are most needed, they're available to the community.

CHAIRPERSON STEVENS: So, how do they do that with just the one tour? So, what does the compensation look like if additional tours are needed?

EXECUTIVE DIRECTOR LAROCHEL: That's not a question I can answer right now. I mean, that's

something that we could get back to you on, Chair Stevens.

CHAIRPERSON STEVENS: I just find it crazy that we would just have one tour. And even when I was talking to providers, they said sometimes it's only about eight of them, which is crazy for a whole catchment area.

CMS contracts expire in June 2026, and providers are eagerly awaiting the RFP that will right-size the budget and increase pay across all positions. When can we expect the CMS RFP?

EXECUTIVE DIRECTOR LAROCHEL: So right now, we are through FY26, so we're good through FY26. I think we have an additional two years after FY26 in which we could extend these contracts.

CHAIRPERSON STEVENS: So, your expectation is to extend them for the next two years?

EXECUTIVE DIRECTOR LAROCHEL: Well, our expectation is to make sure that, you know, that in the interim period, we are working to figure out how to sustain these contracts.

CHAIRPERSON STEVENS: Hmmm... Given the drastic increase in CMS payment process time from 130 days in 2016 to 255 days in 2024, what reforms are

being considered to streamline procurement and ensure timely payments?

EXECUTIVE DIRECTOR LAROCHEL: One of the things that we do, and that we take great pride in, is the sort of white glove treatment, as the DYCD refers to it as, uh, especially with some of our founder-led organizations or supporter-led organizations that need a little bit more TLC. Right? Part of what we've been able to do is work one-on-one with those organizations to address any challenges they have and ensure that they receive payment in a timely manner. We absolutely understand that this work cannot happen unless folks are paid on time.

CHAIRPERSON STEVENS: Yeah, you guys know my fight about the payments. I think it's crazy that we-- and this is the City as a whole, and this is the whole, not just CMS, but all the groups. Not being paid is just unacceptable. As a city, we have to do better. And it just baffles me. And I keep saying, like, these-- all nonprofits, I would be running down on it, because you can't owe me millions of dollars and think I'm just going to do work.

ALL: (LAUGHTER)

CHAIRPERSON STEVENS: And not-- I'm showing up at your house. I don't know why you're not at Gracie Mansion every day saying, "Where's my money?" That's what I would be doing. But you know I can only give you my advice, because I'd be running down.

At the Executive Budget Hearing, DYCD noted that legal service providers have been doing excellent work in supporting young adults through referrals, hotlines, and workshops, and that these conversations with OMB were ongoing. Can you provide an update on the discussions and whether there has been any progress towards restoring funding for legal service providers?

EXECUTIVE DIRECTOR LAROCHEL: What I'll say in general is that we're, you know, consistently in communication with OMB to stabilize funding. Right? We understand that stabilized funding is necessary for our frontline workers. We want to make sure that we're also but... (CROSS-TALK)

CHAIRPERSON STEVENS: But this was a PEG, so this was cut, and this is something that I've been saying we need. And every time, last year, they would say, "Oh, we'll meet with the providers," and at the budget hearing, they would say that you guys are in

conversation with OMB. I'm just trying to get an update on what we're doing with this. Because, again, we can't piecemeal work, and I know that this was a PEG, but most of the PEGs have been restored. I'm trying to understand why the legal services piece hasn't been restored.

EXECUTIVE DIRECTOR LAROCHEL: (INAUDIBLE)...
(CROSS-TALK)

CHAIRPERSON STEVENS: Because it's a crucial part of the work.

EXECUTIVE DIRECTOR LAROCHEL: Again, Chair Stevens, we're still in constant, you know, in consistent communication with OMB just to stabilize our funding and just to make sure that we're addressing any emerging fiscal challenges.

CHAIRPERSON STEVENS: All right, so I'll call Jack myself.

What's the reason for the absence of CMS programs and violence-impacted areas like Harlem Precinct 28, West Harlem 26, Inwood 34, Washington Heights 30, and Longwood, the Bronx 41st? Are there plans to expand CMS coverage in those precincts?

EXECUTIVE DIRECTOR LAROCHEL: Again, you know, we want to use data to inform any decision that

we're making on the ground. Right now, our Summer Safety Plan is sort of an introductory or appetizer to what our future priority precincts might look like. As I mentioned earlier, we're in the 40th, the 44th, the 46th, the 42nd, the 73rd, the 77th, the 67th, the 32nd, the 23rd... (CROSS-TALK)

CHAIRPERSON STEVENS: Are you talking about the Summer Safety Plan?

EXECUTIVE DIRECTOR LAROCHEL: For the Summer Safety Plan, exactly...

CHAIRPERSON STEVENS: Don't worry, I got a lot of questions for that. I got a lot of issues with that, too. So don't worry, don't you worry your pretty little face.... (CROSS-TALK)

EXECUTIVE DIRECTOR LAROCHEL: (INAUDIBLE)

CHAIRPERSON STEVENS: We're going... We're gonna talk about that summer plan.

EXECUTIVE DIRECTOR LAROCHEL: We're in 13 precincts for the Summer Safety Program.

CHAIRPERSON STEVENS: I know.

How are you identifying communities in need of a program, and what barriers prevent your expansion into high-need areas?

EXECUTIVE DIRECTOR LAROCHEL: So again, I think it's important for us to make sure that we're utilizing and leveraging data for any type of on-the-ground decisions that we're going to be making with our providers. All right? So as Assistant Commissioner (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: So when you say you're using data, the data shows that these areas have high gun violence and have a lot of things going on. So, the data is already showing it; then, how are you using that data if we're not expanding there?

EXECUTIVE DIRECTOR LAROCHEL: (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: So...

EXECUTIVE DIRECTOR LAROCHEL: Sorry, please, continue...

CHAIRPERSON STEVENS: No, no, no, so that's what I'm trying to understand.

EXECUTIVE DIRECTOR LAROCHEL: Yes, so several criteria are attached with any additional precincts or catchment areas that we enter, including, as you mentioned, high violence, uh, rates of high violence. Right? But we also want to make

sure that we're able to implement this properly and safely.

CHAIRPERSON STEVENS: Based on the data, how can the City better understand why CMS programs succeed in some precincts but struggle to reduce shootings in areas like Brownsville or East Harlem, despite long-standing intervention efforts?

ASSISTANT COMMISSIONER RATHIEL: Thank you for the question. Yes, I think this is one of the reasons DYCD is really looking to get more on the ground for our implementation assessment: we know that there are essential components for the programs. We want to understand what's working in what context and what's happening in individual communities. So we want to make sure we have that kind of individual contextualized information.

CHAIRPERSON STEVENS: I never heard people talk about data so much, but using old data. It's really driving me crazy. So I'm going to pass it off to Council Member Williams right now.

COUNCIL MEMBER WILLIAMS: Thank you. I have some questions—lots of questions, actually. But some of my initial concerns stem from certain statements you made during questioning and in your testimony.

There was a discussion about the data and the fact that ONS supervisors or managers get the data first. Could you share a bit more about the internal hierarchy within ONS? Like, how does it trickle down from, I guess, assistant commissioner to executive director to supervisors, then to CMS providers themselves? And can you share a little bit about their expertise, such as who these people are? What qualifies them to do said job?

EXECUTIVE DIRECTOR LAROCHEL: On the ONS staff? (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: Macro, mm-hmm.

EXECUTIVE DIRECTOR LAROCHEL: Right. Yes, Dr. Christensen is the Deputy Executive Director, and we have a Data Unit. Additionally, we have a series of borough managers and IMs who work directly with our providers on the ground.

COUNCIL MEMBER WILLIAMS: Okay, and the expertise of the supervisors? Because you said the supervisors are the ones who triage data, or is it the Data Team that triages the data before?

EXECUTIVE DIRECTOR LAROCHEL: Right. Yeah, so what typically happens is that we receive the data, and I want to be very, very clear here— DYCD is

not the only City agency that's, you know, in charge of this data. Right? So we're receiving this data from the NYPD. And so we have an agreement with the NYPD on how we can distribute this data... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: Yeah, I just wanted to understand... (CROSS-TALK)

EXECUTIVE DIRECTOR LAROCHEL: (INAUDIBLE) and so...

COUNCIL MEMBER SCHULMAN: I'm trying to get a sense of the expertise that is essentially filtering things down to the ground. Like, who are these people?

EXECUTIVE DIRECTOR LAROCHEL: So our Ims are... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: And I'll Google you guys to figure out who you are-- like, what you got your PhD in. I'm just trying to understand what qualifies you and the people who work under you, to...

EXECUTIVE DIRECTOR LAROCHEL: Yes, so our IMs work directly-- we have IMs that work directly with our providers who are on the ground. Right? We have an IM that represents each borough, and these

are folks who serve as thought partners with the providers to troubleshoot challenges that they might be going through. They do site visits... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: So are they triaging the data?

EXECUTIVE DIRECTOR LAROCHEL: So triage, using that verb... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: You used that word...

EXECUTIVE DIRECTOR LAROCHEL: In other words, I did use that verb, but using that verb, what I meant was that the data comes to our IMs, and our IMs are able to pass it along... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: So, what's an IM?

EXECUTIVE DIRECTOR LAROCHEL: The Initiative Managers, excuse me.

COUNCIL MEMBER WILLIAMS: Okay.

EXECUTIVE DIRECTOR LAROCHEL: So the Initiative Managers are able to take that data to the appropriate provider on the ground and share it with them. And they're able to think through what a response would look like.

COUNCIL MEMBER WILLIAMS: Okay, the other question I had on the testimony was about

"intentional integration into DYCD's network of services". I heard the words, but how does that operate in practice? What does that look like?

EXECUTIVE DIRECTOR LAROCHEL: DYCD obviously has, for a very long time, done youth services and community development work. What we are able to leverage are the existing resources within DYCD, including their workforce initiatives and data systems, to synchronize them with the work happening on the ground. That also helps inform the work happening on the ground. So, CMS is obviously a collection of concerned citizens and community-based organizations that want to make their community safer. Right? So when you speak to a credible messenger, the one thing they'll tell you is that you can't tell somebody to put a gun down unless you give them something to pick up, unless you...

COUNCIL MEMBER WILLIAMS: Mm-hmm.

EXECUTIVE DIRECTOR LAROCHEL: a viable alternative. And a lot of those alternatives, such as youth services and workforce programs, live at DYCD. So we're trying to synchronize that with the...

(CROSS-TALK)

COUNCIL MEMBER WILLIAMS: Yes, so how does that actually work? So if I'm at, you know, Erica was looking at me, so I'm at (INAUDIBLE) I'm trying to do some type of workforce program at DYCD, how are you all integrating that? What does that look like? Because you're saying "trying", but then are you doing it, or are you trying to do it? Like, what does that look like in practice? I'm a very practical person. I need to know, like, do we send them here, and then we do this? What does it look like?

DEPUTY DIRECTOR WILLIAMS: So, two examples: one, we have a Neighborhood Strategies Group that is under Deputy Commissioner Rattray, and they have Neighborhood convenings that the CMS providers are invited to, along with COMPASS providers, which is Afterschool, our workforce providers... (CROSS-TALK)

CHAIRPERSON STEVENS: That was my brainchild.

DEPUTY DIRECTOR WILLIAMS: Well, it is happening, uh, neighborhood-- so we do hear you and listen. Then there's by initiative, where if you want CRED, for example, or any of our workforce programs, we would present at a (TIMER) CMS contractor hearing to talk about the workforce programs and how to make

the referrals between, for example, CRED and a CMS provider.

So, there's the neighborhood and then there's a program initiative as well.

COUNCIL MEMBER WILLIAMS: Okay, you also testified that CMS programs now receive standardized site visits, and you talked about the evaluation. So I just wanted to get clarity. Do you now have a standard evaluation process across all sites?

ASSISTANT COMMISSIONER RATHIEL: Yeah, so there are kind of two different pieces to the evaluation. So there's what I call a "little e evaluation" and a "big E evaluation," so there's an evaluation that's referring to the "little e evaluation" that is really our evaluation and monitoring system at DYCD. And that also lives in DYCD Connect. Across all DYCD programs, we conduct EMS evaluations, also known as Evaluation Monitoring Evaluations, which have standardized indicators based on universal concepts across the agency, and then specific to the program areas and their scopes and goals.

Each program under CMS has specific indicators and a structured schedule. For example,

for Cure Violence, quarterly site visits are conducted, where initiative managers go out into the field, assess indicators, and enter them into the system in a standardized manner.

COUNCIL MEMBER WILLIAMS: Okay. Another question regarding your testimony— I didn't even get to my actual questions. You mentioned that DYCD also regularly convenes with the NYPD to understand data trends. Are the CMS providers part of those discussions, or are these just the people who work directly for DYCD?

(PAUSE)

EXECUTIVE DIRECTOR LAROCHEL: Yes, so, right now, we do meet regularly with NYPD to discuss data trends, as you mentioned, Council Member. Currently, those meetings are held exclusively between the NYPD and DYCD.

COUNCIL MEMBER WILLIAMS: I want to believe that y'all are like experienced, but I'm struggling to understand the triage system that you all have.

EXECUTIVE DIRECTOR LAROCHEL: Maybe triage isn't the best word... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: About the evaluations, can you share the reports, the reports that you have generated through your evaluations?

ASSISTANT COMMISSIONER RATHIEL: Yes, we can get back to you, and I believe a lot of it will be our open data as well.

COUNCIL MEMBER WILLIAMS: Okay, and then you also mentioned this, and it was in the testimony about contractual scopes. Can you explain what those scopes are?

ASSISTANT COMMISSIONER RATHIEL: Sure, speak about the scopes?

COUNCIL MEMBER WILLIAMS: The scopes in the contracts.

UNKNOWN: (UN-MIC'D) (INAUDIBLE)

COUNCIL MEMBER WILLIAMS: The scopes in the CMS provider contracts? Because you testified and said specifically that, "The result was the need-- you, "onboarded programs into the agency and assessed not only their scopes, but also their data collection needs. The result was the need to further clarify metrics through contractual scopes."

And when I asked the question about data and reporting, it was also mentioned that a part of

the metrics used to evaluate groups is based on their "contractual scopes". So I wanted to know what those contractual scopes are.

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:

Sure, I mean, the scope outlines the key deliverables and activities. In the testimony, it was described that the core model within the community-led approaches to public safety scope is a Cure Violence Model. So, it would outline the canvassing work that happens on the ground in community. It examines the key metrics, goals, and deliverables, for example, the case load for an outreach worker.

So, it sets the model, deliverables, and program activities, and then it also sets the model (INAUDIBLE)... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: So, only canvassing and case management of.... (CROSS-TALK)

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:
(UN-MIC'D) No, it's a... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: Okay, okay...

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:
(UN-MIC'D) No, it sets-- It's a very long scope. I'm sure we can follow up and share the...

COUNCIL MEMBER WILLIAMS: We have asked for that before when CMS was under MOCJ. The Administration didn't provide us with the information. We asked for this almost three years ago now, and we never got it. It's hard to even intelligently analyze or critique something that we don't even-- like, we don't know what you're asking them to do. And that was never given to us, so it's...

CHAIRPERSON STEVENS: (UN-MIC'D) It was given, but it was redacted.

COUNCIL MEMBER WILLIAMS: Yeah, it was given, but they redacted the actual scopes of the contract. So, it's something that we struggled to get... (CROSS-TALK)

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN: (UN-MIC'D) We'll follow up on that to get an answer for you on....

COUNCIL MEMBER WILLIAMS: Okay.

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN: (INAUDIBLE) share those scopes. I think they're about 10 pages long, single-spaced, and they're very detailed about hours, locations, staffing models, and

the job descriptions for the different required staffing levels... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: Okay.

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:

They're caseload specific, so we know that this is work that requires lower caseloads because each young person needs more time, so we set out the standard of 10 to 15 per outreach worker for a caseload. So, it's the way to describe and translate a model into practices, and then to set milestones for those practices to say, "This is what the expectation would be at scale." And then of course implementation happens, and implementation meets challenges, and so the scope is the guideline for the goals of the program and how-- and very transparently how it will be monitored in terms of meeting those scope-level goals.

COUNCIL MEMBER WILLIAMS: Okay, how is DYCD ensuring uniformity in funding, training, and operational support across all CMS sites?

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:

Well, I can say that every-- so all full catchments receive the same funding amount, and we have a handful of just a very tiny number of partial

catchments, but each full catchment is funded at \$1.6 million. And again, it has the same standardized scope and hiring requirements.

Each scope requires a program director and a specific number of outreach workers. So those standards for milestones, staffing requirements, data reporting, and incident reporting are all standardized across all scopes. And now, with the integration within DYCD Connect, we have both data reporting, where all CBOs report the same metrics into the system.

And then also the flip side of that system, which Jessica described, is the EMS, which is the way for the initiative manager to be really-- I mean, we're in partnership with our partners that are doing the work on the ground to identify--you know, here's the universal indicator. Some of them, like Jessica mentioned, are things like is the physical environment of the office safe? Right? Any program would need to demonstrate that it's operating in a safe environment in terms of the fire lanes not being blocked and that there is a welcoming environment.

And, then... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: So, all CMS groups are uniform in terms of funding, training, and operational support?

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN: Yes, we offer the same...

UNKNOWN: (UN-MIC'D) (INAUDIBLE)

COUNCIL MEMBER WILLIAMS: I'm looking at a contract award, and one group is getting "x" amount, and then we look at other CMS groups, and they're getting another amount. I don't...

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN: So I can answer-- Okay, I think I understand what you're asking. Each catchment is the same standardized amount. If you're asking, does every CBO receive the same amount of funding? The answer is no, because each CBO has a different collection of contracts. So one CBO might have three catchments, another... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: So there's no uniformity? Are...

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN: They're... the...

COUNCIL MEMBER WILLIAMS: We can move on. There's no uniformity, there's no uniformity, even if

there are different contracts, that's to say that, like, one maybe has, you know, contract ABC, or one may have contract D, it still results in a lack of uniformity in terms of what... (CROSS-TALK)

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:

(INAUDIBLE)... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: can be provided to the community under CMS. No? Why is everyone so confused?

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:

Absolutely, but I was mentioning the scope requirements. So there's... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: I know, but the question was just in general. But we can move on. I don't think the answer is like... (CROSS-TALK)

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:

Yeah, and also... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: There's no true uniformity, really.

Are all sites receiving funding that reflects the true cost of operations?

EXECUTIVE DIRECTOR LAROCHEL: Well, listen, I think-- I think we can always-- this is a model in which we could add more funding to, obviously.

COUNCIL MEMBER WILLIAMS: Okay.

EXECUTIVE DIRECTOR LAROCHEL: Right now...

(CROSS-TALK)

COUNCIL MEMBER WILLIAMS: That's fine...

EXECUTIVE DIRECTOR LAROCHEL: There is

(INAUDIBLE)... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: It's giving me a political answer.

How is DYCD coordinating with other agencies? So, like, the Public Advocate mentioned like integration, and that's actually my biggest gripe. I have two big gripes—one is the lack of uniformity, and I know that different communities and providers are experts in certain areas. I can call out different ones that I know are good in the workforce versus therapeutic healing models. So, I know that not everybody needs the same thing, but uniformity and the lack of true integration are probably like my biggest gripe with the system.

How is DYCD coordinating with other agencies, such as the NYPD, DOHMH, New York City Public Schools, ACS, and others, to institutionalize CMS as a core part of public safety infrastructure?

EXECUTIVE DIRECTOR LAROCHEL: The first step that we're taking is that we are collaborating with other city agencies. We are collaborating with the city agencies you just mentioned, Council Member. We collaborate with DOHMH on hospital-based violence intervention programs. DOHMH also provides a strong messenger project to our folks on the ground, which includes individual and group therapeutics for credible messengers. We know that credible messengers suffer from compassion fatigue, vicarious trauma, etc. Right? So we're working with them in that sense. We're working with ACS with their Close to Home Initiatives, right? Providing conflict mediation, conflict mediators, and credible messengers on-site at their facilities. We're working with NYPD around data. Obviously, you know (INAUDIBLE)... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: But, isn't that like a separate contract? Like, I know of a CMS group... yeah, like, that's not-- that's not you.

EXECUTIVE DIRECTOR LAROCHEL: Yeah, that... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: Like, it's a separate contract. For instance, I know some CMS

providers that are working in a secure facility in Queens.

EXECUTIVE DIRECTOR LAROCHEL: Right, those are... (CROSS-TALK)

UNKNOWN: (INAUDIBLE)

COUNCIL MEMBER WILLIAMS: That's a separate contract... (CROSS-TALK)

EXECUTIVE DIRECTOR LAROCHEL: Those contracts are... (CROSS-TALK)

UNKNOWN: (UN-MIC'D) (INAUDIBLE) with DYCD...

EXECUTIVE DIRECTOR LAROCHEL: Yeah.

COUNCIL MEMBER WILLIAMS: So, they're through CMS?

EXECUTIVE DIRECTOR LAROCHEL: Yes, through CMS... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: Okay.

EXECUTIVE DIRECTOR LAROCHEL: Exactly. That's the magic of CMS. CMS has these wraparound services that, when you connect them to folks who are on the ground, who are at elevated risk of being involved in violence, it inherently reduces their risk of being involved in violence.

DEPUTY EXECUTIVE DIRECTOR CHRISTIANSEN:

So, DYCD also funds the hospital-based violence intervention work. We work closely with H+H and DOHMH, as Cliff mentioned. This includes working inside secure and non-secure detention facilities with our partners at ACS, and, of course, collaborating closely with New York City Public Schools for the youth enrichment programs.

We meet with them biweekly, more really—we have set meetings every other week. There's data sharing in terms of program outputs between the agencies. We are in close collaboration with our agency partners. So... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: Yeah, last time the commissioner was here testifying, we asked about the integration specifically with CMS providers, not—I'm sorry, not you—but like how it trickles down. And the only thing that he mentioned was that CMS providers are invited to roll call at the police precinct, which I found completely inadequate for developing relationships with local precincts.

Do you have anything else you'd like to add about how you're working to help integrate the CMS providers into the public infrastructure, such as on

the grounds? Not high-level, because I feel like there are a lot of high-level conversations, but not many on-the-ground conversations.

EXECUTIVE DIRECTOR LAROCHEL: On the ground with other city agencies? With the work that they're doing?

COUNCIL MEMBER WILLIAMS: Yeah, and the CMS groups who are actually doing the work.

EXECUTIVE DIRECTOR LAROCHEL: So part of what we're doing with NYPD, I could tell you, Council Member, is we're working with them on a joint curriculum where we're integrating the CMS work into the PD curriculum, so that they understand that there are other folks are occupying these spaces and who are interfacing with the same populations that they're interfacing with. Right? So... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: I think that sounds like a great thing long term, but I don't think it speaks to what you're currently doing to make those connections.

EXECUTIVE DIRECTOR LAROCHEL: Well, yeah, so we're, again, that's something that I wouldn't call a long-term goal, but it's something that we're currently doing, again, to just further integrate our

CMS work into some of the public health-- excuse me, the public safety infrastructure in the City.

COUNCIL MEMBER WILLIAMS: Do you have any short-term goals?

EXECUTIVE DIRECTOR LAROCHEL: The short-term goal is to make sure that we get these folks paid and to continue to support... (CROSS-TALK)

COUNCIL MEMBER WILLIAMS: Okay, let me just quickly ask the rest of my questions before the Chair kills me.

How are you incorporating the leadership and guidance of community-noted experts, the original architects of this system, and current operators in design capacity and policy implementation?

EXECUTIVE DIRECTOR LAROCHEL: Yes, so again, we have weekly and biweekly meetings with our providers who are on the ground. We also hold monthly steering committee meetings and various touchpoints where we invite providers to share their input and recommendations. And that's something that we are always working on to better this entire mode and system.

COUNCIL MEMBER WILLIAMS: Okay. That's all for now.

CHAIRPERSON STEVENS: Well, I'm back. So, I think-- You know it's always great, because in real-time, I get text messages from providers and stuff like that. There was one thing I wanted to ask about. I know that when CMS first moved to DYCD, there were huge convenings with all the providers in the area. They were bringing together the Afterschool Program provider, Cornerstone providers, and everyone so they could get to know each other. But some providers just texted me that not everyone was invited. So how often are those meetings happening? And are they happening? And what does the outreach look like? Because some of the CMS groups present in this room have stated that they were not aware of or not invited to those meetings. That's very concerning to me.

DEPUTY DIRECTOR WILLIAMS: I'll need to get back to you on that, as I said, Deputy Commissioner Rattray's team oversees it. I know the convenings are happening (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: Well, I know they happen. I was invited to come... (CROSS-TALK)

DEPUTY DIRECTOR WILLIAMS: I don't have the list of who was or wasn't invited. But I know that

they are continuing to happen (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: So, there's...
(CROSS-TALK)

DEPUTY DIRECTOR WILLIAMS: (INAUDIBLE)

CHAIRPERSON STEVENS: Currently?

DEPUTY DIRECTOR WILLIAMS: Yes. I will get
back to you. They have a whole Neighborhood
Strategies Team now, so that is what they focus on...
(CROSS-TALK)

CHAIRPERSON STEVENS: I'm telling-- I know
some of them happened, because I was invited to some,
and I attended some. But what I am saying to you is,
as we were sitting here, providers texted me and said
they have not heard of these meetings, and they were
not invited. And so that is a red flag that I am
flagging for you. So, if they continue to happen, we
need to ensure that we're doing all the necessary
outreach, because I think it's important. And that
was one of the things that I talked about a lot
before they came over, around how we're going to make
sure that they have access to all the things--
sometimes the spacing, and how we're doing
collaborative programming and working together. So,

I just want to make sure that we're doing that. And don't worry, I know you'll go back to Darryl, but I will be texting him as well.

EXECUTIVE DIRECTOR LAROCHEL: It's never our intention not to... (CROSS-TALK)

CHAIRPERSON STEVENS: Things happen...

EXECUTIVE DIRECTOR LAROCHEL: integrate the entire CMS (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: As we sit here, folks have texted me and said they did not hear about these meetings.

EXECUTIVE DIRECTOR LAROCHEL: Fair enough.

CHAIRPERSON STEVENS: So I'm telling y'all. And then the other thing is, there was some around CMS and Cure Violence. So, they wanted me to also point out that Cure Violence is what they do in Chicago, and CMS is what we have here. And what you guys have been talking about has been more about Cure Violence. So I know when they come up to the dais, our providers are going to make sure that they clarify that, because they also feel like even how it's being explained is not correct. And so maybe that's some of the disconnect that we're having, because what you guys are talking about isn't what

they're doing. And I'm getting a whole bunch of text messages about that as well. But I'm sure they'll clear it up. So hopefully, you'll stay around so you can hear them give the history lesson.

How has the agency been engaging CMS providers since the transition in DYCD, both in understanding the challenges involved and in shaping future program design and evaluations? Could you talk a little bit about some of the-- Well, no, we already talked-- You know what? I am going to ask another question.

How does DYCD coordinate across the several agencies-- oh, you already asked this one.

CHAIRPERSON WILLIAMS: I did?

CHAIRPERSON STEVENS: You did.

How is DYCD integrating CMS violence interruption work in their youth services, such as Cornerstones and Beacon programs?

EXECUTIVE DIRECTOR LAROCHEL: That's a wonderful question, so again, our Gun Violence Prevention Task Force is activating spaces over the summer--Cornerstones and Beacons.

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2 CHAIRPERSON STEVENS: You know what? You
3 want to talk about the summer program so much, let's
4 get to it.

5 EXECUTIVE DIRECTOR LAROCHEL: Well, it's
6 summer... (CROSS-TALK)

7 CHAIRPERSON STEVENS: Let's get to it.

8 EXECUTIVE DIRECTOR LAROCHEL: (INAUDIBLE)...
9 (CROSS-TALK)

10 CHAIRPERSON STEVENS: You brought it up 500
11 times like it's the best thing ever, and I got a lot
12 of issues with it already...

13 EXECUTIVE DIRECTOR LAROCHEL: Well...

14 CHAIRPERSON STEVENS: You keep bringing it
15 up, so let's go to it.

16 EXECUTIVE DIRECTOR LAROCHEL: Well, it's the
17 summertime, so we want to make sure that we're...

18 (CROSS-TALK)

19 CHAIRPERSON STEVENS: Oh, I know it's
20 summertime, and I'm in the Bronx, so trust me, I
21 know. My district sometimes turns into a shooting
22 range. So this means a lot to me. And I know, like I
23 said, I met with this Task Force last week, and they
24 had a plan that you guys put together. You're in 13
25 precincts, and you're activating these sites. One of

my biggest concerns is the people that we're trying to get to go into the site. So, how will this work? What's the plan around them?

EXECUTIVE DIRECTOR LAROCHEL: The plan is to make sure that we're fully integrating our CMS providers. Because we understand that the CMS providers are the (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: What does that look like in real-time? So, you're saying, integrating – what does that look like? Walk me through it. You're saying integrating, but I thought you guys said they were already integrated. But what does that look like?

What are they going to be doing in the program? Because I know with the Cornerstones, a lot of times the cops are there, and they're required to be. Our CMS groups are going to be there. Can you walk me through what that looks like?

EXECUTIVE DIRECTOR LAROCHEL: With co-locator agreements, we're going to be able to engage our CMS partners and, by proxy, the folks who are at elevated risk of being involved in violence. Hopefully, they'll be able to take advantage of these

safe spaces—Cornerstones and Beacons—that are going to be... (CROSS-TALK)

CHAIRPERSON STEVENS: So, at all 13 sites, do you guys have a CMS group that's going to be assigned to that location?

EXECUTIVE DIRECTOR LAROCHEL: Yes, we should, I believe. Yes, we do, yep.

CHAIRPERSON STEVENS: Okay. How have providers, including the CMS groups, given input on this plan?

EXECUTIVE DIRECTOR LAROCHEL: Well, we've been meeting with the CMS providers around the Summer Safety Plan. Right? So, this... (CROSS-TALK)

CHAIRPERSON STEVENS: I know you've been meeting with them; that's not what I'm asking. How has their input been implemented into the plan?

EXECUTIVE DIRECTOR LAROCHEL: We've been meeting with them, we've been receiving feedback from them in these meetings, and we've been asking them how we can transform this space for their young people and participants... (CROSS-TALK)

CHAIRPERSON STEVENS: But some of the programs-- but, that's where I'm confused, because

that's why I'm saying, how did they input? Because remember, you now know the programming.

So, the places that you're activating are typically the Cornerstones, right? That's where you're activating. The CMS providers are not necessarily the same people who are doing that work. So, you're saying that you've been talking to the providers. I'm saying specifically, how are we integrating the CMS workers into this work? And how's their input been implemented? Because we know, sometimes it might be a different provider who's on a different site, and doesn't always work out as nicely as we're saying it.

That's why I'm asking you to walk me through it, because just saying we've been meeting with them doesn't mean that's all we need to do.

EXECUTIVE DIRECTOR LAROCHEL: Yes, so we do have the co-locator agreements between the Cornerstones and specific community-based partners for them to be able to utilize that space. Right?

CHAIRPERSON STEVENS: So what will be the responsibility of the provider, and what will be the responsibility of the CMS groups that are there?

EXECUTIVE DIRECTOR LAROCHEL: So, the provider would have to create this safe, and then the groups can come in and utilize that space as they see fit. Right? So part of it... (CROSS-TALK)

CHAIRPERSON STEVENS: Okay, so walk me through it. Because I still don't understand it. Right? Say I'm a provider, and I have this community center, and I'm running a program. I'm in charge of running the program. What is the CMS group doing? Because they're not the same people.

EXECUTIVE DIRECTOR LAROCHEL: No, they're not the same people... (CROSS-TALK)

CHAIRPERSON STEVENS: I know.

EXECUTIVE DIRECTOR LAROCHEL: What I'm saying is, the CMS site or the CMS provider is going to be invited into this space to be able to utilize that space with their participants (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: But, how-- Okay, but that's-- understand my push back... (CROSS-TALK)

EXECUTIVE DIRECTOR LAROCHEL: And there's going to be an agreement in place... (CROSS-TALK)

CHAIRPERSON STEVENS: where confusion is, right?

EXECUTIVE DIRECTOR LAROCHEL: Right.

CHAIRPERSON STEVENS: Because it's an agreement, right? So, other than an agreement, this is why it doesn't make sense. Because if you have a provider who is providing programming and has their own program, then is CMS just coming to use the space?

EXECUTIVE DIRECTOR LAROCHEL: Yeah, they are coming to a safe space where young people can thrive, they can play sports, they can work on a resume, they can work on a cover letter, like, that space is going to be utilized... (CROSS-TALK)

CHAIRPERSON STEVENS: So, I just want to tell you... (CROSS-TALK)

EXECUTIVE DIRECTOR LAROCHEL: as they see fit... (CROSS-TALK)

CHAIRPERSON STEVENS: I'm asking, I'm giving push back, I ran community centers for 20 years. So, this is why I'm giving pushback, because I already know how I'm rolling. If somebody comes in, like, you have to have an agreement to do work here, what does that look like? What are their responsibilities? What are my responsibilities? Are they bringing their own kids? Do they have to do their own recruitment?

Even with the agreement, we still need things to be outlined.

EXECUTIVE DIRECTOR LAROCHEL: Right.

CHAIRPERSON STEVENS: So, that's why I'm asking what is in the agreement? What is the responsibility of the provider? Are they just providing the program? Are the CMS groups just coming to show up? Do they need to bring their own kids? What is the agreement?

EXECUTIVE DIRECTOR LAROCHEL: Yes, the CMS provider can bring their participants, and their (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: But, is that a requirement of the agreement? Because I am telling you, if you haven't thought about this, I am telling you it is going to be a problem now.

EXECUTIVE DIRECTOR LAROCHEL: So... (CROSS-TALK)

CHAIRPERSON STEVENS: Because I would have a problem with this. As a director of a community center, I would have a problem if you are just, like, "Hey, we're providing space, so that means don't talk to my kids." Because that's what will happen, too, let's not pretend as if people won't come in and be

1 like, "All right, well, where are your kids? Did you
2 bring kids?" That's why I'm asking: what is the
3 responsibility of the provider, and what is the
4 responsibility of CMS?

6 EXECUTIVE DIRECTOR LAROCHEL: So, Chair
7 Stevens, I think globally the important thing to
8 understand here is just the activation of spaces. The
9 Gun Violence Prevention Task Force is a sister
10 program...

11 CHAIRPERSON STEVENS: Mm-hmm!

12 EXECUTIVE DIRECTOR LAROCHEL: within DYCD.
13 Right? I could leave it up to them to provide
14 specifics after the hearing. But, right now, as it
15 relates to CMS providers, I think activation of space
16 is the important thing... (CROSS-TALK)

17 CHAIRPERSON STEVENS: You guys should not be
18 a sister program. You guys should all be working
19 together. So, that is my frustration in the moment. I
20 am just a little frustrated because you should be
21 able to say, "Hey, yes, in the agreement, CMS is
22 coming in, and they are going to do bop, bop, bop,
23 bop, they're going to help with recruitment, they're
24 going to do outreach, and the providers are going to
25 be able to provide the space, the programming,

they're going to be doing these specific activities. People have to submit work scopes, which is why I am a little confused about what the vision is. It seems a little bit all over the place. It also seems disconnected, because when I spoke with the task force, that's not what it seemed like they were doing either, so I'm a little confused. I'm not going to lie to you, because I feel confused.

SENIOR ADVISOR ALAWODE-EL: (UN-MIC'D)

(INAUDIBLE) I'm not sworn in.

CHAIRPERSON STEVENS: No, we can swear you in. Don't worry, it takes 30 seconds.

COMMITTEE COUNSEL: Hi, just raise your right hand. Do you affirm to tell the truth, the whole truth, and nothing but the truth, before this committee, and to respond honestly to council member questions?

SENIOR ADVISOR ALAWODE-EL: Yes.

COMMITTEE COUNSEL: Thank you.

SENIOR ADVISOR ALAWODE-EL: So, just in terms of the Summer Safety Plan, we just had planning meetings with CMS providers and Cornerstone and Beacon providers yesterday. So, we are in the process... (CROSS-TALK)

CHAIRPERSON STEVENS: Right before the hearing. (LAUGHS).... (CROSS-TALK)

SENIOR ADVISOR ALAWODE-EL: We are in the process. (LAUGHS) I mean, this is all happening in real time, it's summertime, I know. But we're in the process of figuring that out. But the goal is for CMS to come in and provide programming to do outreach and engagement with their young people, but also to co-design what the program overall looks like within the Cornerstone or the Beacon, where the set activity is going to be happening... (CROSS-TALK)

CHAIRPERSON STEVENS: So, do you guys understand my pushback? Because in a perfect world, it's like, "Okay, they're just going to come in and do programming." I'm just saying that there needs to be real, tangible agreements between the two.

SENIOR ADVISOR ALAWODE-EL: Absolutely.

CHAIRPERSON STEVENS: Because it's not to just be like, "Oh, everybody's going to show up and we're going to be in harmony." We already know that this is part of the problem, and we've set the system up this way, where people are fighting against each other in programs as opposed to working together.

So coexisting sometimes takes time. And I have the same argument with some Summer Rising. Don't get me started.

So, why are we now going to create another chaotic system in the Cornerstones? So, for me-- and it's a little different, right? Because the provider then is going to be, like, "This is my space," and now you're going to have other people entering their space. I think we need to have much clearer lines of what the expectations are for CMS groups when they enter the building, what the provider's expectations are, and what that looks like. We cannot just leave it up to saying we're going to figure it out. I just want to make sure. That's why I'm pushing back so hard. I was in a gym for 11 years. I had three programs. I'd have been like "You guys are crazy."

SENIOR ADVISOR ALAWODE-EL: And I appreciate the feedback. As I mentioned, we are currently in the process of planning. We've initiated a planning process, which is happening. So, certainly, we'll take these notes and incorporate them into our plans. (INAUDIBLE) Some things that we have been considering, and why we know we need to work with both the youth service providers, as well as the CMS

providers, to develop the plan before we get to
(INAUDIBLE).

CHAIRPERSON STEVENS: How are you guys
working with the council members to implement this
plan? I know specifically in the Bronx, we've been
talking about a summer safety plan, because we have
so many shootings, and it's so reactionary. I'm just
trying to gain a better understanding of how you're
working with the Council as well.

SENIOR ADVISOR ALAWODE-EL: So one of the
things that we're planning on doing, and that I think
Andrew is helping us pull together, is briefings with
all of the council members in the impacted precincts,
so that they're aware of the plan and (BACKGROUND
NOISE) (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: I'm sorry, if folks
are stepping out, could you please step out? We are
still in the middle of a session. Thank you.

SENIOR ADVISOR ALAWODE-EL: So that they are
aware of the plan and we can engage their offices in
supporting the plan.

CHAIRPERSON STEVENS: I just want to say, I
know a lot of CMs get upset because we always feel
like we are getting briefed and are not part of the

process. And then what happens is that we receive backlash when things come, because our office is usually the first line of defense. I think that if you are still in the planning phases and have only 13 districts, it would be beneficial to see how involved those members might want to be, as this does affect them in a real way.

Okay, I think that's all I have for the Summer Safety Plan. Okay, no-how are we integrating NYPD into the Summer Safety Plan? Because I know that's usually a big thing, when those sites are activated, the NYPD is typically activated. Don't get me started; it kind of annoys me.

SENIOR ADVISOR ALAWODE-EL: We are in the process of trying to get a planning meeting on the calendar with NYPD. I know Darryl and others have been in touch. We are certainly working to integrate them into the plan.

CHAIRPERSON STEVENS: Okay. I have some questions about legislation— Intro 992. What details does DYCD believe are appropriate to share publicly and with stakeholders about provider contracts and obligations?

EXECUTIVE DIRECTOR LAROCHEL: So I'd say generally speaking, ONS supports efforts to promote transparency and community engagement. We appreciate the bill's intent and alignment with CMS values, but we're still reviewing it to ensure that it aligns with our objectives and to gauge the implementation impacts.

CHAIRPERSON STEVENS: What is DYCD's current process for informing council members, community boards, and NYPD precincts about the providers' assessments in their districts? I mean assignments in their district, sorry.

EXECUTIVE DIRECTOR LAROCHEL: Assignments in the district? Probably need to get back to you on that.

CHAIRPERSON STEVENS: I can tell you're not... it's not one...

EXECUTIVE DIRECTOR LAROCHEL: Well, we have regular-- Yeah, we'll have-- Yeah, we'll (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: It's not one. It's okay.

EXECUTIVE DIRECTOR LAROCHEL: We have regular meetings, yeah. Uhm, (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: I mean, there is no regular-- I mean, I know my CMS groups, because I'm very active and I talk to them and I call them all the time and...

EXECUTIVE DIRECTOR LAROCHEL: Right.

CHAIRPERSON STEVENS: And we work closely. But I don't think that there's a formal process.

Does DYCD have significant resource needs to improve the website, updating, reporting, or notifications systems required by this bill? So, do you have adequate resources to be able to implement this on your websites?

EXECUTIVE DIRECTOR LAROCHEL: Yeah, we're currently working on updating our website right now.

CHAIRPERSON STEVENS: Well, I think those are all the questions I have for now. I mean, it wasn't too bad, was it? I told you they set you up at the start of it. But thank you guys for coming, we are going to open-- Oh, I have to read this?

We will now open the floor for public testimony. Thank you, guys, for coming in.

I now open the hearing for public testimony. I remind the members of the public that this is a formal government proceeding and that decorum must be observed at all times. As such, members of the public shall remain silent at all times.

The witness table is reserved for people who wish to testify. No video recording or photography is allowed from the witness table.

Further, members of the public may not present audio or video recordings as testimony, but may submit transcripts of such recordings to the Sergeant at Arms for inclusion in the hearing record.

If you wish to speak at today's hearing, please fill out an appearance card with the Sergeant at Arms and wait to be recognized. When recognized, you will have two minutes to speak on today's hearing topic: *Evaluating the Crisis Management System Under DYCD*.

If you have a written statement or additional testimony you wish to submit for the record, please provide a copy of that testimony to the Sergeant at Arms.

I will now call the first panel: Dr. Charles, David Caba, and Galloway from the Ali Forney Center.

(PAUSE)

COMMITTEE COUNSEL: Lamaria from the Gun Violence Prevention Task Force?

COMMITTEE COUNSEL: She spoke (INAUDIBLE)

COMMITTEE COUNSEL: Oh, she's...

(PAUSE)

GALLOWAY: Good afternoon, Chair Stevens, and the Members of The Committee of Children and Youth. My name is Galloway, and I serve as the Advocacy Manager at the Ali Forney Center, the nation's largest organization dedicated to housing and supporting LGBTQ homeless youth.

I'm here today to talk about our strong support of Intro 1245 and Intro 1246, because our youth deserve more than a system that simply ages them out; they deserve a city that ensures they are seen, supported, and set up to thrive. Every day at Ali Forney Center, we meet young people, most of whom are Black, brown, trans, and queer and non-binary youth who are forced to leave foster care at the age of 21 and land in the shelters the next day.

In NYC, over nearly a thousand young people age out of foster care each year, and the outcomes are devastating. Within one year, 10% enter homelessness, and by year three, that doubles. What we know is that the data shows 31% of individuals remain in care past 21 years in 2023. So why is this? Because we failed to build bridges from foster care to stable adult housing. And in order to do that, we need to make sure that we bridge those gaps with Intro 1246 by establishing a program to support youth aging out of foster care. When we finally recognize that turning 21 doesn't necessarily mean they're ready to navigate housing, employment, and healthcare, why are we setting them up for that?

Also, just want to name that the support of 1245 is equally critical, because without comprehensive data, we cannot ensure that we have sexual orientation, gender identity, and the full needs to be able to support those youth, especially LGBTQ youth, so just ensuring that we get disaggregated data helps us drive solutions and better meet the needs of those youth. We are failing them, and these bills and policies are going to be

there to protect them and ensure that we have the investments needed in place.

We urge you to pass Intro 1246 and 1245 to ensure young people leave with care and can see themselves thriving more in this city. Thank you very much for this opportunity to testify. If you have any questions, I am here to answer them.

(PAUSE)

SENIOR VICE PRESIDENT CABA: Good afternoon.

CHAIRPERSON STEVENS: Hello.

SENIOR VICE PRESIDENT CABA: Thank you, Chair Stevens, and the Members of the Children and Youth Committee, for the opportunity to testify on the oversight of the Crisis Management System under the New York City Department of Youth and Community Development.

A lot has already been said, and I apologize for the redundancy; I want to ensure that you hear our testimony.

CHAIRPERSON STEVENS: (UN-MIC'D) (INAUDIBLE)

SENIOR VICE PRESIDENT CABA: Thank you, Chair Stevens and the Members of the Children and Youth Committee, for the opportunity to testify on the oversight of the Crisis Management System (CMS)

under the New York City Department of Youth and
Community Development (DYCD).

My name is David Caba. I am the Senior Vice
President overseeing the Bronx Rises Against Gun
Violence program at Good Shepherd Services, which is
part of the New York City Crisis Management System
that operates within the confines of the 46th, 47th,
and 52nd precincts in Council Members Pierina Sanchez
and Kevin Reilly's districts.

I began my journey with Good Shepherd
Services over ten years ago as the Program Manager
for GSS's first Community Violence Intervention (CVI)
program, known as the Bronx Rises Against Gun
Violence (BRAG). What started off as a pilot program
of only four staff has grown to be a multi-site
program of over 70 staff. Since then, I have been
dedicated to growing leaders within the CMS
community, which includes being a trainer for New
York City Department of Health and Mental Hygiene
(DOHMH) Training Academy, elevating the need for the
City to value the lived experiences of the
individuals doing this work on the ground and also,
sharing best practices among the CMS network.

Based on Comptroller Lander's report recommendations, my testimony will focus on the collective priorities of New York City's Crisis Management System.

Number one is to improve the City's management and coordination of CMS, including strengthened oversight. The oversight of the CMS system is not all within one agency. For example, Works Plus, the workforce development component of CMS, is overseen by the New York City Department of Probation (DOP). As the Council is aware, DOP threatened to cut the program and our collective advocacy with Chairs Nurse and Stevens, DOP agreed to fund it for one more year. This volatility threatens the effectiveness of CMS.

We also want to launch a real-time Community Violence Intervention (CVI) dashboard. While all CMS providers are currently reporting (TIMER) to DYCD via DYCD Connect, our agencies have experienced oversight from three different agencies in the last 10 years, including DOHMH, MOCJ, and now DYCD. With each shift, there have been changes to reporting, which makes it difficult for us to create a data set that shares the effectiveness of the CMS.

Data collection varies for the interventions across the Crisis Management System, which include hospital responder, therapeutic, school violence intervention, and workforce development. I would add that we do a host of other collective approaches, strategic approaches to reach our youth in our communities and our neighborhoods. A database is needed that captures the ecosystem surrounding the individual and its benefits.

Additionally, while we can share data for the Community Violence Intervention work, that alone does not provide the full picture of the holistic work that CMS is doing in communities across New York City, we are asking the City and the Council to invest funding in the following:

- Conduct an evaluation of the NYC Crisis Management System as an evidence-based approach that supports creating a uniform way for CMS sites to capture effectiveness across the various components of CMS.

- Ensure the current database can interact with existing community-based organizations' data collection methods to allow for batch uploads of monthly reporting metrics. Many CMS programs have

data that spans over a decade, while we have been moved from agency to agency.

- Increase DYCD's capacity to provide technical assistance to CMS sites.

- Hire a data analyst within CMS sites to support the internal capacity of CMS sites to capture and analyze data. We are not funded for that.

In closing, regarding payment delays, we received full payment for Fiscal Year 2024 last week, June 9th. Fiscal Year 2025 invoices have either been disbursed or approved for payment by DYCD. I would like to note that the volume of unpaid Invoices for long periods from City agencies is creating cash flow issues for all agencies, both large and small.

In addition to the recommendations proposed by the Comptroller, the collective has the following recommendations:

- Activate a joint task force that includes the Mayor, Council, and the CMS leadership to revisit what is needed to strengthen CMS, including exploring expansion and funding levels that support the various components of CMS, and to ensure the release of a fully funded RFP that includes a scoring system that ranks providers who are doing the work currently. The

task force can also explore the creation of a NYC-based training academy to support the CMS workforce, since training is currently being conducted by Cure Violence Global in Chicago. And the viability of a 24/7 weekly operation for the CVI sites, which are currently operating only 8 hours, 5 days a week. So, two days out of the week, we are not operating.

- The current contracts are set to expire on June 30th, 2026. We are going into the final fiscal year. We are asking that the City ensure that we have baseline funding to support CMS that accounts for the real cost of living, both for staff and agencies, as all costs, including rent, have increased since many of these contracts were first issued. We are talking about years, Council.

- Revisit the salary ranges for staff, ensure we are compensating for lived experience and hazard pay given the risk staff are taking, and compensation that considers the true cost of living in New York City.

- Increase funding for the various components of the CMS, i.e., therapeutics, is \$50,000— we talked about it a lot today—which is not enough to hire a social worker or clinical staff.

There is a breakdown to this. When they provide the numbers, you have to break them down by school, campus, or multiple schools, as applicable.

- Revisit the work scope and funding for the Youth Enrichment Services (YES), which reduced the number of schools serviced and changed the staff responsibilities, which are not aligned with the previous model. It has been drastically changed from what it was.

- Restore \$1.5 million in funding to the Community Justice Unit, which is operated by the Legal Aid Society, which is detrimentally impacting their ability to continue providing legal services to CMS. CMS needs robust legal support that includes designated people focused on the cases of youth we refer.

I want to thank the Council for hosting this hearing and for your partnership in advancing and elevating CMS in New York City.

CHAIRPERSON STEVENS: Well, thank you. I want to go on record by saying that I am allowing you to go over, because I know many people have left. So, I am just putting it on record, that's why. Since

some people have left, I am allowing you all to use their time.

DR. ERICA FORD: Straight ahead (INAUDIBLE), you know, there was a lot said that requires clarity. Thank you for doing this, Councilwoman Althea Stevens, and my Councilwoman, Nantasha Williams, as well as the rest of the folks who are not here.

Before I start, I would like to address a couple of things that were said before, if possible.

For clarity, this model, the New York City Crisis Management System, began in 2012 when we confronted Christine Quinn, who was running for president-- (LAUGHTER), not president, for mayor at the time, and she started a task force. Right? And I presented to her what we had at that time in Southeast Queens was a VIP system. We started in New York City as the New York City Crisis Management System. Right? Regardless of anything else that happened, we are the New York City Crisis Management System. And the reason why we are in an extreme problem is because all of the city agencies and city officials continue to relate to us as if we are Cure Violence.

1 If we have a contract for \$1 million, let's
2
3 just say, Cure Violence is \$500,000. We are never
4 looking at the other \$500,000, which puts us in a
5 deficit. Right? For our work, for our data tracking,
6 the folks who are overseeing us started the whole
7 explanation of who we are wrong. So how are you ever
8 going to evaluate or really work with us if you don't
9 even know who we are? And I love the people who were
10 here; it's a catch-22. It is really a bigger question
11 than them at DYCD, because as David just said, we
12 went from DOH, we went to MOCJ, now we are at DYCD.
13 And if a new mayor comes, they could say, "We're not
14 going to be (TIMER) at DYCD anymore, we're going to
15 put you somewhere else."

16 So the question of where we're housed and
17 the baseline of our work has to be just as important
18 as NYPD or FDNY. The unification is not about someone
19 conducting an inspection of your work or making a
20 pop-in visit, or conducting a site visit on a weekly
21 basis; it is about how we integrate city agencies.
22 How do we co-produce? Right? Under Commissioner Shay
23 (phonetic), we had a contract with NYPD. We met with
24 them over and over again, we had a contract. So, how
25 they raided my office to get my video camera, that

would not have happened because we have an agreement. All you had to do was talk to me. Right? So, they're violating the protocol and process of how we relate, and might be setting a new precedent for moving forward with us. I don't know. But I know that there has to be a conversation with the NYPD and a higher level of a co-production of public safety systematically, not based on friendships, not based on the area with the highest violence, or the elected official who advocates the most. It must be a systematic protocol and procedure that is citywide. And how did we get here? We got here? The crack epidemic in the 80s and the 90s raised a question of families being separated. Children going into Children's Services, fathers getting killed, fathers going to jail, mothers home, some strung out, disarray. There were 2,000 people killed a year. In 2017, four to five years after we started, we made New York City the safest big city in America. We had a weekend where no one was shot. We had a week where no one was killed. If it worked then, it can work now. And it does work. It just is not invested in the capacity and the manner in which it needs to be. It is always an afterthought. We can't be an

afterthought and be as effective as we need to be.

Right?

NYPD used to share data. They don't share data anymore. In our catchment area, we used to meet about the data. Every catchment needs to collect the data. It needs to be intentional. It needs to be on schedule. We need to study what we are doing so that it can become effective. We have to be the ecosystem. It is an ecosystem, just like our body; you can't cut off a hand and put it over there and have it still work. It is attached to our body. CMS is a system, not a program. Cure Violence is one of the programs in the New York City Crisis Management System. And we have to stop looking at us as a program and start looking at us as a system. Therapeutic and mental health have no real funding. Had no funding. It must be funded if we are to address it as a public health issue. Legal advocacy doesn't have the funding that it needs. Then we are playing a game of legal Russian roulette. We take the young person, we know these folks who are here, but when we get into the court, it could be somebody else. It might not even be the legal aid team that we work with. It could be an entirely different legal system, due to the court

1 process. So we have to change how our participants
2 are represented in the court. We need a connection
3 with the judges. We need to have intentional
4 meetings. We need to have intentional conversations
5 with prosecutors about who the participants are that
6 we are working with. Like they said, I saw a shooter
7 coming out of your office. You're supposed to see
8 shooters coming out of my office; that's who we work
9 with. Right?

11 So, we need to be more intentional. The
12 Peace Mobile is something I remember standing here
13 advocating for 15 years to get. And now we have it,
14 but it has to be systematic. They call it a mobile
15 trauma unit, but I don't call it a mobile trauma unit
16 because I don't want to mobilize trauma. We want to
17 mobilize peace. And no disrespect to anyone, but I
18 came up with the concept. I brought it to the City.
19 So, let's have it done the correct way. If you visit
20 most of the Peace Mobiles or mobile trauma units, we
21 don't know what they're doing. We don't know what
22 they have inside. So we need to have it unified. And
23 I am not saying it because I created it, but I am
24 saying it because I created it. Right? So let's
25 ensure that they all look the same and do the same

1 thing. It could be different in some boroughs and
2 cities, but not in other cities, which have
3 duplicated it. However, it needs to be unified. We
4 need to be unified. The workforce program, like he
5 just talked about, some of us don't even have it. We
6 don't all have the same funding. Right? Contrary to
7 what they said, she's talking about Cure Violence. We
8 all don't all have the same funding. We all need to
9 have the same funding and do the same work so that we
10 can be measured effectively. When you go to a police
11 station, you know that every police station is going
12 to have the same thing. Every fire department is
13 going to have the same thing. Every EMT will have the
14 same thing. Every New York City Crisis Management
15 System, in every target area, needs to have the same
16 thing: survivor support needs to be an intentional,
17 intricate part of our system. They need to be
18 alongside us, just as we have the hospital work; we
19 need to have the survivor work. We need to have the
20 mental health work because we can't say that it is
21 rooted in public health and not address and fund it
22 from the public health perspective. Right?

23 We need every site to be equally funded and
24 professionally trained. We need an internal
25

1 compliance team to help keep ourselves in check,
2 because we must ensure that we are professionals and
3 that we continue to grow professionally.
4

5 We need to be uniformly equipped with the
6 right equipment. Some people have vehicles, some
7 people don't. And I mean just basic vehicles to get
8 to all of these shooting responses that you talked
9 about that we have to do every single week. At least
10 five shooting responses, three shooting responses,
11 all over the borough. Right?

12 We also need to track and measure using a
13 consistent data system. LIFE Camp is building a
14 database system. Right? Because we believe in data.
15 But we need to have one data system that, even if we
16 go somewhere else, and maybe it's not owned and
17 operated by the City, we can still carry the database
18 system with us. Because we keep getting new database
19 things, and it doesn't track the entire CMS model.

20 The leadership must remain community-
21 centered. Sometimes we have elected officials who
22 choose a group they like, but it is not credible or
23 capable of doing this work.

24 Everyone fits into the ecosystem, but not
25 everyone fits running the CMS model. Right? They can

1 be part of the ecosystem, but we have to keep it
2 intricate for people who are credible messengers,
3 genuinely conscious, and culturally attuned to what
4 we are trying to do. Because then you have people
5 like, I don't know if I can say them, but we have
6 sites like Coney Island, who are not able to order
7 stuff, simply because they are in a bigger group that
8 is not culturally attuned to the needs of the Black
9 and brown children in that community. So we can't
10 have things like that.

12 We need data that matches the work. Most of
13 the CMS work is not tracked. Only a portion, like
14 Cure Violence, is formally measured, yet Cure
15 Violence often represents just half of the site's
16 funding.

17 And it always goes back to Chicago. Why are
18 we talking so much about Chicago? For me, the person
19 who brought the concept to the City Council, I think
20 I am very attuned to help build this system. Right?
21 So, I think I should be tapped into. David has been
22 here since the beginning of time. Esai (phonetic)
23 Charles, the beginning of time. We have qualified
24 people. And I just got a doctoral degree, so I am a
25 doctor now. Right?

ALL: (LAUGHTER)

DR. ERICA FORD: (LAUGHS) We need to be the people who are building out the training, building out how we grow, consulting with these folks. (ALARM) There are a lot of meetings that they talked about, that-- I don't know what that [alarm] means, is that Jesus coming in?

(BACKGROUND NOISE) We need to baseline the entire model, sustain the progress, and scale our impact. We need full funding for every part of the ecosystem. Full funding for every part of the ecosystem-- standardized training, branding, and operation across all boroughs. A centralized data system that captures outcomes from every intervention to every part of the ecosystem. We are building such a thing at LIFE Camp.

We need recognition as a model and not as an afterthought. We need to be part of those-- like Jumaane talked about-- and the other thing about what Jumaane talked about, what tends to happen with the CMS model, is we get caught in the political debate by the elected officials, the mayor at the time. And we don't want to be pawns for this stuff. We can't be. Our work is too important. We can't be pawns for

political personalities or feelings, etc. We need true integration with city agencies. It does not exist. We need true integration.

CHAIRPERSON STEVENS: Yeah, I need to...

DR. ERICA FORD: (INAUDIBLE)

CHAIRPERSON STEVENS: Ten seconds.

DR. ERICA FORD: Ten seconds. True integration. That's it. That's it. That's the end.

CHAIRPERSON STEVENS: (LAUGHS)

DR. ERICA FORD: True integration.

CHAIRPERSON STEVENS: I have a question. I know you mentioned, Dr. Ford, that you spoke about data sharing and used to have meetings with the NYPD, but those meetings stopped. When did those meetings stop for you and NYPD around data sharing?

DR. ERICA FORD: She said three years. But, for me, it stopped citywide after Commissioner Shay. After Commissioner Shay, it stopped. For us, in Southeast Queens, it stopped after the Queens chief...

COUNCIL MEMBER WILLIAMS: Bill?

DR. ERICA FORD: No.

COUNCIL MEMBER WILLIAMS: Kevin?

DR. ERICA FORD: No, Kevin never did it. It stopped when he came in.

COUNCIL MEMBER WILLIAMS: (INAUDIBLE)
Beltran.

DR. ERICA FORD: Beltran, after Beltran, it stopped for us in Southeast Queens. And I've sent...

UNKNOWN: (INAUDIBLE)

DR. ERICA FORD: Many emails to the Deputy Mayor of Public Safety, the Commissioner of DYCD. We had a meeting the other day with CMS and the Police Department, featuring the new Deputy Mayor of Public Safety, but we have not received the data yet.

CHAIRPERSON STEVENS: You haven't gotten any data?

And did BRAG ever have those meetings?

SENIOR VICE PRESIDENT CABA: Well, I just wanted to say that we had a historic meeting of COMPSTAT years ago at Police Plaza.

CHAIRPERSON STEVENS: Mm-hmm.

SENIOR VICE PRESIDENT CABA: It was after that when we started to see the momentum dwindle to now, where we actually have to hunt down your local precinct to go over. One of the ways that it's done is by going to precinct council meetings.

CHAIRPERSON STEVENS: Yeah.

SENIOR VICE PRESIDENT CABA: and approaching them about the data right after that, because the Commanders... (CROSS-TALK)

CHAIRPERSON STEVENS: Mm-hmm

SENIOR VICE PRESIDENT CABA: Are reporting that. So, for us, it's a matter of doing that. We go to all the precinct councils and all of the precincts that we're in, hear about the data that they're talking about, and then talk to them afterwards.

CHAIRPERSON STEVENS: Afterward, yes.

SENIOR VICE PRESIDENT CABA: We can...

CHAIRPERSON STEVENS: But you don't have a formal meeting... (CROSS-TALK)

SENIOR VICE PRESIDENT CABA: a standard, no...

CHAIRPERSON STEVENS: where you are guiding the meeting?

SENIOR VICE PRESIDENT CABA: Scheduled, on the calendar, no, ma'am.

CHAIRPERSON STEVENS: Okay, that makes no sense. Then, the Peace Mobile Units that you were talking about it is something that I forgot to bring up today. I see them, but I am confused about what

1 they do and what they are supposed to do. And the
2 inconsistency, again, I see them at rallies, and
3 that's how I know it's a rally, because you'll see
4 them all out there. But I am just trying to get a
5 better understanding, because there were a number of
6 shootings in the Bronx where my question was, and I
7 went to DYCD and asked them why these trauma units
8 are not out there to support the grieving folks and
9 give therapeutic services after this has taken place?
10 And they were, like, "Huh, we'll look into that."

11 But then I was told that there's only one per
12 borough. And I was, like, don't tell me that, I've
13 seen them, and that's not true.

14 So could you talk a little bit about
15 what...

16 DR. ERIC FORD: There's only one per
17 borough.

18 UNKNOWN: (INAUDIBLE)

19 DR. ERIC FORD: It's just that it looked
20 powerful, but it's really...

21 CHAIRPERSON STEVENS: It might have been one
22 per borough, but more than one group got it. But if
23 you wanted to talk a little bit about... (CROSS-TALK)

1 COMMITTEE ON CHILDREN AND YOUTH 140
2 SENIOR VICE PRESIDENT CABA: We don't have
3 mobile teams at BRAG.
4 CHAIRPERSON STEVENS: Huh?
5 SENIOR VICE PRESIDENT CABA: We don't have
6 MTs at BRAG.
7 DR. ERICA FORD: RTG has it.
8 SENIOR VICE PRESIDENT CABA: RTG has it.
9 CHAIRPERSON STEVENS: Mm-hmm, no, I know.
10 SENIOR VICE PRESIDENT CABA: And SGV doesn't
11 have one either, and neither does SOS.
12 COUNCIL MEMBER WILLIAMS: (NO MIC)
13 (INAUDIBLE)
14 DR. ERICA FORD: Yes.
15 CHAIRPERSON STEVENS: Yes.
16 COUNCIL MEMBER WILLIAMS: (UN-MIC'D)
17 (INAUDIBLE) vehicle.
18 DR. ERICA FORD: Yes. So people have things
19 that look like it.
20 SENIOR VICE PRESIDENT CABA: Yeah, that's
21 what I was about to say. You may see vans that have
22 all of the...
23 CHAIRPERSON STEVENS: Again, all right, I
24 hear you guys. I... (CROSS-TALK)
25 SENIOR VICE PRESIDENT CABA: The logo...

1 COMMITTEE ON CHILDREN AND YOUTH 141
2 CHAIRPERSON STEVENS: I hear you.
3 SENIOR VICE PRESIDENT CABA: Okay.
4 CHAIRPERSON STEVENS: But, they're still not
5 there...
6 DR. ERICA FORD: Correct.
7 CHAIRPERSON STEVENS: In the moment of
8 crisis, so...
9 DR. ERICA FORD: Correct.
10 CHAIRPERSON STEVENS: You know.. (CROSS-
11 TALK)
12 SENIOR VICE PRESIDENT CABA: (INAUDIBLE) you
13 need...
14 CHAIRPERSON STEVENS: Could you talk a
15 little bit about what you mean by 'unification around
16 that'? What would that look like?
17 DR. ERICA FORD: Yes, I'm sorry...
18 CHAIRPERSON STEVENS: And is that part of
19 the contract?
20 DR. ERICA FORD: I'm sorry, could you say
21 that again?
22 CHAIRPERSON STEVENS: I was asking if you
23 could talk a little bit about what the unification
24 would look like and what that vision is. And when
25

this was brought to the City, did you give them a plan around that... (CROSS-TALK)

DR. ERICA FORD: Yes.

CHAIRPERSON STEVENS: unification?

DR. ERICA FORD: Yes, but they didn't use it. They just gave the money to each organization in the five boroughs and let them buy their own thing and build it out their own way. And if you don't have the-- You don't know what you don't know.

CHAIRPERSON STEVENS: Yeah.

DR. ERICA FORD: Right? So, to respond to the situations, some of the shootings might not be in their catchment area.

CHAIRPERSON STEVENS: Mm-hmm.

DR. ERICA FORD: Right? Or anybody's catchment area. And then they might not have the necessary staffing at the time the response is needed.

CHAIRPERSON STEVENS: Mm-hmm, yeah, that staffing model is weird.

DR. ERICA FORD: But the purpose of the Peace Mobile is for-- if you talk about origin, the purpose is for just that. In the same way that the police cars come on the scene at a shooting or

incident, we should be at the scene. We should be at the hospital giving support to those families and that community. But that should be a separate staff—a full, separate staff who are trained and qualified to give that therapeutic support.

CHAIRPERSON STEVENS: Mm-hmm.

DR. ERICA FORD: We don't get the funding for that. We get a lot of extra... (CROSS-TALK)

CHAIRPERSON STEVENS: So when they gave them the funding to purchase the vehicles, they didn't give them funding for staffing and all of the things that come with the mobile unit?

DR. ERICA FORD: Now you know (INAUDIBLE) what we get (INAUDIBLE)

CHAIRPERSON STEVENS: (LAUGHS)

DR. ERICA FORD: We get a driver. Right? We get a person to kind of work alongside. But there is no real money to fulfill the magnitude of demand for the vehicles. The vehicles are in tremendous demand. So, for us, we do a lot of other grants for our therapeutic work...

CHAIRPERSON STEVENS: Okay.

DR. ERICA FORD: and for the Peace Mobile.

CHAIRPERSON STEVENS: Council Member

Williams, do you have any questions?

COUNCIL MEMBER WILLIAMS: Okay, what would it mean for your community if your CMS site received full funding to cover all aspects of the ecosystem beyond just street intervention?

DR. ERICA FORD: If we were able to receive full funding, it would mean that would be effective, we would be able to run an effective operation 24 hours a day, seven days a week. We would be able to be the ecosystem that addresses, as Councilwoman Althea just raised, being able to show up at all times when people need the services, not after the fact or as an afterthought. We would look and be as professional as all the other City first...

CHAIRPERSON STEVENS: Responders...

DR. ERICA FORD: first responders, who respond to situations. We would be able to have health insurance that deals with the magnitude of what our people need. We would have life insurance. We would have equipment that protects us— we have several employees who have been shot, stabbed, on the job. And they don't get health insurance to deal with the aftereffects of being shot. There's no extra

money. Some of them might have even lost their job because they can't perform. There's no line of duty support for them. There's no hundreds of people lined up. This would all enable us to be an effective system.

CHAIRPERSON STEVENS: And I have another question, because I know that's often brought up, are guys looking, or would the ideal situation be to become a city agency? Because some of the things that are being asked are because they are actual city workers, and these are contracts that are being contracted out. And we know...

DR. ERICA FORD: Yes.

CHAIRPERSON STEVENS: that they don't treat you and the service workers the same, which is why they contract it out, because it saves the City money. So, is that something you're looking at, or is it being advocated for? Because those two things are very different.

DR. ERICA FORD: We don't want to be a city agency, but we want the benefits...

CHAIRPERSON STEVENS: Oh...

DR. ERICA FORD: that city agencies...

(CROSS-TALK)

CHAIRPERSON STEVENS: Well, uhm,
(UNINTELLIGIBLE)

DR. ERICA FORD: have. We want the cake and want to eat it, too, because we are different than most nonprofits. There are nonprofits that are not running - literally, we are standing between a gun and a trigger, talking another person off that ledge. And sometimes we've been the victim of those things. I don't know of another agency that puts its life on the line the way we do.

CHAIRPERSON STEVENS: (UNINTELLIGIBLE)

DR. ERICA FORD: So, we're asking-- I remember with the community in Crown Heights where they received bulletproof vests, they received cars, they received a level of communication and coordination with NYPD that we don't receive. So we are asking... (CROSS-TALK)

CHAIRPERSON STEVENS: Mm-hmm.

DR. ERICA FORD: to be respected.

CHAIRPERSON STEVENS: I know what you're talking about.

DR. ERICA FORD: Thank you.

COUNCIL MEMBER WILLIAMS: (INAUDIBLE) me, too.

1 Last question: Can you speak to how
2 collaboration with city agencies has or has not
3 helped you coproduce public safety in your
4 neighborhood? I know that was the word you used. I
5 know I mentioned it before, and in conversations, I
6 want to do more digging and researching. I know that
7 you know pretty much everybody across the country
8 doing stuff in this space. But one of the things that
9 struck me about Newark's program is that it is so
10 integrated. There's a level of respect because of
11 their mayor. The mayor has integrated their CMS,
12 although it's not called CMS, but for all intents and
13 purposes, they've integrated their CMS program into
14 the day-to-day functions. Their CMS person gets an
15 alert at the same time the police commissioner gets
16 an alert. (INAUDIBLE)... (CROSS-TALK)

18 CHAIRPERSON STEVENS: Same thing in Saint
19 Louis (INAUDIBLE) the same... (CROSS-TALK)

20 COUNCIL MEMBER WILLIAMS: Yeah. Same...
21 (CROSS-TALK)

22 CHAIRPERSON STEVENS: It's the same thing.

23 COUNCIL MEMBER WILLIAMS: And, then, to the
24 point about funding for all of these wraparound
25 services, it just seems so much more coordinated. As

someone who has served on the board of a crisis management organization, I believe that the system's disjointed nature has always troubled me. And the lack of true integration—seamless integration—which is a tall task, because city agencies don't even integrate with themselves sometimes...

DR. ERICA FORD: Correct.

COUNCIL MEMBER WILLIAMS: Which is another discussion. So, yes, could you please discuss how the integration, or lack thereof, helped or harmed the work you're doing to provide public safety?

SENIOR VICE PRESIDENT CABA: Well, it starts with the fact that we have been transitioned from city agency to city agency to city agency in our lifetime. I mean, we are a public health approach to the gun violence epidemic, so, of course (BACKGROUND NOISE), we landed in the Department of Health and Mental Hygiene, which made sense. Next thing you know, you move us to the Mayor's Office of Criminal Justice, and I could see the correlation between what we do and criminal justice. Right? And now we're on the Department of Youth and Community Development. Well, the population we primarily serve is youth. So

if you could take all three and turn that into one city agency, then you'd have a perfect world.

In terms of integration, Dr. Ford mentioned the Parks Department and the FDNY. We're stopping bullets and putting out fires on a regular basis. But we are not treated the same. We're not given the same economics. We're not given the same tools, equipment, latitude, or information. So, what this would look like if it were fully integrated is that you would probably have the most powerful workforce you have ever seen. That also includes reducing the use of police for every single issue that occurs in our community. They really don't have any knowledge of how to deal with it in the first place, because they're not from there. So the credible messenger workforce, be prepared, because if you really invest in this, you're going to see vibrant, healthy communities unlike what you have ever seen before. We know, because we've been doing it for over a decade. Just come by and visit.

DR. ERICA FORD: The model came from the FEMA model: response, recovery, mitigation, prevention. Just like a disaster, every shooting should have all those agencies on the scene. Because

sometimes people need to be moved immediately.

Therefore, we need to find housing elsewhere. We need housing. We don't have time to chase down the people in Housing. "Oh, who are you? No, I don't know who you are." We don't have time for that, right? We have to move somebody right now. And I literally had to go and snatch somebody out of their house, ten seconds later, here comes the gunman to shoot up their house.

And we had to take our money and take them to Long Island and put them in a hotel. And it was a risk.

And, of course, because they were high-risk, undisciplined, they got kicked out of the hotel. We had to move them to another one. So all of this coordination can be done seamlessly with city agencies. The garbage, right, garbage where they hide guns, right? If we could clean up, if we could get lights in real-time, real real-time. Those things can happen more effectively with stronger coordination and respect. When you talk about Newark and all of the other cities that came after us that we helped build, it is always better the second time around. So the level of respect from this City to us didn't happen in the beginning. NYPD couldn't stand us. Right? And we couldn't stand NYPD. So there was a

friction of marriage that wasn't, and still isn't, at its core, the best way. Most of the City Council people don't know what CMS does. They just look at it as those "violence interrupters," those "criminals," those "perps", there are so many different names that are given, even with the hospital, right? It might look good now, but we literally had to fight with those people to go into the hospital to provide the services to folks, and we became the enemy.

So, I think the integration of everything at the parks is that they turn off the lights at 9 o'clock.

COUNCIL MEMBER WILLIAMS: Mm-hmm.

DR. ERICA FORD: At night, right in the middle of basketball games, creating the most unsafe environment for our community. Just because they can, they have no connection to what we're doing, but they have the ability to make a decision that impacts our community in an instant. They could do it or they can't. The guy literally sits at home and turns it on or turns it off. So, the decision-making process must involve people sitting down at a table and first acknowledging that we are all equally important—*equally important*. Then we are talking to

commissioners, and not every level of organization is speaking with the commissioner, but we are speaking head-to-head. And the head gives the directions down, and it goes back up, and it goes down, and it's really...

COUNCIL MEMBER WILLIAMS: Okay.

DR. ERICA FORD: And it is really integrated into their system of the work approach.

CHAIRPERSON STEVENS: Well, I just want to-- I feel like I had a missed opportunity. I actually should have had you guys go before the...

DR. ERICA FORD: Yes, yes...

CHAIRPERSON STEVENS: So, I apologize, and that's why we're taking up so much time. Because you know, when you come to my hearings, I cut everybody off. But I think it's important that the information that you guys are sharing is now on the record and is part of the conversation because it is a huge disconnect. And I'm not just saying it, DYCD, and in a lot of agencies, where what's happening on the ground or the intention of things are necessarily being played out in real-time. So, again, CMS and Cure Violence and all of this work have a very special place in my heart. I know Council Members

Williams and Riley, we have been trying to push this conversation forward. Since we arrived, this has been one of the first things we've been trying to tackle, and it has been...

COUNCIL MEMBER WILLIAMS: (UN-MIC'D)

(INAUDIBLE) Caucus priority.

CHAIRPERSON STEVENS: Yeah, it's one of the Hood Caucus priorities, yes, I will say it for the record. It has been a priority, but it has been very hard to get information. I will say that DYCD has actually been more forthcoming than it was when it was under MOCJ. But we have so much further to go.

Again, I want to apologize, because you guys actually should have gone before the [Administration] panel. I think it would have set a different tone for the direction of questioning and what could have been said. Because I think that the partnership isn't (UNINTELLIGIBLE) what it needs to be, and you guys are the experts in the room. You've been here since the start.

So, when it changed from agencies, you guys should have been part of those conversations in those transitions and understood it. And I told Cliff that you guys are all cheering him on. But you still are

going to hold him accountable. That's (INAUDIBLE) the job... (CROSS-TALK)

DR. ERICA FORD: But that's not-- Cliff is an employee (INAUDIBLE)... (CROSS-TALK)

CHAIRPERSON STEVENS: All of them are employees.

ERICA FORD: I know, but they're you know...

CHAIRPERSON STEVENS: Listen, I love my agency, and Nantasha will tell you that I'm very protective of them, but when everybody sits at that dais, they get the smoke.

ERICA FORD: Yes.

CHAIRPERSON STEVENS: So, that's how I do. But thank you so much for being here; we appreciate all the work you are doing.

PANEL: Thank you.

CHAIRPERSON STEVENS: The next panel will consist of Sofie, Cheyenne, Tara, and Jackie.

(PAUSE)

SOFIE FASHANA: Good afternoon, thank you, Chair Stevens and Members of the Committee, for the record, my name is Sofie Fashana, and I work at Next100, which is a progressive think tank that

centers lived expertise in those in proximity to the issue and the driving policy chair (sic).

I am here today to express my support for the provision of luggage for foster care youth, led by Council Member Rita Joseph.

I came to speak today as an advocate, but also as an alumnus of the foster care system. We're here today because every day in New York City, a child enters the foster system carrying everything they own in a black plastic bag, conveying that they are disposable. The journey through the foster care system in New York City is unstable and disruptive for thousands of children, and the data reflects that.

According to data analysis about children's rights, children in the New York City foster care system transition on average about three times. For some, this means three different schools, three different families, and three different environments. Within this already stressful transition, the simple act of providing a child with a dignified piece of luggage to carry their belongings is not a common practice despite the over 22,000 transitions occurring within the city.

Let me start with my own story. When I was first handed a large black trash bag by a caseworker, I did not speak English, but I got the message: I and everything and everything I held dear was trash.

Sadly my story is not original. I've spoken with countless young people in the New York City foster system who feel similarly, like Jalen, 21, who when navigating New York City's foster system had the word "worthless" echo through her mind. The trash bag felt to her like confirmation of that worthiness.

Destiny's belongings got mixed up in the trash and thrown into New York City garbage truck multiple times during moves. Imagine everything you own, that you possess so close to your heart, being thrown in a trash bag because it's confused with garbage because of the bag it was put in.

The agency told another child (TIMER) moving with trash bags, to "Shut the 'F' up" and deal with it.

In 2023, a statewide policy program called "My Bag" distributed 3,560 duffel bags to the local Departments of Social Services across the state, serving only a quarter of children who need them—

New York City received none despite being home to over half of the foster care population.

In October, Council Member Rita Joseph introduced a luggage to foster care youth bill, a well-funded and enforceable citywide policy, mandating adequate luggage for all children in the New York City foster system.

Just a few weeks ago, a similar bill passed unanimously in both the New York City Senate and Assembly, led by Senator Brisport and Assemblymember Hevesi. Now we are asking for your leadership in passing this bill at the City level, and also urging Governor Hochul to take the next step in ensuring that the young people in foster care are provided with the proper luggage, and to sign Senate Bill 3781.

Today, we urge you to exercise your leadership by passing the City bill and advancing it to the Speaker, as well as issuing a letter of support urging the Governor to sign the State bill into law.

I will leave you with this: ironically, with the City taking steps to ban unsightly black trash bags from our streets, we still allow our

children to carry their belongings in those very same bags. If we care about the image of our city, we must care even more about the dignity of our children.

And, Chair, you said, you know, you want things that make sense. When it comes to policy, this is a policy that makes sense. It is a policy that's direct, and it's a policy that serves our children and the future of this country. Thank you.

CHEYANNE DEOPERSAUD: Good afternoon. My name is Cheyanne, and I'm a Policy Advocate at a think tank called Next100. I also have lived experience in the foster care system since I was 15 years old.

I wanted to start by saying how deeply grateful I am that this Council is prioritizing the collection of more data on where youth aging out of foster care are placed. I am 100% in favor of this step forward.

As someone who was placed into supportive housing myself, and who has spent the past two years researching the conditions of those placements, I cannot emphasize enough how important it is not just to count placements, but to understand the environments behind them and how they affect the

youth who live in them, who are just beginning their lives.

Tracking this data means we're finally paying attention. It means the experiences of youth like me are no longer invisible. And it opens the door to real accountability and real change.

In my upcoming report, titled "Where They Live," I mapped more than 175 supportive housing sites across New York City that serve former foster youth. I compared those locations to indicators like violent crime, building violations, racial segregation, and poverty. The patterns that emerged were heartbreaking, but not surprising. Youth are overwhelmingly placed in neighborhoods with the highest levels of concentrated disadvantage—areas with aging buildings, unsafe streets, and few opportunities to heal or grow.

According to the Opportunity Atlas and NYPD data, over one-third of the buildings I analyzed are located in neighborhoods where poverty rates exceed 30%, with some as high as 52%. These buildings have an average of 63 violations each—some over 200. And in the surrounding precincts, youth face exposure to

high levels of violence: median annual rates of 19 rapes, 178 robberies, and nearly 300 felony assaults.

These are not just numbers. These are the neighborhoods where young people are placed, often with no family support and little say in the matter. And right now, while we track how many youth are placed—(TIMER), whether they're safe, whether their housing is viable, or whether their placement supports their future is not being tracked.

That's why, in addition to supporting this bill, which I am really thankful for, I recommend the following to strengthen it:

First, collect neighborhood-level indicators alongside placement data—things like crime rates, building violations, and poverty levels. Because this context matters, without it, we risk overlooking deeper patterns that are hurting young people.

Second, please, please, please require ACS to publish an annual public report that gives a full picture—not just where youth are placed, but how those placements are working. That report should include:

• The census tract physical locations of all supportive housing buildings serving former foster youth

• For each building, maintenance complaint data: number, nature, and resolution times

• Inspection results and trends by housing provider

• Youth satisfaction surveys at intake, midpoint, and exit, by provider

• Outcomes like education, employment, income, and housing stability after placement

This level of transparency isn't just helpful—it's essential. It's how we begin to ensure that young people aging out of care aren't just placed, but supported. Not hidden away in disinvested neighborhoods, but placed where they have a real chance to heal, grow, and thrive.

That was one of the testimonies that I wrote, but I also came with testimony from Sofie's luggage bill, the one from Rita Joseph. So will just read that really, really quickly.

CHAIRPERSON STEVENS: Uhm...

CHEYANNE DEOPERSAUD: Can I, or no?

CHAIRPERSON STEVENS: No, could you submit it for...

CHEYANNE DEOPERSAUD: Yes.

CHAIRPERSON STEVENS: You can submit for testimony.

CHEYANNE DEOPERSAUD: Yes, I can.

CHAIRPERSON STEVENS: And, also, ACS wasn't here today...

CHEYANNE DEOPERSAUD: I know.

CHAIRPERSON STEVENS: So we would need it so that we can give it to them. So, if you submit it, that would actually work for us.

CHEYANNE DEOPERSAUD: Okay, that sounds good.

CHAIRPERSON STEVENS: Thank you.

JACQUELINE GOSDIGIAN: Hi, my name is Jacqueline Gosdigian, and I am a Supervising Policy Attorney at Brooklyn Defender Services (BDS). I have been a public defender for 15 years.

BDS commends this Council, and Chair Stevens, and Council Member Williams, for recognizing the importance of community investment and crisis management as part of the solution to prevent and reduce violence. We have witnessed the power of credible messengers—who are trusted, community leaders—to build rapport, meet young people where they are, and de-escalate conflict. We urge the City

to expand the catchment areas and bring in additional leaders and neighborhoods into the CMS system.

When it works best, the young people who interface with CMS credible messengers or violence interrupters do not need our services, because they are able to avoid contact with the NYPD and the legal system.

While the Crisis Management System is a critical part of ending violence in this city, the City must also focus on what happens if someone actually gets arrested. The fact is that even with CMS, arrests are still happening, and instead of getting the services and programming that young people in this city need, they are facing incarceration and prison sentences.

BDS is fortunate to have great relationships with several alternative-to-incarceration programs, including Fortune, Resolve, Osborne, BronxConnect, and Good Shepherd, to name a few, which provide many of our adolescent clients with holistic services. But for our clients facing charges of alleged gun possession, harsh, mandatory minimum sentencing guidelines, which are three-and-a-half to 15 years in prison for possession alone, make

resolving a young person's criminal case with an ATI largely dependent on the consent of the District Attorney's Office. There is really no clear criteria used to determine eligibility for ATI programing and the process for acceptance is almost unilaterally controlled by the DA.

This is why we must look at how emerging adults are being treated within the criminal legal system. We now know that while an 18-year-old may be a legal adult, their brain is not fully developed until their mid-20s. Even if a young person at age 16 or 17 has access to programming and services in family court as a result of New York's Raise the Age law, once they turn 19, they are subjected to these mandatory minimum sentencing guidelines.

The science shows us that emerging adults, like younger adolescents, are remarkably malleable and still developing impulse control and the ability to anticipate consequences of choices. (TIMER)

We ask the Council to support and pass a resolution urging the enactment of the Youth Justice and Opportunities Act, which would expand opportunities for programs and other alternatives to

incarceration and immediate record sealing for young people up to the age of 25.

We have additional recommendations in our written testimony. We thank the City Council for holding this important hearing today and for your commitment to violence prevention through community investment. Thank you.

CHAIRPERSON STEVENS: (NO AUDIO) (INAUDIBLE)

TARA BROWN ARNELL: **(*Transcription note: Audio is muted briefly at the beginning of the witness's testimony.)** that it is not limited to de-escalation of conflicts that occur anywhere on the street, as our staff come to work or they leave work.

I want to include that the work includes mentoring, which includes, at times, parenting; it includes feeding people in the community; it includes housing; it includes assisting not only participants who come willingly, but also community members with assistance in re-entry, helping to re-enter youth into school; helping youth with mental health therapy— this part is so important, because after they connect with credible therapeutic staff, quite often they don't want to be referred onto individuals

that they don't know and who are not sensitive to their plight.

The work of the Crisis Management System includes safe passage contracts, but also assistance with safe passage where there is no contract for the Crisis Management System work. It includes assisting parents in navigating hospital visits with high-risk youth, and it includes managing the (TIMER) flow — I'll wrap up here. It includes assisting hospitals, it includes assisting parents and advising them on hospital visitation when their youth might be considered high-risk, and there are people coming in and out; it includes cleaning up garbage within our neighborhood; it includes beautification of a neighborhood; it includes assisting a youth in not committing suicide; and it also includes, in those not so pretty places, being without bulletproof vests, with only four violence interrupters per site. It also includes us speaking to youth, getting youth to come down off the ledge when they're talking about resolving a problem with the use of a gun.

Our work is varied, our work is deep. And I'm sure many would attest that I did not even scratch the surface of the work that the Crisis

Management System does in New York City, that which is done within the eight hours that we do as we try to stretch how can we best serve our community, the families and the youth that volunteer themselves for Change Life. I'll end here. Still, we probably only got 25% of a view of who we are as part of The Crisis Management System and the work that gets done.

CHAIRPERSON STEVENS: Thank you.

Council Member Williams, you had a question?

COUNCIL MEMBER WILLIAMS: I'll be very brief. Could you please email me your testimony, as I have some questions? We have been discussing the budget, and something you said triggered my brain on certain things that are up to the DA's discretion...

JACQUELINE GOSDIGIAN: Mm-hmm.

COUNCIL MEMBER WILLIAMS: around Project Reset or other diversion programs. I would just love to work with you and talk to you more about that.

JACQUELINE GOSDIGIAN: Yes, definitely.

COUNCIL MEMBER WILLIAMS: No questions.

CHAIRPERSON STEVENS: That will be all for this panel, thank you.

1 COMMITTEE ON CHILDREN AND YOUTH 168

2 TARA BROWN ARNELL: Chairperson Althea, it
3 has been noted that there has been a mayoral
4 increase, 50% advancement of payment of \$136 million
5 increase in monies to the Crisis Management System.

6 CHAIRPERSON STEVENS: (UNINTELLIGIBLE) that
7 word advancement, because they are literally giving
8 you money for work that you already did.

9 TARA BROWN ARNELL: Prior to... (CROSS-TALK)

10 DR. ERICA FORD: (UN-MIC'D) What she means
11 is we used to get 25% advance (INAUDIBLE).

12 CHAIRPERSON STEVENS: I know.

13 TARA BROWN ARNELL: Now we get...

14 CHAIRPERSON STEVENS: I'm not giving them
15 points. Umm-mm. Umm-mm.

16 DR. ERICA FORD: They tried that...

17 CHAIRPERSON STEVENS: That was cute, though.

18 TARA BROWN ARNELL: You said it.

19 DR. ERICA FORD: That was cute.

20 ALL: (LAUGHTER)

21 CHAIRPERSON STEVENS: Our next panel is...

22 COMMITTEE COUNSEL: Elome Guinn.

23 CHAIRPERSON STEVENS: Elome Guinn, Rachel

24 (NO AUDIO) (INAUDIBLE)

25

CHRISTOPHER LEON JOHNSON: Hello, my name is Christopher Johnson. I want to say first off, free Brad Lander. Brad Lander has been arrested, and he's in ICE detention. I know it's kind of off topic...

CHAIRPERSON STEVENS: No, you know I have to say it.

CHRISTOPHER LEON JOHNSON: I need to free Brad Lander. Free... I'm going up there after this. Free Brad Lander.

So I want to make this clear: I'm calling on the next mayoral administration to fire A.T. Mitchell as the Gun Violence Prevention Czar. He has done nothing as the Gun Violence Prevention Czar in his tenure as mayor. This was a completely useless position in the Mayor's Office. And I am calling on the next mayor to fire him and replace him with Rebecca Fischer, the Executive Director of New Yorkers Against Gun Violence. Because I think she has more brains than he does. So we need to get rid of him.

I am calling on this City Council to investigate these Cure Violence nonprofits because I see that they have done nothing for these districts at all. They haven't—they're calling for the

defunding of ShotSpotter. This is nothing but a vote-harvesting scheme done by these nonprofit CBOs to allocate votes, while violence is never reduced in the districts at all. I live in a high-crime district, the highest crime district in New York City, which is the 41st District, and these Cure Violence organizations have done nothing to mitigate the crime in that district. The only people who mitigate the crime in that district are the NYPD. So I'm calling on the City Council to defund these Cure Violence organizations and give it back to the NYPD, and make sure we save ShotSpotter contracts. So that's what we need to start doing. ShotSpotter really saves more lives than Cure Violence organizations, and this is what it is in 2025. So, like I said, I'm calling on the City Council to really investigate all these Cure Violence nonprofits for this year and next year. And like I said before, I have 15 seconds left, free Brad Lander, free Brad Lander, free Brad Lander. I'm going to sum it up, five seconds, free Brad Lander, free Brad Lander, free Brad Lander...

CHAIRPERSON STEVENS: Chris, please stay on topic.

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CHRISTOPHER LEON JOHNSON: Free Brad Lander!

CHAIRPERSON STEVENS: Thank you. (TIMER)

CHRISTOPHER LEON JOHNSON: Free Brad Lander!

CHAIRPERSON STEVENS: Thank you.

CHRISTOPHER LEON JOHNSON: Thank you so much. Free Brad Lander!

CHAIRPERSON STEVENS: Thank you, have a good one.

TAKEASHA NEWTON: Well, thank you very much, thank you for the opportunity, Council. I'm Ms. Takeasha Newton, and I'm the Lead Community Organizer in the Community Justice Unit at the Legal Aid Society.

And I'm sorry, but I have to go with my heart right now regarding the statement that was just made about defunding any Cure Violence site here in New York City. We actually need to give more funds to our Cure Violence sites throughout New York City, because we have been the change that our communities need and make our community safer. I am a prime example of that. I previously worked with Cure Violence and 696 Build Queensbridge in the early days, under the leadership of K Bane and Erica Ford. And I am now over at the Legal Aid Society. So I know

what our communities need, I know what the Cure Violence sites need in order to create a safer environment for our youth and our elders throughout our communities.

I heard you speak about shooting responses, and I just wanted to tell you a little bit about Cure Violence and how important it is in the mediation process.

If you have harm going on in your community, and you don't take a stance with your community to show them that you are not for further harming your community, it shows a powerful notion of solidarity to the people who are still stuck in their state of trauma. And we need to understand that for all of us, this is a healing process from the trauma that we experienced growing up in our lives, and what we are continuing to face now here.

I wanted to speak about (TIMER) CJU's funding that has been cut, and how, although our funding has been cut, we, the staff in the Community Justice Unit, and The Legal Aid Society as a whole, have continued to provide all legal entities and services that we can, because we know although we cannot physically stop someone from harming someone

1 with a gun, we know that if we are able help them
2 with those other amenities in their lives that are
3 causing them further trauma, that is a way of us
4 showing the community that we care and that we are
5 here, and that we're not here to just talk about what
6 we want to do. We're showing you by proof, by
7 example, that we are here to assist you and your
8 communities with some of the circumstances that you
9 are facing.
10

11 And I know that I went over my time, thank
12 you very much.

13 CHAIRPERSON STEVENS: Don't worry, everybody
14 went over their time today, it's okay. I told you I
15 have to...

16 UNKNOWN: (INAUDIBLE)

17 CHAIRPERSON STEVENS: Yes, I am. A lot of
18 folks left, and I did want to make sure that we heard
19 the whole story. I think it was important, especially
20 with our first panel featuring BRAG and LIFE Camp, to
21 provide a more historical perspective on the topic.
22 But thank you for coming.

23 I do want to respond. I know you talked
24 about the shooting response. I have to respectfully
25 decline, and respectfully say that I do not agree

1 with us continuously putting our trauma out on Front
2 Street and being the story that's being told about
3 our communities. Because, whether we like it or not--
4 yes, we want to stand with our community, and I think
5 there are ways for us to stand with our communities
6 in those moments, but it doesn't have to be on the
7 news. It does not have to be crying mothers. It does
8 not have to be the perpetual cycle of trauma that's
9 being displayed.
10

11 So there needs to be a balance of what that
12 looks like and what we keep displaying. Because,
13 guess what? I have events in my district all the time
14 where young people are doing extraordinary things,
15 and nobody shows up. But as soon as there's a
16 shooting, we've got Channels 7, 4, 12, everybody's
17 out there to exploit our community.

18 So we as a people have to figure out how to
19 make sure that there's a balance. And there's a way
20 for us to show up and support our community members
21 without putting our trauma on display. I must
22 respectfully disagree with your statement. So...

23 COUNCIL MEMBER WILLIAMS: Just quickly, I
24 think my issue with shooting responses, and I feel
25 like Erica probably knows my opinions about this, is

1 that I think when you're talking about how to, in the
2 world of quantifying success and data, my issue is--
3 Erica made a good example about how a shooting
4 response should not just be people pretty much
5 rallying. It should be people providing services.
6 So, like just showing up to a shooting response, what
7 are you doing there? And I think it's the nature of
8 some of the shooting responses that I've seen lately,
9 and this idea of how you can quantify that, that is
10 leading to a reduction in violence? And that
11 connection to me is lost. So I just want to add that,
12 because I have my issues with shooting responses. But
13 not based on what you said, just based on what I see
14 and what doesn't take place, which is this sort of
15 wraparound effort that isn't just, "Somebody got shot
16 here." It's like, no, what else are we doing? How are
17 we engaging with the community to ensure that we are
18 truly making a positive impact and reducing violence?

20 TAKEASHA NEWTON: So, I wholeheartedly agree
21 with that. Re-traumatization is very real. And when I
22 lost my husband to gun violence in 2006, I didn't
23 have the community that I have now to wrap their arms
24 around me in support. What I had was the NYPD
25 pointing the finger at me and preventing me from

getting funeral assistance for my husband. My children didn't receive mental health services—no one to speak to. So these are the things that we need, and those things should not be withheld from us just because we're affected by gun violence.

CHAIRPERSON STEVENS: So, I have a question, and I'm happy you brought that up —well, not happy, I'm sorry for your loss. I want to send you love and light because that is a traumatic situation. But there has been some pushback, even when we brought it up to the Administration, that families who've been affected by gun violence are being denied services. I just want to have it on record that you experienced that.

TAKEASHA NEWTON: Yes.

CHAIRPERSON STEVENS: Can you tell us a little bit about that experience, because I was literally told by the Mayor's Office that that is not true, that it's not happening, and that everyone has access to this.

Could you just talk a little bit about it, if that's okay?

TAKEASHA NEWTON: I don't mind at all, and it is a fact that that happens. My husband was

labeled a gang member just because he was shot. And just because you are harmed by gun violence does not mean that you are a gang member. And no one should be labeled as such.

CHAIRPERSON STEVENS: Yes.

TAKEASHA NEWTON: So, where is the humanity for my children, who weren't even teenagers when they lost their dad, and received no assistance and no help at all?

And I'll say it here, because I'm being truthful and honest, the 114th precinct in Long Island City actually contacted social services and told them not to assist me because "I wasn't in compliance with them."

CHAIRPERSON STEVENS: So, the precinct contacted them and started that? Okay.

TAKEASHA NEWTON: Yes

CHAIRPERSON STEVENS: This is helpful information, because this is one of the things that we did give pushback on, and the Administration swears that that is not happening, that you cannot be blocked from services, and they tried to put it on the providers to say that it was them who were not willing to do the outreach. And when I gave pushback,

they kept saying, "You don't have any clear examples." I would love to continue this conversation, as this is definitely something we brought up, and they consistently say it's a non-factor, which is really upsetting.

TAKEASHA NEWTON: Well, it is a fact.

CHAIRPERSON STEVENS: I know it is, but you know, it's what...

UNKNOWN: (UN-MIC'D) (INAUDIBLE)

CHAIRPERSON STEVENS: Okay, absolutely. So, we will connect afterwards, because that was one of the conversations I had, and they made it seem like I was crazy. And I was just like "No, I've heard this from..." And I've heard this on my side in the Bronx, where families said that they were denied victim services because they were "known gang members". And it was kind of connected to my gang database bill. But we can talk about that offline. Thank you, guys, so much.

TAKEASHA NEWTON: Yes, thank you.

CHAIRPERSON STEVENS: And thank you for your time.

COMMITTEE COUNSEL: Thank you. I just want to make one last call to ensure that everyone who filled out a testimony slip was able to testify.

(NO RESPONSE)

COMMITTEE COUNSEL: That concludes the in-person portion of our public testimony, and we will now move to remote testimony.

If you're testifying remotely, please listen for your name to be called. Once your name is called, a member of our staff will unmute you. You may then begin your testimony once the Sergeant at Arms sets the clock and cues you to begin.

Our first panelist will be Omar Jackson.

SERGEANT AT ARMS: You may begin.

(PAUSE)

CHIEF ADVOCACY OFFICER JACKSON: (NO AUDIO) (INAUDIBLE) Chair Stevens (TIMER) for allowing me this opportunity to testify.

My name is Omar Jackson, and I am one of the fearless leaders of the Crisis Management System. I represent Stand Against Violence East Harlem (SAVE), and I serve as its Director. And our parent organization is Getting Out Staying Out (GOSO). I have well over 10 years of experience in this field

of work. SAVE is one of the crisis management organizations, so you are very familiar with the work we do at GOSO. They provide our wraparound services, focusing mainly on the 3 E's: Education, Employment, and Emotional Well-being.

And I know I may sound a bit redundant, because my colleagues spoke so eloquently about the Crisis Management System already, but I just want to speak on the amazing work that we do on the ground, in the juvenile detention centers, in the hospitals, in the schools. But I currently want to speak about our baseline projects, and I feel as if we don't--not are we not getting paid enough, but sometimes we don't get paid at all. Right? Especially the smaller organizations. So, ensuring sustainability through baseline funding is very important for the Crisis Management System. As CMS consistently makes measurable impacts in communities such as East Harlem, you know, through crisis response, through mentorship, through violence intervention and prevention, we all face the challenge of sustainability. And in order for us to continue doing this lifesaving work effectively, we need a consistent and dependable funding stream that

provides our funding on time. There are so many times in organizations such as mine that we have cash flow issues, and I know of other organizations that are sometimes not able to pay their staff for a certain amount of time. (TIMER) Uhm... (CROSS-TALK)

SERGEANT AT ARMS: Thank you for your testimony. Your time has expired... (CROSS-TALK)

CHIEF ADVOCACY OFFICER JACKSON: (INAUDIBLE) get paid earlier. Excuse me?

SERGEANT AT ARMS: Thank you for your testimony. Your time has expired.

CHIEF ADVOCACY OFFICER JACKSON: Okay, thank you.

COMMITTEE COUNSEL: Thank you for your testimony. Our next panelist is Jan Heimlich (phonetic)

SERGEANT AT ARMS: You may begin.

(NO RESPONSE)

COMMITTEE COUNSEL: If there is anyone on Zoom who wants to testify, please raise your hand.

(NO RESPONSE)

COMMITTEE COUNSEL: If there is no one else, I will turn it back to the Chair for closing statements.

2 CHAIRPERSON STEVENS: I would like to thank
3 everyone who was here today, including DYCD, all our
4 advocates, and those still in the room. Thank you for
5 your work and your service. However, as we have
6 discovered today, there is still much more to be
7 done, and I look forward to working in partnership
8 with all of you.

9 Thank you. [GAVEL]

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C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is no interest in the outcome of this matter.



Date July 25, 2025