



Testimony

of

**Jacqueline M. Ebanks
Executive Director, Commission on Gender Equity**

before the

**New York City Council
Committee on Women and Gender Equity**

on

Street Harassment Advisory Board

**Monday, November 29, 2021
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Good morning, Chair Diaz, and members of the Committee on Women and Gender Equity.

I am Jacqueline Ebanks, Executive Director of New York City’s Commission on Gender Equity (CGE). In this role, I also serve as an advisor to the Mayor and the First Lady on policies and issues affecting gender equity in New York City for all girls, women, transgender, and gender non-binary New Yorkers regardless of their ability, age, ethnicity/race, faith, gender expression, immigrant status, sexual orientation, and socioeconomic status.

The de Blasio Administration has worked relentlessly to promote equity, excellence, and fairness for all New Yorkers. It is within this context that CGE works to remove equity barriers across New York City. CGE carries out its activities across three areas of focus within a human rights framework and using an intersectional lens. These areas of focus are:

- 1. Economic Mobility and Opportunity.** The goal is to create a City where people of all gender identities and gender expressions live economically secure lives and have access to opportunities to thrive.
- 2. Health and Reproductive Justice.** The goal is to foster a City free from gender- and race-based health disparities.
- 3. Safety.** The goal is to foster to a City free from gender- and race-based violence.

Street Harassment

CGE applauds the Council’s effort to augment the Administration’s work to eliminate street harassment. The legislation, in its definition, rightly recognizes how intersecting forms of oppression manifest through this scourge, by explaining that the term “street harassment” means “unwanted or unwelcome disrespectful, offensive or threatening statements, gestures or other conduct directed at a natural person in public based on the person’s actual or perceived age, race, creed, color, national origin, gender, disability, sexual orientation or any other trait, status or condition.”

According to the Anti-Violence Project, an organization represented on our Commission, “this kind of harassment thrives in a culture and society where violence is common, accepted, and most often said to be the fault of the person experiencing it (victim-blaming). It limits people’s mobility, safety, access to public space and well-being and is a form of gender-based violence.”¹

Around the world, communities and organizations recognize the prevalence of street harassment and the ways it impacts and limits peoples’ lives. According to the United Nations, “available data suggest that the vast majority of women has experienced some form of unwanted sexual attention or sexual harassment in public spaces. Women and girls regularly experience sexual harassment and other forms of sexual violence in public spaces—on the streets, in and around public transport hubs, schools, workplaces, water distribution sites, public toilets and

¹ <https://www.antiviolenceproject.org/sexualized-harassment/>

parks. Moreover, many women street traders and vendors in open markets face violence and harassment on a daily basis.”²

Earlier this year, CGE partner L’Oréal Paris completed a 15-country survey about street harassment with a representative sample of around 1,000 women in each country. The results confirm once again that this is a pervasive and global problem. “Around 80 percent of women across the 15 countries said they’ve experienced street harassment.” Notably, this study included only women, ages 18 and up. The authors suggest, and other evidence shows, if teenagers and pre-teens were included and persons of all genders from the LGBTQ community and other targeted communities, these figures would be even higher. (Interestingly, 72 percent of women felt “harassers were emboldened to harass because of the increased anonymity a mask gave them.”)³

In 2018, the National Sexual Harassment and Assault Report, a nationally representative survey⁴ of approximately 1,000 women and 1,000 men, ages 18 and up found that women most frequently reported sexual harassment in a public space (66% of women), at their workplace (38% of women), and at their residence (35% of women). Men’s most frequently reported locations were a public space (19% of men), their school (14% of men), and for 13% of men their workplace, own residence, and by phone/text. Furthermore, a public space was the most frequently reported location for a person’s first experience of sexual harassment (37% of women and 29% of men) and the place where it occurred the most overall. These data show a disturbing and robust level of street harassment occurring throughout our nation.

While the difference in sexual harassment based on sexual orientation for women was not statistically significant, lesbian, and bisexual respondents reported experiencing each type slightly more than straight women. Notably, 42% of gay and bisexual men reported facing physically aggressive sexual harassment compared with 25% of straight men.

Persons with disabilities were significantly more likely to experience all forms of sexual harassment than people without disabilities. Urban women were significantly more likely than rural women to report experiencing sexual harassment in public settings (while the reverse held true for men).

The most frequently selected time for both women and men to first experience sexual abuse was when they were high school-age, 14 to 17 years old (27% women, 20% men). However, many people experienced it even earlier: 30% of women had experienced some form of sexual harassment and assault by age 13, as had 22% of men.⁵

Research and surveys focusing on smaller geographic areas and municipalities reflected similar trends. For example, when researchers examined 100 women’s and men’s experiences

²<https://www.unwomen.org/sites/default/files/Headquarters/Attachments/Sections/Library/Publications/2019/Addressing-violence-and-harassment-against-women-in-the-world-of-work-en.pdf>

³ <https://stopstreetharassment.org/2021/04/loreal2021study/>

⁴ <http://www.stopstreetharassment.org/wp-content/uploads/2018/01/2018-National-Sexual-Harassment-and-Assault-Report.pdf>

⁵ <http://www.stopstreetharassment.org/wp-content/uploads/2018/01/2018-National-Sexual-Harassment-and-Assault-Report.pdf>

with offensive speech in the California San Francisco Bay Area in the early 2000s, they found that 100 percent of the 54 women asked had been the target of offensive or sexually-suggestive remarks at least occasionally: 19 percent said every day, 43 percent said often, and 28 percent said sometimes.⁶ Another survey by the Los Angeles transit authority found in 2015 that 19% of riders have been harassed in the past year.⁷

It is vital to address the impacts that street harassment has on LGBTQ+ communities. In the US, the Anti-Violence Project compiled interviews of 1,036 survivors of hate violence that reported to 12 national AVP member programs in 2016. LGBTQ+ people of color were 2 times more likely than white LGBTQ+ folks to experience physically violent anti-LGBTQ+ harassment. Undocumented LGBTQ+ folks were 4 times more likely than other LGBTQ+ folks to experience anti-LGBTQ+ harassment.

These general trends surfaced in CGE’s survey of New Yorkers about the COVID-19 pandemic. We asked our non-representative sample New York City residents if they felt safe in public. Overall, 72% responded “no” (women: 74%, TGNB: 75%, men: 66%). When asked to elaborate, New Yorkers cited both sex-based and race-based harassment, for example:

- “The few times I had to take public transportation were somewhat scary: fewer people on the trains meant more criminally-minded males leering and deliberately approaching lone women, in direct contradiction of the orders to keep six feet apart.”
- “I am afraid of taking public transportation because of the increases in hate crime against Asian Americans.”
- “I’ve experienced more sexual harassment since the pandemic began. It’s making my mental health worse.”

Administration’s Response

Eliminating street harassment is a priority for this Administration, which has taken novel, decisive action. To educate New Yorkers about the many relevant protections in the recently strengthened New York City Human Rights Law, our colleagues at the Human Rights Commission (CCHR), have produced a number of know-your-rights materials and campaigns against street harassment. In “Harassment on the Street and in Other Public Spaces,” CCHR explains: “Under the New York City Human Rights Law, one of the strongest and broadest anti-discrimination laws in the country, women who visit, live, or work in NYC have the right to be free from discrimination and harassment as they go about their daily lives... “The NYC Human Rights Law prohibits gender-based harassment on the street, in public spaces, and in all types of public accommodations, such as restaurants and gyms.”⁸

CCHR also specifically targets harassment based on sexual orientation or gender identity: “LGBTQ individuals must be treated equally in the workplace, in housing, and in public spaces. It is illegal to harass, name-call, insult, refuse to serve, or intimidate someone because they are

⁶ <http://stopstreetharassment.org/resources/statistics/statistics-academic-studies/>

⁷ <https://stopstreetharassment.org/2015/08/launwantedtouching/>

⁸ https://www1.nyc.gov/assets/cchr/downloads/pdf/publications/CCHR_Women_FactSheet.pdf

LGBTQ.”⁹ And CCHR’s “While Black in NYC” campaign details New Yorkers’ right to be free from anti-Black harassment.¹⁰

Since our inception, CGE has worked in partnership with our colleagues at the Mayor’s Office to End Domestic and Gender-Based Violence on many of these issues described above, including ending street harassment. For example, we are currently in the middle of the initiative “16 Days of Activism Against Gender-Based Violence”, where CGE’s main effort is to train New Yorkers on how to intervene in street harassment.

For the second year in a row, CGE and ENDGBV are partnering with Hollaback! and L’Oréal Paris during the “16 Days” campaign to present "Stand Up Against Street Harassment" training sessions. Signing up for a bystander intervention training session or hosting a training gives participants tools to intervene safely when witnessing street harassment. In addition, ENDGBV will host the December 8 event "Gender-Based Violence (GBV) in the Community: What Is It and What Can We Do?" to help increase familiarity with various forms of GBV, including street harassment, and other intersecting interpersonal violence issues, the impact that interpersonal violence has on individuals and the community, and to hear about best practices that can be implemented in daily life to respond to survivors.

In recognition of this campaign, and in solidarity with the global campaign, tomorrow evening, iconic buildings and landmarks around the City will be lit up in orange lighting. These include City Hall, the World Trade Center, the Bank of America Tower, 4 Times Square, Gracie Mansion, the David Dinkins Municipal Building, Queens Borough Hall, Brooklyn Borough Hall, Staten Island Borough Hall and others.

CGE’s and ENDGBV’s partnership with Hollaback! against street harassment extends beyond the “16 Days” to serve New Yorkers year-round. In addition to offering and promoting bystander trainings, we are surveying and interviewing New Yorkers about their experiences with and preferences for bystander intervention in various street harassment situations. This work will result in recommendations for tools and materials to facilitate the efficacy of bystander intervention.

CONCLUSION

The Commission on Gender Equity welcomes this opportunity to supplement its efforts to reduce street harassment in New York City by learning more from stakeholders who will be part of the newly established Street Harassment Advisory Board.

Thank you for this opportunity to present testimony. We look forward to working with the Council to create safer streets for all New Yorkers.

⁹ https://www1.nyc.gov/assets/cchr/downloads/pdf/publications/LGBTQ_Brochure.pdf

¹⁰ <https://www1.nyc.gov/site/cchr/media/while-black-nyc.page>



Testimony of Natasha Godby, Deputy Commissioner of Emergency and Intervention Services

NYC Department of Social Services / Human Resources Administration

Before the New York City Council, Committees on General Welfare and Women and Gender Equity

Oversight Hearing: Update on Human Resources Administration's System of Domestic Violence Shelters

November 29, 2021

Good morning, I want to thank the Committees on General Welfare and Women and Gender Equity for holding today's hearing and for the opportunity to testify.

My name is Natasha Godby and I am the Deputy Commissioner of Emergency and Intervention Services (EIS) for the Human Resources Administration (HRA). I am joined by Elizabeth Dank from the NYC Mayor's Office to End Domestic and Gender Based Violence (ENDGBV).

Today, we look forward to updating the Council on our work to address domestic violence across the city, and our efforts to bring support and services to the most vulnerable New Yorkers. In the previous testimony before the Council in 2019, an update was provided on this topic, and a few short months later COVID-19 changed our environment and way of delivering services. While the pandemic brought on many challenges, we look forward to updating the Council on the critical work that continued uninterrupted by our staff and providers to ensure service continuity and support for survivors of domestic violence.

HRA is the nation's largest social services agency, assisting over three million New Yorkers annually through the administration of public assistance programs including cash assistance, employment programs, food stamps, public health insurance and other supports that help New Yorkers remain in the workforce. HRA also plays a role in the administration of housing programs such as supportive housing and services, designed to assist individuals who are experiencing chronic homelessness, individuals with HIV/AIDS, individuals with serious mental illness and/or individuals who are survivors of domestic violence, among others. Much of our work focuses on advancing one of this Administration's chief priorities: reducing income inequality and leveling the playing field for all New Yorkers.

Our staff at HRA's Office of Domestic Violence work each day to address the life-altering effects of domestic violence, a significant driver of poverty and homelessness. This is achieved by ensuring that survivors and their families have access to safe living conditions and trauma-informed services, both within the shelter systems and as they transition back into their communities.

HRA works with providers across the city to connect survivors of domestic violence and their children to critical services and programs. This work follows the New York State Domestic Violence Prevention Act of 1987, which requires counties to provide both non-residential services and residential shelter services to survivors of domestic violence and establishes program funding. The New York State Office of Children and Family Services (OCFS) promulgates and maintains regulations for licensure and the standards for the establishment and maintenance of residential and non-residential domestic violence programs. OCFS authorizes DSS/HRA's administration of the financial and contractual requirements of domestic violence emergency residential shelter program. Additionally, the New York State Office of Temporary and Disability Assistance (OTDA) authorizes DSS/HRA to administer the financial and contractual requirements of the domestic violence Tier II residential shelter system.

HRA's domestic violence shelter system is the largest in the nation. Our programs are designed to stabilize clients in a safe environment and are developed to address the trauma of domestic violence while at the same time increasing a client's self-sufficiency. The robust suite of services includes but is not limited to individual counseling, advocacy, psycho-educational groups and trauma-focused interventions. All domestic violence shelters are required to provide childcare services and assist clients with obtaining permanent housing, benefit entitlement application assistance, financial development services and workforce readiness services to enhance clients' self-sufficiency.

Our emergency domestic violence shelter system consists of 55 confidential facilities across the city with a total bed capacity of 2,451 emergency beds. These emergency shelter providers offer trauma-informed services to survivors of domestic violence who are in imminent risk and/or are fleeing a current domestic violence incident. Within the 55 sites, there are 10 DV Tier II/transitional shelter facilities, they include 447 units that serve domestic violence survivors who have stabilized over time in the emergency system and require extended services. In CY 2020, the HRA domestic violence shelter system served 9,439 individuals, which include 472 single adults and 3,626 families (comprised of adults and children).

These figures should be seen within the context of this Administration's ongoing efforts to increase support for survivors of domestic violence. Mayor de Blasio and Commissioner Banks increased shelter capacity. Under their tenure, 300 additional emergency beds were added and are operational and 400 Tier II units were awarded, of which 233 are operational, 62 Tier II units are scheduled to open at the end of this calendar year and 105 Tier II units are scheduled to open in FY'23. The last group of Tier II units were originally scheduled to open in calendar year 2021; however, they are delayed because of construction and operational-related delays due to the COVID-19 pandemic.

Since 2015, emergency shelters have served approximately 25,000 individuals per year. During that same timeline, Tier II shelters have served between 7,000 and 10,000 individuals per year. Looking at occupancy, since 2015, emergency shelter occupancy increased by over 160% and by over 300% for Tier II shelters.

There are various entry points into the HRA Domestic Violence Residential shelter system. First, through the NYC Domestic Violence Hotline managed by Safe Horizon, where domestic violence

survivors can connect with advocates to receive services, counseling, and information about available resources to maintain their and their families' safety. HRA NoVA (or No Violence Again) operates out of DHS Intake Centers where trained social workers conduct intake for domestic violence shelter placement, offer crisis counseling and referrals for services. Lastly, community-based referrals are other shelter entry points for survivors. OCFS regulations permit one third of shelter populations to be referred from the community, such as local police stations and neighborhood hospitals.

Enhanced Domestic Violence Services

Now, I would like to take this opportunity to shift and provide an update on our programs serving survivors of domestic violence. Our emergency shelter services are available and designed to assist domestic violence survivors who are facing imminent dangers to their safety and in need of safe temporary housing in accordance with State law. Our programs aim to help our clients manage the trauma of domestic violence and enhance their self-sufficiency. Specific services include one-on-one counseling, client advocacy, psycho-educational and trauma-informed interventions to address a client's individual domestic violence experience. Moreover, our shelter programs include housing and benefit assistance, financial development service, economic empowerment programs, mental health and substance use counseling and may include childcare services, provided on-site or via partnerships.

Our efforts to improve our services for survivors of domestic violence and sexual assault continue with the implementation of this year's Local Law 102, which requires DSS to provide survivor-centered responses to complaints of sexual assault or harassment made by a client or staff. We are working towards implementing the requirements of this local law and are coordinating the training and outreach steps to ensure survivors are aware of available resources. All domestic violence contracted providers were contacted and notified of their responsibility for developing and providing to HRA their policy and procedures to address sexual harassment, as per Executive Order No. 64 of March 2021. HRA in conjunction with ENDGBV developed a flyer with information and links to resources to assist survivors of sexual violence and provided the flyer to all domestic violence contracted providers to post and distribute in domestic violence shelters and non-residential contractor locations. We are working in conjunction with ENDGBV on the development of training and linkages and access to resources. We appreciate the Council's work and suggestions as we serve our most vulnerable New Yorkers.

Gender Equity

We would also like to update the Committees on our gender equity work. Over time, programs for domestic violence survivors were originally created to service ciswomen and their children. The DSS Diversity and Equity Team's Gender Equity Initiative engaged HRA's non-residential domestic violence providers regarding ensuring that they are inclusive places for people of all genders. Currently, HRA is working in collaboration with the Director of Equity and Gender to develop training to address services for LGBTQI+ individuals.

The NYS Social Services law mandates HRA to provide emergency shelter and other services for survivors of domestic violence. The law does not make distinctions on the basis of sex or gender

identity and HRA requires that all services are provided to all New Yorkers regardless of their sex or gender identity. A domestic violence survivor is “any person over the age of sixteen, any married person or any parent accompanied by his or her minor child or children in situations in which such person or such person’s child is a victim” who experiences domestic violence.

Placements in domestic violence shelter are subject to the client’s designated safe area, family composition, availability of a bed or unit that can accommodate the client’s criteria, and any other special needs that the client may have, including but not limited to their specific medical needs, pets, employment and child’s school location. In CY2020, the population of clients served that were over the age of eighteen, including single and heads of household comprised of 143 clients who reported they identified as male and 2,925 who reported they identified as female. To date in CY2021 116 clients reported they identified as male and 2,744 reported they identified as female.

Rental Assistance Access

Our Office of Domestic Violence, Housing Support Services, works with domestic violence shelter clients who are eligible for HRA housing subsidies, helping to issue housing certifications, reviewing and approving housing application packages, and conducting leases signings and renewals. As part of our efforts to enhance safety measures for our clients, clients have the ability to self-determine safe areas in communities where they are seeking permanent housing. This meticulous process helps ease limitations and expands housing options for domestic violence survivors seeking a safe home.

After-Care and Wrap-Around Services

Our programs and services also support domestic violence survivors to transition back into their communities. These services include crisis intervention, case management and advocacy, counseling, support groups and economic security advocacy, and are delivered through the NYC Family Justice Centers (FJC) and community-based services. HRA works with nine contracted providers to offer state-mandated non-residential services across the city for survivors. This program offers a range of supportive services to families who are survivors of domestic violence, along with after-care services for clients transitioning out of shelter to ensure they are stabilized once they relocate to permanent housing. In FY2021, the non-residential service providers enrolled 21,538 clients.

Domestic Violence Legal Services

HRA’s Office of Civil Justice (OCJ), which manages and monitors the City’s programs that provide civil legal assistance to New Yorkers in need, operates critical legal services programs that specifically address the legal needs of survivors of domestic and intimate partner violence. For survivors facing housing legal issues such as possible eviction, harassment by an unscrupulous landlord or other threats to the stability of their homes, OCJ and its non-profit legal services provider partners have made housing legal assistance available to survivors in all of the City’s Family Justice Centers. This program has provided legal assistance to 210 survivors and other household members, through the referrals made at FJCs.

HRA also prioritizes immigration legal support services for survivors and their families. In FY2021, the City's immigration legal support services, which include ActionNYC, the Immigrant Opportunity Initiatives (IOI) and legal programs supported by federal Community Service Block Grants, have assisted survivors in 878 immigration legal matters. OCJ also manages legal service programs through the Supporting Alternatives to Violent Encounters, or SAVE, program, which is funded by the Council. The SAVE program provides free legal services to domestic violence and intimate partner violence survivors in areas including family, matrimonial and consumer law.

Exits from DV Shelter

In 2018, Local Law No. 83 was enacted amending section 21-141 of the administrative code of the City of New York, in relation to exits from domestic violence emergency shelters. Local Law 83 requires HRA to submit an annual report to the speaker of the NYC Council and upload to the council's website, exits from domestic violence emergency shelters.

In accordance with OCFS regulations, emergency domestic violence shelters provide temporary safe housing and supportive services for up to 90 days and with additional extensions up to a maximum 180 days for clients in need of extended emergency services. Providers are expected to develop a housing plan with domestic violence shelter clients, while the HRA Office of Domestic Violence (ODV) works closely with providers to support staff and clients during each transition. In CY 2020, HRA DV shelters served a total of 9,439 adults and children – of which 2,341 were families with children and 386 were single adults that were discharged from domestic violence emergency shelters.

Streamlining Client Transition

HRA and DHS have implemented a streamlined process for clients who have reached the State-set 90-day limit in the domestic violence emergency system with no available options for permanent housing to seamlessly transfer into the DHS shelter system. This process promotes a safer and more efficient path for DV clients to access DHS resources and eliminates the disruptions that can occur when families move from one system to another and simplifies the sharing of information for admissions purposes. HRA's Office of Domestic Violence works closely with providers, who are expected to assist clients in developing a transition or exit strategy, to support staff and clients during each individual transition. In 2020, 3 single adults and 446 families timing out of DV shelters under the State rule transitioned over to DHS shelters.

Human Trafficking Liaison

As part of the responsibilities under the New York State Anti-Trafficking statute, HRA is mandated to establish a Human Trafficking Victim (HTV) Liaison. HRA's HTV Liaison is responsible for monitoring the application process of all state-confirmed human trafficking victims including minor victims who have been referred to HRA by OTDA contracted providers to apply for Cash Assistance, Medicaid and SNAP benefits. New York State assigns a contracted social service provider to assist the client with services. HRA has seen an increase in the number of referrals, in 2020 18 referrals were received and of that number 13 applied for and received benefits. In 2021, to date HRA has received 60 HTV referrals and thus far 17 clients applied for

and received benefits, our office continues to monitor the application process for the remaining referred clients. HTV's are able to seek shelter either from DHS or the DV shelter system if they are homeless. As an example in 2021, 7 clients had a prior history of visiting a DHS homeless intake site and were assessed by the No Violence Again (NoVA) program. Additionally, 4 had a prior stay in domestic violence shelter.

HRA Domestic Violence Programs and Services

HRA's Office of Domestic Violence (ODV) provides several programs and services to survivors of domestic violence and their children, including temporary housing, emergency shelter and supportive services and trauma-informed programming. These programs include:

No Violence Again (NoVA)

As mentioned earlier in the testimony, one point of entry into domestic violence shelter is through the NoVA program. No Violence Again, or NoVA, assists DV survivors seeking emergency housing from DHS. When a family member discloses that they have experienced domestic violence during the DHS intake process or DHS staff believes that DV may be an issue for the family, that family is referred to NoVA for a domestic violence safety assessment and possible placement in an HRA DV shelter. In CY2020 5,274 clients were assessed, of which 908 were determined to be eligible for placement under the State standard.

Domestic Violence Liaison Unit

In accordance with OTDA public assistance regulations the Domestic Violence Liaison Unit works to protect survivors of domestic violence who are at risk of being endangered through compliance with federal and state public assistance requirements, particularly those related to employment and child support. Clients are served by liaisons at all HRA FIA Job Centers who help determine eligibility for waivers from employment, child support, and other requirements to meet the client's safety and confidentiality needs. These waivers help survivors avoid activities that may put their safety at risk, such as traveling to an employment location where their abuser could find them and/or participating in paternity and child support enforcement court proceedings. The waivers give clients the opportunity to safely comply with federal and state public assistance requirements, so they can continue to safely seek employment and receive child support. In CY2020, the Domestic Violence Liaison Unit assessed 6,920 clients for safety and 5,694 waivers were granted under federal and state rules.

Anti-Domestic Violence Eligibility Needs Team (ADVENT)

The Anti-Domestic Violence Eligibility Needs Team, or ADVENT, conducts routine eligibility determinations and individualized case management for domestic violence survivors. The ADVENT teams also process housing applications and lease documents for HRA housing programs for clients in domestic violence shelters. In FY2020, ADVENT provided specialized services to an average of 311 clients in receipt of domestic violence services per month.

The Alternative to Shelter (ATS)

The Alternative to Shelter, or ATS, which is transitioning to ENDGBV, is a program that helps reduce the need to enter shelter by giving domestic violence survivors who have orders of protection the option to remain safely in their homes. ATS assesses each client's needs and develops a safety plan, with NYPD coordination, to ensure the client and their family can quickly alert the authorities when in danger. Clients are provided with a personal electronic response alarm device that is connected to a system monitored 24-hours a day that notifies authorities to dispatch police when the alarm is activated. In CY2020, ATS received 747 new referrals and had an average active caseload of 192 clients per month.

Teen Relationship Abuse Prevention Program (RAPP)

The Teen Relationship Abuse Prevention Program (RAPP) is a nationally recognized domestic violence primary prevention program. Located in public high schools and middle schools citywide, the program provides a comprehensive curriculum in which students learn to recognize and change destructive patterns of behavior before they are transferred to adult relationships. On average, 420 students a month receive individual or group counseling with, on average, 330 completing the 3-session curriculum.

DV Mental Health Services

HRA, in collaboration with ENDGBV, will now have funding to establish a Mobile & On-Demand Mental Health Services program that will provide shelter-wide mental health support services to domestic violence clients and their children. The program will commence in 2022 and further enhance the current array of domestic violence services provided by existing contracted providers by incorporating approximately 30 licensed clinicians, psychiatrists and social workers that will immediately screen, assess and provide mental health-focused care to approximately 9,500 families entering DV residential services programs throughout the year.

The Mobile & On-Demand Mental Health Services will include:

- A multi-tiered approach to provision of mental health services to domestic violence survivors and their families residing in DV shelter.
- Mental health trauma-informed social work services that are delivered in a culturally relevant environment and sensitive to the effects of domestic violence.
- Mental health services with a focus on children dually affected by both vicarious or secondary domestic violence trauma exposure and the adverse effects of homelessness on children.
- A Universal Mental Health Screening tool which can be used for the evaluation of all newly admitted shelter residents.
- Delivery of secondary tier mental health non-pharmaceutical intervention via a Psychologist/Social Worker for domestic violence survivors with identified mental health needs.
- Crisis on-call mental health services that can be provided either in-person or via tele-health.
- The third tier of mental health services will be in the form of a warm hand off to NYC

Health + Hospital psychiatric services via linkages.

Responding to the COVID-19 Pandemic

Now, we would like to highlight some of the essential work that HRA's Office of Domestic Violence staff performed during the COVID-19 pandemic as we continued to engage clients and all survivors to ensure the continuity of critical services efficiently, and without any disruption as the City transitioned to remote work.

During the COVID-19 pandemic, the Office of Domestic Violence continuously provided services to domestic violence survivors, including social services and shelter, in addition to new services to meet our different environment, such as internet connectivity for clients. The Office continues to provide these critical services and has worked to extend our public reach by breaking down barriers and meeting survivors where they are. For example, in collaboration with the Mayor's Office to End Domestic and Gender-Based Violence (ENDGBV), the Office is assessing additional means of communication via the Domestic Violence Hotline for initial assistance, such as text and chat communication functions, which may open other avenues for domestic violence survivors to seek help.

During the initial phase of the pandemic, from February to April 2020, the agency saw a decrease in the number of domestic violence referrals from the NYC DV Hotline. Since then, the referrals have increased to their pre-pandemic levels. To inform the public that domestic violence services were available during the pandemic, HRA and ENDGBV ran social media notifications to expand our outreach to vulnerable communities.

Several steps were taken throughout domestic violence shelters to maintain safety during the pandemic. Domestic violence shelters have been following Centers for Disease Control and Prevention (CDC) and NYC Department of Health and Mental Hygiene (DOHMH) guidance and protocols around safety to protect the health of our clients and their families. Domestic violence shelter providers have also been provided with free Personal Protective Equipment (PPE) from City and State agencies, such as hand sanitizer and masks for clients and staff. To safeguard the health and safety of our clients and staff at shelters, clients who tested positive for COVID-19 were quarantined in their individual shelter unit or at DHS Isolation Units.

Additionally, several initiatives were taken by our agencies and the City to improve our clients' time in shelter. To improve connectivity and remote learning, the City installed Wi-Fi in domestic violence shelters throughout the city beginning in 2020. Additionally, HRA worked closely with the NYC Department of Education (DOE) to ensure all school-aged children at domestic violence shelters received a device to access the internet. Clients and their families now have unlimited WiFi access for educational purposes, as well as to search for housing, employment, and related services (such as social services benefits using Access HRA).

From its onset and throughout the COVID-19 pandemic, HRA has advocated for and received significant temporary waivers from State and federal requirements to provide clients greater access to benefits and services. One of these waivers we obtained extended the 180-day State limit on domestic violence emergency shelter stays, giving our clients the flexibility and time to get back

on their feet. As we have reported to the Council previously, DSS/HRA/DHS also put in place several COVID-19 reforms and operational changes to better serve our clients. For example, we waived all in-person engagements for survivors of domestic violence and set up call-in numbers for assessment and crisis counseling.

In addition to being protected by the various eviction moratoria put in place due to the pandemic, on an as-needed basis, our clients were connected to pandemic resources such as the New York State Emergency Rental Assistance Program (ERAP). Resources such as these can assist our clients and their families transition from shelter and ultimately return safely to the community.

Legislation

Intro 2732 recognizes the complexities of gender-based violence that may contribute to a delayed initiation of a civil legal remedy. We support the intent of this legislation to expand and strengthen access to resources and remedies for survivors, and we look forward to working with the Council on a final bill.

Thank you for the opportunity to testify today on our work to protect survivors of domestic violence. We welcome any questions you may have.



Testimony: [Intro 2424-2021](#)

Committee on General Welfare Jointly with the Committee on Women and Gender
Equity

Nov 29, 2021

Good afternoon. On behalf of *Hollaback!*, I want to thank Councilmember Rosenthal, Councilmember Van Bramer, and Public Advocate Jumane Williams, who have worked tirelessly over the past 10 years to meaningfully address street harassment. I especially want to thank Jean Son, for her exceptional leadership in shepherding this bill forward.

I'm Emily May, co-founder and executive director of *Hollaback!*. *Hollaback!* is a global, people-powered movement to end harassment in all its forms, founded right here in New York City in 2005 by myself and six other young people. Although our mission has expanded over the past 16 years when we launched it was to address the very problem we're here to address today: street harassment.

Over the past two years, we have trained over 20,000 New York City residents in how to intervene when they see street harassment happening in partnership with L'Oreal Paris and the NYC Commission on Gender Equity. The training we've developed is one-hour, free, interactive, and has been used to train 400,000 globally.

According to recent research by Hollaback! and the NYC Commission on Gender Equity, 76% of the people who have witnessed street harassment since the training tell us they successfully intervened. Through these trainings, combined with 16 years of work on street harassment, we've learned a lot about how this problem operates.

Many people mistake street harassment as a problem that has no solution. While it can impact anyone, those most impacted are the people who are most marginalized in our communities: people of color, LGBTQ+ folks, folks with disabilities, religious minorities, young people, and others. The solution that policymakers globally most often turn toward is criminalization -- but criminalizing street harassment only stands to further marginalize communities already at risk and has never been demonstrated to reduce the incidences or impact of street harassment.

[Intro 2424-2021](#) offers a bold new solution because it puts the job of creating solutions in the hands of the advocates and community members. It is explicit in its intent to examine street harassment from an intersectional approach and without unnecessary

The logo for 'hollaback!' features the word 'hollaback!' in a bold, black, sans-serif font. The text is positioned to the left of a large, five-pointed star. The star is a vibrant magenta color and has a white outline. The word 'hollaback!' is partially overlaid by the star's points.

increases in policing and criminalization. A similar bill was successfully passed in DC in 2018, and has paved the way for a host of improvements in DC's approach to this issue. By adopting this bill, NYC will become a global model for innovative and community-led approaches to street harassment.

The time to act is now. According to a study by IPSOS and L'Oreal Paris, around one in three women (31%) said they faced street harassment in 2020. This figure is 46 percent for those ages 18 to 34.

Even in the wake of a global pandemic, street harassment persists. And so must we. I want to thank the Committee on General Welfare Jointly and the Committee on Women and Gender Equity for your leadership.



Testimony of Metropolitan NY Coordinating Council on Jewish Poverty (Met Council)
By Malka Himelhoch

For the New York City Council
Committee on Women and Gender Equity
Committee on General Welfare

Joint Hearing on Oversight – Update on HRA’s System of Domestic Violence Shelters
Intro. No. 2372-A

November 29th, 2021

Chair Diaz, Chair Levin, and Members of the Committees,

Good Morning. My name is Malka Himelhoch, I am a policy fellow at the Metropolitan Council on Jewish Poverty (Met Council). I would like to thank Chair Diaz and Chair Levin for holding this very important hearing and for allowing me the opportunity to testify. I am here today on behalf of Met Council first to ask that the New York City Council devote additional resources to expanding the domestic violence (DV) shelter system and then to speak briefly in support of Int. No. 2372-A.

For almost 50 years, Met Council has provided comprehensive social services to New Yorkers in need. Since the start of 2021 we have provided services to more than 300,000 people including 1,117 survivors of family violence.

As we are all aware, the Covid-19 pandemic has exacerbated already existing problems in our City. This is especially true in the realm of domestic violence. Since the start of the pandemic there has been a 50 percent increase in the number of clients reaching out to our Family Violence Program for help escaping abusive relationships. Not only have we seen a rise in the number of clients contacting us for assistance, but we’ve also seen a disturbing rise in the severity of their cases. More clients have reported being threatened by a weapon, strangled, and raped than ever before in addition to experiencing increasingly egregious incidents of humiliation and embarrassment. It’s evident that our families in crisis urgently need additional support and expanded services.

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As family violence providers, our first priority is using a trauma informed lens to create a safety plan. Often, this includes survivors leaving their homes, frequently with children. The level of safety that DV shelters provide to clients is a crucial element of safety planning for high-risk survivors and survivors whose resources have been limited due to domestic violence. However, the Human Resources Administration's (HRA) DV Shelter system is over capacity and has long been unable to accommodate all DV survivors seeking shelter. Accordingly, survivors are often forced to reside in Department of Homelessness Services (DHS) shelters. Indeed, the city comptroller's 2019 report showed that 41 percent of families entering DHS shelters identified domestic violence as the cause of their homelessness.

In addition to providing a safe, untraceable, space to live temporarily, DV shelters provide other crucial wraparound services including staff trained in trauma-informed care, DV specific housing and social services, childcare, healthcare, and assistance finding permanent housing. When survivors are unable to get into shelter or have to turn to DHS shelters for safety, they are denied the trauma-informed path to safety to which they are entitled.

Finding shelter for survivors without children is especially challenging since HRA DV shelters prioritize families over single adults. In September 2021, HRA sheltered over 1,000 families but only 95 single adults. As a result, our social workers are often only able to find them beds in DHS shelters for single women/men or arrange for them to stay with family out of state in order to keep them safe. While getting survivors to safety is always the top priority, it's both disruptive and additionally traumatic for someone who has already had to leave their home to be forced to leave their community and city to be safe.

Indeed, the need for shelter among DV survivors has only grown since the start of the pandemic in March 2020. At Met Council there has been a substantial increase in the number of clients we refer to shelter and who come to us requesting housing assistance as a result of DV. It has been increasingly difficult to find spaces for survivors and it is likely that this will become even more difficult as we near the end of New York's eviction moratorium on January 15, 2022, and the need for shelter as a result of domestic violence continues to grow.



Additionally, the committee should be aware that in several cases, our clients who live in NYCHA housing have had to wait between 6 months and a year after being granted an emergency transfer order to move into a new, safe, apartment. This egregious delay puts a greater burden on an already overstretched shelter system.

The Family Violence program at Met Council works with people of all cultures, races, religions, and sexual orientations, but it is known for our special expertise in working with the insular Jewish communities and our understanding of the complex systems and challenges faced by survivors from these communities. This community is vastly underserved by the existing DV shelter system. While 13% of New York City's population is Jewish, there is only one DV shelter in the city specifically serving Jewish survivors. This means that too often survivors must choose between their religious needs and physical safety.

We are calling on the city council to dedicate additional funding in order to increase the number of HRA DV shelters and the number of culturally sensitive DV shelters in the city. Prior to the pandemic, there were at least 12,000 DV survivors being housed in DHS shelters due to HRA's limited capacity. It is therefore our recommendation that HRA increase the number of DV shelter beds to accommodate the growing demand for shelter. Each of these individuals is entitled to have a bed in a DV shelter where their needs as survivors can be adequately served.

We also ask that more funding be devoted to providing supportive affordable housing for Domestic Violence survivors so that once they transition out of shelter these individuals can continue to access wraparound services and embark on a path of sustainability.

In regard to the other issue on your docket today, Int. No. 2372-A, Met Council fully supports the extension of the statute of limitations for civil rights violations pursuant to section 8-905 of the administrative code of the city of New York from 7 to 9 years in cases where a person was unable to commence an action because of infancy, injury, or disability. We thank Sponsor Rivera for her leadership on this issue.

Thank you for your time.

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Testimony by the New York Legal Assistance Group,
Oversight - Update on HRA's System of Domestic Violence Shelters,
Committee on Women and Gender Equality and the Committee on General Welfare
November 29, 2021

Chairs Diaz and Levin, Council Members, and staff, good afternoon and thank you for the opportunity to speak to the Committees on Women and Gender Equity and General Welfare on the Domestic Violence Shelter System run by the Human Resources Administration (HRA) (the DV-shelter system). My name is Deborah Berkman, and I am the Coordinating Attorney of the Shelter Advocacy Initiative at the New York Legal Assistance Group (NYLAG).

NYLAG uses the power of the law to help New Yorkers experiencing poverty or in crisis combat economic, racial, and social injustices. We address emerging and urgent needs with comprehensive, free civil legal services, financial empowerment, impact litigation, policy advocacy, and community partnerships. We aim to disrupt systemic racism by serving clients, whose legal and financial crises are often rooted in racial inequality.

The Shelter Advocacy Initiative at NYLAG provides legal services and advocacy to low-income people in or trying to access the shelter system. We work to ensure that every New Yorker has a safe place to sleep by offering legal advice and representation throughout each step of the shelter application process. We also assist and advocate for clients who are already in shelter as they navigate the transfer process, seek adequate

facility conditions and resources for their needs, and we offer representation at fair hearings.

The Domestic Violence Law Unit (DVLU) provides free representation to domestic violence survivors in the five boroughs, as well as continued survivor's advocacy and safety planning. DVLU attorneys have expertise in family offense petitions, custody and visitation matters, child and spousal support matters, contested and uncontested divorces, family law appeals, and domestic violence based immigration claims. We provide client-centered, trauma-informed services to ensure the survivors of domestic violence are able to achieve self-determination, safety, and security.

Based on my experience working with survivors of domestic violence experiencing homelessness, I appreciate the opportunity to offer the following comments addressing the need for access to DV-shelters need to be expanded, and for DV-shelter rules and policies to take into account the realities of survivors' lives.

I. DSS Must Increase Access to DV-Shelter

Rates of domestic violence and the need for a safe place to flee far outpace the creation of and existence of DV-shelters. This is true for survivors of domestic violence from all communities and identities. In 2018, more than 40 percent of the families entering Department of Homeless Services (DHS) shelters were fleeing domestic violence.^[1] Every one of these families were overflow from the DV-shelter system that numbered 2,500 beds at that time.^[2] In the midst of COVID, with so many survivors trapped in escalating violence for significant periods of time, we know there are so many more in need of shelter once the public health emergency abates, and they have more opportunities to seek help. Our shelter system must be able to accommodate those in need.

At NYLAG, we counsel numerous survivors who reach out to us for safety planning. We see first-hand survivors navigate the incredibly difficult decision of whether to leave their home, often many of their belongings, their community, and the financial stability they currently have, to leave abusive situations. Once they make this courageous leap, to be told that the DV-shelter system cannot accommodate them has an inevitable chilling effect, as well as long term tangible consequences to their ability to achieve stability and security.

If the DV-shelter system cannot accommodate survivors, they must be screened to enter DHS shelter, typically by applying at DHS' Prevention Assistance and Temporary Housing (PATH) intake centers. PATH intake staff is not trauma-informed, despite the fact that they are frequently interfacing with survivors of trauma. For instance, PATH intake staff regularly ask applicants to describe the circumstances that led to their homelessness in front of their children. Failing to provide trauma-informed, private screenings inhibits survivors from continuing with the process, or from sharing or disclosing the physical violence and/or other traumatic events that led them there. Moreover, the shelters in the DHS system are not in confidential locations and do not provide services tailored to protecting the safety of survivors of domestic violence, despite housing them. Many survivors will decide not to leave an abusive relationship to enter the DHS system because they fear they are going from one unsafe location to another, especially since they are at their most vulnerable for lethal intimate partner violence at the time of separation.

Unfortunately, the DV shelter system remains inaccessible for so many. It is well-documented that domestic violence affects people of all genders identities and sexual

orientations^[3], yet there remain very few beds in the DV shelter system for anyone other than cis-gender female survivors with young children. Most shelters in the DV-system do not permit non-female-identifying people to reside there, so non-binary individuals, male-identifying survivors, and/or survivors with older male-identifying children are far too often denied a DV-shelter placement. The same is true for survivors with more than three children, single survivors without children, transgender and non-binary survivors, and survivors fleeing from non-intimate partner violence. Similarly, survivors who have religious and dietary restrictions are most often not accommodated by the DV-shelter system, as many DV-shelters cannot at present meet those needs. At NYLAG, we work with survivors who have feared entering shelter because their cultural and religious edicts would be impossible to comply with, for them, and their children. We cannot ask survivors to choose between safety and their identities.

Our DV-shelter system must be expanded to increase capacity overall, and expanded to include capacity to serve survivors from all backgrounds and experiences. If there will be overflow to the DHS system, that system must be structured to ensure the DHS system is accessible and is able to engage with trauma survivors.

II. DV-Shelter Stays Should Not Have a Time Limit

Stays in DV-shelter should not be time limited, and in no circumstance should that time limit be 180-days. In the midst of the COVID pandemic, New York removed time limits for shelter stays. This must be made permanent. New York City rents are extremely high. Survivors experiencing poverty facing an end to their DV shelter stay are likely to face two options: seek housing assistance, or transfer to a DHS shelter.

Housing assistance, in its current form, is not responsive to survivors' experiences. The most common voucher awarded to clients experiencing homelessness is the CityFHEPS voucher, which survivors are not eligible for until they have resided in shelter for at least 90-days.^[5] Thus, for the first half of most survivors' stay in shelter, they are functionally ineligible to search for housing. Even after clients become eligible for a rental voucher, it can take many months to secure an apartment.^[6] Most of NYLAG clients who are in possession of CityFHEPS vouchers have not been able to use them to obtain apartments (although this Council's heroic action in raising the voucher value to market rate should hopefully alleviate this problem).^[7] And difficulty obtaining permanent housing can be exacerbated for our clients who are involved in a family court proceeding as the court may place geographic limitations on where a parent may reside and may mandate that a parent reside in a certain borough.

If, as happens so often to our clients, a survivor cannot find permanent housing within the period they are eligible for DV shelter, they must go into DHS system for a new placement. This is destabilizing for the survivors, as well as their children. Besides uprooting themselves again while healing from trauma, and the immense emotional impact that has, the DHS shelter to which the survivor is assigned may be far from their new employment, therapy and supportive services, far from their children's schools, or services, such as in the case of Jenna.

Jenna, a client of NYLAG, has a special needs child who needs regular home care and therapy. She fled an abusive relationship to enter a DV-shelter. When Jenna's 180-days were nearing an end, her child's father filed an emergency petition seeking custody, noting how the child may have his necessary services interrupted for a second time within 6

months (because they had to leave DV-shelter). The Court was extremely concerned about instability in the child's services. Jenna greatly feared losing temporary custody, so to avoid that outcome, she moved back in with her abuser. Jenna felt that if she were in the home she could protect the child, and if the father was awarded custody and had the child alone, without her protection, the child would be in danger. All of this occurred because Jenna could not obtain stable housing by the time her 180-days in DV-shelter were over.

Interruptions in schooling, services, and employment compound difficulties survivors face in achieving security. This impacts their ability to achieve financial independence, their ability to find and maintain permanent housing, their ability to heal through continuous support and services, and their ability to provide stability for their children.

DV-shelters need to be responsive to survivor realities. The many challenges survivors face upon fleeing include: finding stable work, re-enrolling children in new schools or services, receiving trauma-informed care for themselves and their children, navigating family court, and many others. Ideally, survivors should leave shelter only to enter permanent housing; stability is essential to successfully rebuilding and reestablishing their lives free from violence. Residence in DV-shelters must not be time-barred, and must allow for maximum stability for survivors and their children.

III. Rules of DV-Shelters are Often Opaque to Residents

As residence in DV-shelter is a coveted resource, our clients are anxious to follow the rules and not endanger their eligibility. However, survivors often do not understand the rules regarding the secrecy of the shelter locations and where they need to be picked up and dropped off to maintain privacy. Thus, survivors may violate rules without intending to or realizing that they have done so. And once a shelter provider deems a survivor to

have violated the rules, expulsion from that shelter (and as a practical matter, the entire DV-system), is solely at the discretion of that provider. As acceptance into the DV-shelter system is not a legal right, there is no right to appeal the termination of shelter. Thus, when a survivor is deemed to have violated DV-shelter rules, they are thrust abruptly into the DHS-shelter system.

One NYLAG client, Cathy, found herself in just this predicament. After months of trying to flee her abuser, Cathy was finally able to enter the DV-system. A few weeks later, Cathy had a friend pick her up for an outing a block away from the shelter. She did not understand that this was against shelter rules and had otherwise made all efforts to protect the confidentiality of the shelter address. This friend provided her immense support, enabling her to flee. At NYLAG, we know that support can mean the difference between someone staying or fleeing, as well as help with resiliency and coping after experiencing the trauma of domestic violence. A member of the DV-shelter staff observed Cathy getting into the car. When Cathy returned, she was informed that her DV-shelter placement had been terminated and that she would need to enter the DHS single-adult shelter system. Unfortunately, this event was so shocking and confusing for her that she instead returned to her home (and her abuser). This is the worst possible outcome. All survivors, and especially those in DV-shelters, have been through horrifically traumatic events and need the support that DV-shelters provide. Abruptly terminating their stays is likely to traumatize them even further and push them further away from the goal of helping them achieve stability and security.

Standard rules for DV-shelters, clearly posted and orally explained to the residents, in their preferred languages, must be mandated for all DV-shelters. In addition, such rules

need to take into account the lived experiences of survivors: which include needing support, as well as compliance with court orders.

IV. DV-Shelter Rules Often Contradict Court Orders

While we understand the need for DV-shelters to maintain certain rules of conduct and confidentiality, our clients are often put in the untenable position of choosing between following the rules of the shelter or following the directives of the Court.

Our clients with children are often most at risk as the children serve as a tether between the survivor and their abusive partner (who will often engage the survivor in litigation for years). Court orders frequently mandate certain days or times that visitation must occur. These are often in direct conflict with the shelter's rules. One of our clients, Carolina, was ordered by a Judge to meet in a public location, nowhere near the shelter whose location remained confidential in the proceedings, for visitation exchanges. The DV-shelter threatened to evict her and her children from the shelter if she complied with the court order, stating that there was no assurance that the father would not follow her back to the shelter after one of the exchanges and locate it. While the shelter's concern was valid, the reality is that survivors with children will have to interact with the parent that caused harm in some way with regards to the child(ren). Visitation cannot and should not place a survivor in the position of having to decide risking their custodial rights by failing to effectuate visits as ordered, versus have a safe, violence-free place to live with their children.

Another NYLAG client, Sima, fled the marital home alone, unable to take her children with her when she fled for safety. She was fortunate enough to be placed in a domestic violence shelter as a single individual. Unfortunately, shelter rules would not allow her to

have overnight visitation with her child, who lived primarily with the other parent. It took months of advocacy, during which Sima lost precious extended time to be with her child and likely causing harm to her pending custody request, to convince the shelter to allow the child to stay with her overnight.

These are not the only circumstances in which our clients have faced the impossible task of determining whether to follow shelter rules or court orders. In an effort to maintain the confidentiality of shelter, we often agree to visitation exchanges far from their location. As a result, clients and their children often risk missing curfew. For a survivor navigating life post-trauma, shelter must not be a place that adds to their trauma by leaving them fearful of losing their safe space. Rules must be client-centered, and take into account how to navigate the realities residents face while living there, if they have children in common with their abuser.

V. More DV-Shelters Should Allow Pets

Unfortunately, many survivors have to choose between leaving abusive situations and abandoning their beloved animal companions. This should not be the case. For those survivors who cannot get into DV-shelter and who instead are forced into DHS shelter, pets are only permitted in the DHS system with limited exceptions. Many survivors are not able to leave their animal companions behind, whether it be for fear of harm to the animal, due to the animal being their one source of support in the home during the trauma, or because their children are bonded with the animal so completely. This choice can effectively trap survivors in abusive situations. Increasing capacity of DV-shelters that allow pets would greatly alleviate this problem.

Domestic violence is a public health crisis. Our city needs to be able to meet the needs of survivors and their families by providing shelter and safe refuges that are responsive to survivor's realities, accessible by all in need, and provide the stability and security they have not have for far too long. Increased funding, expanding shelter capacity for all survivor identities, permanently eliminating shelter time limits, and ensuring that shelter rules are clear and flexible when needed are important steps in the direction of ensuring New York City meets survivor needs, and helps individuals in crisis.

We thank the Committees on Women and Gender Equity and General Welfare for the work you have done to facilitate services for vulnerable New Yorkers, and for taking this opportunity to continue to improve the conditions for our clients. We hope we can be a resource for you going forward.

Respectfully submitted,

New York Legal Assistance Group

ENDNOTES

^[1] Scott M. Stringer, *How New York City Can Increase Housing Stability for Survivors of Domestic Violence* (2019) <https://comptroller.nyc.gov/reports/housing-survivors/>

^[2] <https://comptroller.nyc.gov/reports/housing-survivors/>

^[3] For example, 1 in 9 men experience severe intimate partner physical violence, intimate partner contact sexual violence, and/or intimate partner stalking.

https://ncadv.org/statistics?gclid=Cj0KCQiA-eeMBhCpARIsAAZfxZDmpu0p_0pLl8b6g-426hjb1ImkSKD8AYjiKIheT2gTjX05iVLb7OcaAvnWEALw_wcB

^[4] https://ncadv.org/statistics?gclid=Cj0KCQiA-eeMBhCpARIsAAZfxZDmpu0p_0pLl8b6g-426hjb1ImkSKD8AYjiKIheT2gTjX05iVLb7OcaAvnWEALw_wcB

^[5] <https://www1.nyc.gov/assets/hra/downloads/pdf/cityfheps-documents/dss-7n-e.pdf>

^[6] In the first ten months of 2019 only 4 percent of 4,118 families with children in shelters were, on average, able to rent an apartment with their CityFHEPS vouchers each month (one of the reasons is that these vouchers are routinely denied by landlords). However, in May of 2021, this Council voted to increase CityFHEPS vouchers' value to market rate, matching Section 8 vouchers. Hopefully this will significantly increase success in using these vouchers. <https://www.curbed.com/2021/08/nyc-homeless-cityfheps-rent-voucher.html>

^[7] <https://www.curbed.com/2021/08/nyc-homeless-cityfheps-rent-voucher.html>



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**Testimony of Clare Plunkett,
Clinical Supervisor for Emergency Shelters,
Sanctuary for Families
before The New York City Council
Committee on Women and Gender Equity and the
Committee on General Welfare
November 29, 2021**

Good afternoon. My name is Clare Plunkett, and I am the Clinical Supervisor for domestic violence emergency shelters at Sanctuary for Families, New York State's largest provider of comprehensive services exclusively for abuse survivors and their children. We are so grateful to the City Council for the opportunity to testify today on the critical topic of HRA domestic violence shelters. We want to give special thanks to Darma Diaz, Chair of the Committee on Women and Gender Equity; and Stephen Levin, Chair of the Committee on General Welfare, for their strong advocacy on behalf of abuse survivors in the Council; and to former Women & Gender Equity Committee Chair Helen Rosenthal for her equally resolute efforts in that role.

For almost 30 years, Sanctuary has run a large, 58-family domestic violence transitional shelter and four small DV crisis shelters that together provide safe, confidential residence for 350-400 adults and children annually—including over 200 children last year. At the height of the pandemic, during which domestic violence survivors were disproportionately affected in addition to the challenges and trauma they already faced recovering from abuse, Sanctuary deeply appreciated HRA's responsiveness and expanded support for our clients. Sanctuary's shelter staff were in daily communication with the HRA Emergency Intervention Services unit: they provided PPE supplies for staff and residents, helped us quickly procure remote learning technology for school-aged children in shelter, and responded rapidly and compassionately in the event of a COVID case or exposure. HRA relaxed rigid rules to accommodate shelter residents with COVID infections in hotels if needed, and ensured reimbursement in cases where rooms in shared apartments had to be left vacant to avoid exposure if an infected family was quarantining there.

HRA has been a longtime partner of Sanctuary, particularly during the pandemic, and we truly appreciate their dedicated, hardworking EIS staff. However, our shelter clients continue to experience many of the same challenges we have highlighted in the past—particularly in their struggles to secure and maintain affordable permanent housing after exiting shelter. Many of these issues described in our September 2019 testimony to the Council at a prior HRA DV shelter oversight hearing.

One of the primary obstacles our shelter clients face is navigating the challenging housing subsidy system, including FHEPS, CityFHEPS and Section 8 vouchers; and NYCHA housing. This is especially concerning given that the federal and state eviction moratoriums will likely end soon. Though the CityFHEPS voucher increase in September 2021 up to federal Section 8 Fair Market Rent levels was a critical step forward, certain program requirements make it difficult for the low-income survivors we serve to participate. Apartment size requirements based on family size and composition can force families to search for unnecessarily large apartments that are over the voucher limit. For example, a 1-bedroom apartment would not be permissible for a single father with a daughter, whereas a mother with a son would be eligible to sleep in the same room. And while the CityFHEPS voucher recently increased, the FHEPS vouchers are still only \$1580 for a family of four, incredibly low in the NYC rental market.

Too often, shelter residents who are on a path to economic stability and independence find that working to support their families leads to exclusion or removal from voucher programs because their income is too high—a formula which is triggered at levels far below comfortable living wages. Also, a number of EIS staff vacancies, including many due to retirement, are not being filled, leaving only one or two people responsible for processing vouchers and other public assistance for the whole DV shelter system. With that limited staff capacity, there are long delays in voucher response times and approvals for our shelter residents. Sanctuary's new HUD-funded Continuum of Care rapid re-housing program, launched in May 2021, is becoming a valuable rental assistance resource for residents ineligible for vouchers, but this funding only covers a small number of families.

In addition to the challenges with housing vouchers, other current issues include: insufficient funding to hire adequate mental health counselors for shelter residents; and lack of shelter

beds for single abuse survivors. Due to these ongoing issues, Sanctuary urges the Council to work with HRA to take the following concrete steps:

- Revise housing voucher guidelines to make the program more accessible for low-income survivors leaving DV shelter;
- Increase HRA's EIS staff capacity to reduce voucher and public assistance response and processing times;
- Advocate for more funding for crucial shelter supportive services, including therapeutic services; and
- Increase DV shelter options for single abuse survivors.

We applaud the joint oversight efforts of the Committee on Women and Gender Equity and the General Welfare Committee. Our sincere thanks to Council Members Diaz, Levin, Rosenthal, and the other members of these committees who will be leaving the City Council at the end of this term—your tenacious efforts to improve the lives of NYC's most vulnerable residents have made a profound impact, and will be remembered. Thank you for the opportunity to testify today, and for your unwavering commitment to abuse survivors and New Yorkers in need.



CRUMILLER P.C.

November 23, 2021

Via Electronic Mail

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Committees on Women and Gender Equity & General Welfare
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RE: Hearing on Intro 2372-2021: Creating 2 Year Window for Revived Civil Actions under Gender-Motivated Violence Act

Dear Council Members Rivera and Dromm,

My name is Farzana Faruk, and I am a former resident of Queens, New York. I am writing to you today as a concerned citizen for the Hearing on Creating a 2-Year Window for Revived Civil Actions under the Gender-Motivated Violence Act.

Earlier this year, on August 13, 2021, I participated as a non-party in the class action lawsuit for claims of sexual assault, gender-motivated violence and medical malpractice against Dr. Ferdous Khandker. I participated as a non-party witness because the statute of limitations on my claims ran out before I could file my own claim against Khandker. I am telling my story today in hopes of shedding light on the many survivors of gender-motivated violence that also have their claims time-barred and are unable to get the resolution and justice that they deserve.

I am a 33-year-old woman born in Bangladesh and emigrated to the United States in 2000, when I was around 13 years old. When my family moved to Jackson Heights, they became acquainted with a well-known and respected doctor in the Bangladeshi community, Dr. Ferdous Khandker. Khandker is a partner at, and provides medical services in affiliation with, Western Care Medical Services P.C. and Jackson Medical, PLLC at 7038 Broadway #1, Jackson Heights, NY 11372. I regularly went to Dr. Khandker's facility for annual check-ups and usually visited with my mother.

On March 27, 2009, when I was 21 years old, I went to see Khandker alone. I went to see him for a sore throat and difficulty breathing, as I feared I was suffering from an allergic reaction. When I arrived, Khandker told me that he would check my breathing and my chest. He

told me to sit on the examination table and stretch my legs out, and placed his stethoscope on my chest. Khandker then directed me to lower my shirt. He lowered my bra, and took my breasts out of my bra, one at a time. I felt paralyzed and tried to process what was going on. Afterward, I left and never returned to the office.

In June 2020, I saw a Facebook post lauding Khandker for his COVID-related work with the Bengali community. I became distraught as I remembered that Khandker assaulted me in 2009. Around this time, many other individuals, of various ages, came forward with their own stories of Khandker's misconduct and predatory conduct, speaking about the way Khandker mistreated their mothers or grandmothers, some recounting their own sexual assaults that took place as early as middle school. After a group of women became more outspoken on social media recounting their assaults or the assaults of those who confided in them, Khandker sued them for defamation in an attempt to silence them. Khandker lost his suit, and the other survivors of assault have come forward to sue Khandker under the Child Victim's Act for sexual assault, gender-motivated violence and medical malpractice, among other claims. However, because I was over the age at the time of the assault – though barely – and because it happened 12 years ago, my claims are time-barred and I cannot join in the lawsuit formally as a plaintiff.

I am unaware of how many other victims Khandker has, but I believe it to be many. Khandker has wide and far-reaching influence over the Bangladeshi community in Jackson Heights. He uses his power and resources to intimidate and bully his victims into silence, and this, along with the negligence of the institutions that should have protected us, allowed Khandker to serially sexually assault and harass dozens of women and young girls under the auspices of providing medical care for decades. I urge you to please move forward with the resolution to create a two-year window for revived civil actions under the Gender-Motivated Violence Act so that survivors of violence, like me, may get the justice we deserve.

Sincerely,

Farzana Faruk

cc:
encl.

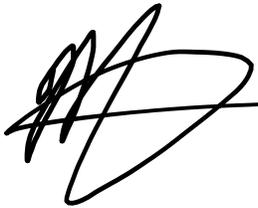
To The Members of the NYC City Council Women & Gender Equity Committee,

It is time to stand up and support LGBTQIA people who have been impacted by gender based violence. I firmly support the bill, and the Council's pending revisions to the Gender-Motivated Violence Act.

And I support survivors.

As a sexual assault survivor, I know firsthand the importance of being heard and believed. This legislation will empower victims to come forward to be heard, no matter their gender identity or sexual orientation.

Sincerely,
Marti Gould Allen-Cummings
Former City Council Candidate





new destiny
housing

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**TESTIMONY OF GABRIELA SANDOVAL REQUENA
NEW DESTINY HOUSING SENIOR POLICY ANALYST
TO THE NEW YORK CITY COUNCIL COMMITTEE ON WOMEN AND GENDER EQUITY
JOINTLY WITH COMMITTEE ON GENERAL WELFARE**

November 29, 2021

Thank you, Chairperson Diaz, Chairperson Levin, and members of the City Council Women and Gender Equity and General Welfare Committees for the opportunity to submit written testimony at this hearing.

New Destiny Housing is a 27-year-old nonprofit committed to ending the cycle of violence for low-income families and individuals experiencing homelessness and domestic violence. We build and manage new affordable housing with voluntary on-site services and through our rapid rehousing program, HousingLink, we connect survivors of domestic violence with safe, permanent housing in New York City.

We commend the Council for their work on behalf of New York City's most vulnerable by holding this oversight hearing on HRA's System of Domestic Violence Shelters and introducing these two bills today.

ENDING THE CYCLE OF TRAUMA

Domestic violence is the number one driver of family homelessness in New York City. In 2020, more than 9,400 individuals entered the HRA domestic violence system and 95 percent of them were families with children.¹ Once they enter the system, families are more likely to transfer from domestic violence emergency shelters to another shelter than moving to permanent housing. The Department of Social Services' 2020 Annual Report on Exits from NYC Domestic Violence Shelters shows that 53 percent of the 2,341 families with children that left HRA DV emergency shelter were transferred to other shelters, upon reaching the State-set 90-day limit.² **That is more than 1 in 2 families with minors that left shelter for shelter.** This includes 352 families who were discharged to DV Tier II shelters, as well as 889 families that went to DHS shelter (either streamlined by HRA or administratively discharged and eventually went to DHS on their own).

Shelter will always be an important resource for domestic violence victims, but it should not be their only resource. While recent policy changes will help improve these frustrating outcomes, such as the enactment of Chairperson Levin's Intro 146 which enhanced CityFHEPS vouchers, more must be done by the incoming Council and Mayoral administration to end this cycle of trauma.

We can solve this crisis by increasing the choices for victims beyond shelter. Critical components include: expanding permanent housing options for those currently experiencing homelessness; an increased investment in prevention to mitigate those entering or returning to shelter; and refocusing

¹ NYC Department of Social Services, 2020 Annual Report on Exits from NYC Domestic Violence Shelters, page 3

² Ibid

prioritization of supportive housing based on vulnerability measures instead of the length of time the households experience homelessness.

INTRO 2372-2021

New Destiny would like to express its support for Intro 2372-2021 introduced by Council members Carlina Rivera and Selvena N. Brooks-Powers, which would create a two-year look-back window to the gender-motivated violence act and extend its statute of limitations.

Research shows that 99 percent of women experiencing domestic violence are also victims of economic abuse nationwide.³ According to a survey by Safe Horizon, 92 percent of survivors entering shelter reported experiencing economic abuse.⁴ The effects of economic abuse can be catastrophic and last for years, i.e., bad credit score and sparse employment history. Intro 2372-2021 would give survivors the opportunity to pursue civil actions to redress the wrongdoing done to them and help recover compensation from their abuser.

Thank you for the opportunity to submit written testimony. I welcome any questions you may have and look forward to collaborating further.

Gabriela Sandoval Requena

Senior Policy Analyst at New Destiny Housing

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³ University of Wisconsin-Madison Center for Financial Security, Measure the Effects of Domestic Violence on Women's Financial Well-Being, page 1

⁴ Safe Horizon, Beyond Shelter, page 3

TANISHA JOHNSON STATEMENT IN SUPPORT OF A STATUTE OF LIMITATIONS WINDOW FOR THE GENDER-MOTIVATED VIOLENCE PROTECTION ACT

The Gender Motivated Violence Protection Act says that “Gender-Motivated Violence Inflicts Serious Physical, Psychological, Emotional and Economic Harm on its Victims.” My name is Tanisha Johnson and I am one such victim.

My perpetrator was my doctor, Ricardo Cruciani. He was a world renowned neurologist at Beth Israel Medical Center/Mt. Sinai here in New York. He used his prominence, his prescribing of massive amounts of addictive opioids and my own shame and fear that I wouldn't be believed to keep me quiet for years. Sexual assault victims like me are kept quiet for these reasons and many other reasons you will hear about today.

We need laws which permit victims to come forward on their own terms. Only now, many years later in my long journey can I talk about it.

I've learned that a statute of limitations is a set time for someone to come forward and act under the law.

I'm here to tell you that:

- A victim doesn't have a set time for when they can come forward.
- A victim doesn't have a set date when they go from being an victim to a survivor.
- A victim shouldn't have a set time to confront their perpetrator and their employers who shield them.

- Not changing the statute of limitations **only helps criminals** and those who facilitated those crimes.
- Not changing the statute of limitations **helps criminals hide** and **continue to harm** more victims.
- Not changing the statute of limitations **only hurts victims** like me.

Please pass the amendment to allow a window for justice to be pursued by all victims of gender motivated violence.

Shame is the biggest emotion to have to manage. It is central to surviving sexual crime.

Perpetrators know this. The New York statute of limitations for crimes of gender-motivated violence is one year: 365 days. This effectively leverages sexual predators. The entire judicial process leverages sexual predators. Why are we having this hearing in November of 2021. What does the very fact of this hearing say about prosecution of sexual crime today?

I'll give you an example. In New York State, the statute of limitation for "grand larceny" is five times longer than the statute of limitation for sexual violence.

Five years -versus- 365 days.

Why does the law dictate that shame evaporate within 365 days? That it dissipates enough to take off all your clothing in front of lawyers and judges and court officers and stenographers. That it dissipates enough to take off all your clothing at the dinner table... in front of your family. That it dissipates enough in 365 days to relive your violations.

Please take my case as an example. Dozens of women sought medical care for themselves and their unborn babies, and were sexually violated by their obstetrician. Who exactly can comprehend and assimilate this fact: that you can not trust your obstetrician??

Are you brave enough, within 365 days, to cast a hard shadow over the birth of your brand-new baby? Are you brave enough, within 365 days, to enter into contentious legal proceedings and take joy away from the imminent birth of your newborn? Take joy away from all others closest to you?

Shame is an insidious obstacle. It is haunting. No newborn mother "wants" to report sexual predation by her doctor.... committed during the most vulnerable moments of seeking medical help. For victims of Dr Hadden, the biggest humiliations happened during the moments of greatest trust.

And Dr Hadden knew that. This was the pattern. It was absolutely intrinsic to his crimes. It motivated his crimes. He knew his victims would be trapped by his crimes. By the shame of reporting such travesty right at the most meaningful and important moments of their lives.

Can you imagine what this is like? Undergoing the abject sadism of an obstetrician?

And by extension, can you comprehend the sadism of any sexual predator? No.

But you can use the example of my case as a template for gender-motivated crimes. Please support extending the 365 day statute of limitation for all gender-motivated crimes.

Robert Hadden is a serial sex offender. In 1993 he sexually abused me during my first--and fortunately only--appointment with him. After spending the day following that appointment wanting to hide in a closet, I suddenly realized why: I had not had a normal gynecological exam. I had been sexually violated by a physician I'd assumed trustworthy.

Seven months later, I finally forced myself to write the detailed letter of complaint I'd known I must write, for if women didn't complain, with specifics, no one would discipline this very bad doctor whose practice of medicine was indeed *mal*, that is, bad or evil.

Inexplicably, despite complaints beyond my own, Columbia Presbyterian allowed Hadden to continue practicing for nineteen years.

During that time I had gynecologic problems and dreaded pursuing treatment, for I'd moved to an area with no female ob-gyns. The *only* reason I had a potentially cancerous condition treated were my young children.

For years, I belabored the question, why had Hadden chosen *me* and gotten [air quotes] "to work" so quickly? He couldn't possibly have a full practice if he treated *all* his victims as he had me, from day one--could he?

I envisioned scenes between Hadden and Columbia's Acting Head of OBGYN--whose response to my letter assured me he would investigate my allegations and get back to me promptly--he never got back to me at all. How had Hadden savaged my credibility? What had I told him in our initial interview that he'd used against me? Dare I ever speak openly to a doctor again?

This evil physician invaded my thoughts, as well as nearly every medical interaction I had for over two decades.

A one year statute of limitations for filing civil suits in sex crime cases makes so little sense it seems a giveaway to serial perpetrators and the institutions that shield them--an invitation for the low-risk satisfaction of contemptible desires, be they prurient or financial.

The GMVA's look back window will allow any survivor in New York City to have her or his day in court, *whenever* they are ready to speak.

I cannot begin to thank everyone for all the support we've received thus far.

Speaking publicly and getting this bill passed was incredibly cathartic. If only we'd been granted the opportunity 6 years ago as we'd been promised. Going public and having it televised was scarier, but worth it because if we keep abuse hush-hush, then we keep it stigmatized. We decrease the chances of victims coming forward, and we reduce the chances of things ever changing.

I don't know why this happened to me, but I do know that speaking this past July was HUGE for me. I took the biggest step- from PTSD, into Post traumatic GROWTH. Trauma keeps you locked in the past, and believe me it gets dark there. Hopelessness feeds trauma, while time, support and professional help and action can heal.

July 29, 2021 was the first time in 15 years that I felt hope, that I felt alive. Never ever let anyone take your power, right? Well, right now our laws do just that. They basically say, too little, too late. Processing trauma takes time, and this works in the predator's favor and against the victims!

Do you know what trauma/abuse/sexual abuse does to a person? It is often an invisible poison. It leaves no visible scars. It seeps in undetected and is often a silent killer. You may not even know what's happened. Especially when it's carried out over time.

Instead of support and sympathy, you question your own sanity and those around you will often do the same. Victims of trauma are more likely to self harm or to numb themselves than to get help. It is the most perfect crime because our laws currently facilitate the perfect coverup- most often by the time the trauma is processed, it's too late to do anything about it and the predators know it.

Shall we discuss PTSD? Even if we are lucky enough to get the proper therapy, we can never control every outside "trigger." How exhausting it is to be hyper vigilant at all times, dissociating from life. Surviving but not thriving. How for many it's easier to feel nothing at all, than to risk feeling joy and it's counterpart, pain. How for me personally, when I allow myself to feel joy, I get slapped with horrible flashbacks and migraines. How the more I face it the more it hurts, but the more I run the more it hurts too. There's no way out!

I can't erase it. So what then, just accept it? Accept that it just wasn't fair? Accept that I was taught to accept "life's not fair" instead of being taught to fight for justice? Because when I did fight back, justice laughed in my face, when Hadden got a plea deal behind our backs, as if the law was saying "told you so." So what exactly was I taught? Compliance? Deference? It's time for change.

The GMVA press conference and introduction of the amendment was step one, but we need to get the bill passed.

Let's get rid of these ridiculously short statutes of limitations, prioritize justice for victims and survivors over the comfort of rapists and criminals, and help New York City serve as an example for the rest of the country to follow.

Let's show NY and the rest of the world that we see you. You aren't alone. Your pain is real, and the law understands that internal pain is just as valid as external pain.

—Anonymous Survivor (AS)

Good afternoon, Council Member Rivera, Council Member Brooks-Powers, Committee Members, and guests.

My name is Jessica Ibguy, and I am a former resident of Brooklyn, where I grew up in the 1980s with my father and step-mother.

I grew up around the Jewish community in the 1980s, often attending services at the Chabad Lubavitch headquarters. My father began working for a prominent member of the Habad community, Hirschel Pekkar, in 1991.

Pekkar was the silversmith who created one of the most influential pieces of Jewish artwork of the 20th century, a 6-foot, gilded menorah that sits till this day in the Chabad Lubavitch headquarters. Each year during Chanukah services, masses of people came and marveled at the lighting of this menorah'.

the service till this day is broadcast to millions all over the world
today exactly is actually the first lighting out of 8 days/

What none of these people knew, until recently,
is that the celebrated man who crafted such a dazzling structure had also molested me over a dozen times when I was only 6 years old.

They did not know that the rabbinical courts had found him guilty of wrongdoing in my molestation, as well as in the assault of other young girls, and yet did nothing to punish him.

, only in the past years while living in Israel I started realizing the reason for my struggle with PTSD, anxiety, depression, and an eating disorder for so many years,
but what could I do? It had been too many years now to do anything more about it.

I found out about the Child Victims Act shortly before the August 14th deadline and rushed to file a lawsuit against him before time ran out. Then, just two weeks before the deadline, and on the eve of our filing, Hirschel Pekkar died.

I was lucky to have found out about the Child Victims Act before the deadline,
but I know that many other survivors were not so lucky.

Now, they have no recourse: they must continue to suffer in silence, as I suffered,
unless you vote to amend the Gender-Motivated Violence Act
and open a two-year lookback window for survivors to file suit against their abusers,
no matter when that abuse happened.

i thank you for hearing me out

i speak for all the abused children and my self

My name is Cat Rajnauth I am a transgender woman born and raised in NYC later on in life moved around trying to find myself and where I fit in at, At 42 years old and have identified as a female since I was 5 yrs old not knowing what was wrong with me or if anything at all was wrong about how I felt.

37 years later realizing nothing was ever wrong with me but, something was wrong with the people who viewed me as different or weird or gay or fag, or as trans or drag queen, I soon realized I fit in everywhere.

Speaking as a Transgender woman for the last 3 decades I have only been look at and used in anyway shape or form sexually. In the last three decades there has been minimum of job opportunities if not any work at all for transgender's other then sex work, to name a few places Craigslist to back page, Eros , Twitter , Snapchat , And now ONLY FANS even Facebook exposes the LGBT community to high rates of sexual violence and abuse. My community is exploited every day.

In 2021 the world we live in doesn't understand gender at all, here a brief of my experience in 2019 I transferred my Atlanta GA driver license to NYC as my driver license stated over 10 yrs FEMALE, but Springfield NY DMV decided to be sexist and tell me because I lived my life for two decades as a woman and had breast and everything else like a female, and didn't have a full sex change that my license needed to state MALE on it. I felt disgusted with myself to even have to settle for it and agree after trying fight for it and the DMV supervisor agreed I could only get my driver license back if I put MALE, because I was indeed of my driver license I did it. Moving on to registering kids for school in NY sept 2020 in Suffolk county I did everything else any other parent was required and was a success I thought until the first day of school and I stated privately I was the kids biological father, not mother my kids then couldn't start school until I was able to even show proof I had custody of the kids which it was more of the fact of me being transgender more then anything after getting lawyers involved my kids was then allowed to go to school.

My 10 yrs daughter who now identified as a he and is transgender has been humiliated in school because of his gender and whom he identifies as, it got to a point my kid was scared to use the restroom and at 9 yrs old coming home urinating on him self after holding his bladder all day so he wouldn't be called a transformer or a he she for using the bathrooms at the school located in Coram NY.

I myself have been targeted in Best Buy and smith haven mall just for using a gift card or credit card, apparently black transgender woman are the new target for shopping while being black in America.

Why is it being hiv and diagnose in nyc is my Medicaid being cut off or my meds being denied cause my insurance is no longer active. To help with prevention and spread of HIV Is never stopping or cutting off the care or resources that these individuals or someone like myself may need. where I have to come up with \$1500 in a day just to pay for pills that going save my life, if it wasn't me and I didn't have the resources to get the funds to pay for my meds, what would of happened then.

Sex work is what would of happen cause it's sometimes the only resource we have in or community.

Putting these laws in place now allows the LGBTQ community to be able to be apart of a society and it's public where we are not looked at as less then it's general public do to the deference of gender not being understood. These laws are a start for equality not only for me or you but for the future of our kids as well.

Good afternoon my name is Dianna Prashad. Thank you for allowing me the opportunity to address the committee members. I would like to bring my safety and quality of life issues to the attention of this committee that my household has been enduring close to 2 years at the hands of illegally placed DSS clients in a HPD first time homeowner initiative dubbed Edgemere Phase II, a community of townhomes created in 2007 and bound by 25-year owner occupancy clause. DSS/HRA has been paying a homeowner in the home attached to mine who is in an active contract with HPD to breach her owner occupancy provisions to house their clientele from March 2020 to present. My wife and I have been placed in a very dangerous situation as owners of the adjacent property by these illegally placed DSS clients who have been threatening our safety, damaged our property, have been habitually rushing to attack us in and around our property. There were threats made to hit our parked vehicle and on January 1, 2021 these threats were realized when our parked vehicle was deliberately hit at 1:40 a.m. DSS clients have been dealing drugs out of the premises, have been running an illegal daycare and operating an illegal car rental business from the premises. My wife and I have been and continue to be disparaged based on our sexual orientation, have been threatened with bodily harm and some of these threats by DSS clients (parents and children included) were verbalized in the presence of the NYPD. HPD and DSS are aware of these issues since March 17, 2020 yet have failed to address them and have cited us as “complainers” as though we have no rights to complain being thus targeted by these DSS clients. I would also like to add that other homeowners on my block have also complained about the degradation of our lives by these DSS clients to the Mayor’s Office of Community Affairs.

As LGBTQ black homeowners and taxpayers we have seen that there are gaps in legislation that fail to protect us hence in over twenty months of ongoing harassment by DSS’ illegally placed clientele, we as homeowners have no reprieve to obtain a protective order against our ongoing safety issues which are couched in intolerance, hate speech, homophobia and active “promises” of physical assault. As LGBTQ homeowners who are likewise subject to a homeowner occupancy clause binding us to our property for twenty five years and who have been actively dealing with issues of stranger violence, threats and homophobia for over twenty months via this illegally placed DSS problematic family into a home bound by the selfsame occupancy clauses, there are no protections for us.

All laws that exist governing harassment must be precipitated by the actualization of physical violence which means that they are all reactive rather than preemptive. As part of disenfranchised group of citizenry being both black and LGBTQ, we have been on the receiving end of a very dangerous situation that was literally brought to our doorstep by DSS/DHS and their illegal placement of their clients into a home precluded from renting and more needs to be done to address deficiencies in laws that do not proffer any protection to individuals like us who are dealing with protracted harassment issues and intersecting issues of hate, violence induced hate by DSS problematic clients.

While as a woman I understand the issue of domestic violence, as a black LGBTQ homeowner who has and continues to be targeted by DSS’ clients, there should be laws protecting us as well from DSS clients rather than further insulating them. Additionally this committee needs to address current harassment legislation that are so skewed that taxpayers have to be harmed or killed before their harassment can be addressed. In an age where our community of LGBTQ continues to be killed at an unprecedented rate due to hate and ignorance these archaic laws must be amended. There is no way that as a LGBTQ family that we should be enduring twenty months of ongoing harassment and

threats by DSS clients devoid of legal ramifications, civil penalties, and administrative intervention but NYC laws have made all of this possible. For us to be taxpayers and homeowners and made to endure these atrocities in our homes is likewise egregious. The fact that the Moratorium is now being used by DSS to excuse the removal of their illegally placed clientele irrespective of safety issues that we continue to face as homeowners and tax payers is likewise unconscionable. The fact that these DSS clients are actively engaged in criminality also has far reaching consequences for us as homeowners and taxpayers who are stuck in a twenty five year contract with HPD and we are deserving of protection from our legislative body and this includes amending laws to address DSS clientele as the aggressors. Everyone in the DSS programs are not victims and their status as DSS clientele should not be exploited at the detriment of society as a whole or used to insulate them.

Legislation has to be put in place that protects citizenry from targeted acts of harassment by DSS' clients and a code of conduct needs to be underwritten into law governing the social service clientele with corresponding loss of aid or penalties so that they are real life consequences for these targeted acts of harassment. There is no way that this DSS family should have been allowed to persist with twenty one months of harassment, homophobic threats after being illegally displaced into our community of working class law abiding tax payers yet are able to retain their benefits and continue to illegally reside alongside us where this harassment is ongoing. Our experiences at the hand of DSS and HPD are very reminiscent of the attitude of this administration under DeBlasio that is geared towards chaos and lawlessness. We are tired of paying taxes and participating in a city that does not care for its citizenry unless they are monied or politically connected and as committee presiding on general welfare you have to do a better job with addressing issues that the regular citizenry are dealing with referencing mismanagement, abuse of power, harassment by DSS wards as promulgated by agencies under your purview particularly since my wife and I have reached out to some of you committee members directly (such as Chairman Mr. Levin) but have thus far been ignored.

As women of color and LGBTQ, my wife and I continue to feel the effects of being marginalized, oppressed, discriminated against and retaliated against under HPD and DSS in the DeBlasio Administration. This should not be the case as we are living in NYC in the twenty-first century yet have been told that our safety is incidental to a DSS family's need for housing albeit in an illegal dwelling that is precluded from renting until 2032 based on active owner-occupancy clauses. The fact that DSS is illegally remunerating the errant homeowner with a NYC Housing Voucher for going on twenty months facilitating not only the breach of contract, but actively engaging in conflict of interest at the detriment of our safety and quality of life as legitimate homeowners and tax payers is problematic and speaks the unethical stance of their employees inclusive of Steven Banks, DSS' Commissioner whom I personally emailed to apprise him of our issues with his clients on September 14, 2021. To date our lives, safety and employment continue to suffer due to DSS' refusal to remove the illegal tenancy from the residence.

All Commissioners involved are aware of the issues but have done nothing to terminate the illicit rental arrangement with DSS. Commissioner Carroll of HPD continues to cite that they are looking into legal options albeit when the issue is that HPD has failed to monitor and enforce primary occupancy clauses intrinsic in our contract (Edgemere Phase II created in 2007) since January 2010 which accounts for eleven years of mismanagement and eleven years of ignoring the viability of a black and brown community. In a November 9, 2021 Housing Committee hearing paneled by HPD Deputy Commissioner Elizabeth Oakley, we were informed that "HPD takes occupancy

requirements seriously and enforce them yearly” albeit in new developments where gentrification is the agenda but in a black and brown community our property values, our quality of life and our communities are deemed inconsequential thus HPD has not seen fit to monitor or enforce these selfsame occupancy requirements in our community for eleven years and counting. In twenty one months since this excuse has been echoed by HPD’s leadership, there has been no resolution and Commissioner Carroll has failed to deliver on her promises as well as address departmental shortcomings. Commissioner Banks of DSS has likewise ignored our request for intervention and has not responded to any of the correspondences sent to him which were verified as received by Mayor’s office of Community Affairs. We have also contacted DOI to report these contractual breaches by homeowners which have been ongoing for over nine years but they have cited that they are “deferring the matter to HPD as housing experts.” How is it permissible that DOI as the independent investigative arm of NYC, the agency that is tasked with checks and balance in NYC, defer to an agency that has failed to do their jobs for eleven years and counting? I believe that we are being ignored because we are merely citizen reporters. In short, we have been dealing with widespread corruption in this administration and should not have to live this way with our lives in the balance due to NYC agency failings and ongoing participation in wanton fraud with each agency deferring to the other and collectively using these problematic DSS clients to enact an agenda of retaliation with the hope that we will suffer harm or at the very least be driven from our homes by the ongoing harassment by DSS’ illegally placed clientele.

What I am trying to understand is if CityFEPS Voucher Program is thus used to further conflict of interest and fraud and it is being funded and operated under NYS laws then how is it that under Commissioner Banks’ leadership there is no accountability by DSS or their clients? Why is there no transparency in this system? No Code of conduct for their clients? Why is there no fact checking or verification that host homes are legal rentals? Why are there not mitigating factors wherein an illicit landlord tenant relationship can be terminated in the presence of fraud, safety or quality of life issues? DSS under this Commissioner has no qualms in actively participating in fraud, contractual breaches and conflict of interest. I would also like to know that given that there are all these committees in place with jurisdiction over city agencies but yet some of these city agencies like HPD/DSS/DHS are nonetheless allowed to run amok? Why are Commissioners Banks, Carroll and their staff as NYC employees allowed to abuse their power, engage in fraud and misconduct as well as violate the civil rights of NYC taxpayers with no accountability in place? Why are there committees in the first place if those of you that we contacted directly are all unwilling or incapable of grasping the severity of the issues that we are dealing with and the ramifications on our safety and lives in our very homes as working class, black LGBTQ women albeit at the hands of a NYC agency such as DSS through the illegal placement of DSS’ clients in the home next door? Why aren’t there measures in place to prevent this sort of mismanagement and abuse from occurring, not to mention continuing? Why are we **currently dealing** with Homophobia, threats of physical harm and recurring harassment **in our home,** by DSS clientele yet have had no reprieve as taxpayers, homeowners and New Yorkers under any body of law? Why is it that in over twenty months of ongoing harassment by DSS clients which was made possible first by HPD’s failure to do their jobs, we have had no corrective action taken by either of these two NYC agencies that have created and have likewise perpetuated our issues? The former is the handiwork of HPD’s negligence in monitoring the owner occupancy provisions of our contracts while DSS continues fund our harassment by paying the errant homeowner CityFEPS housing voucher funding to continue the illicit rental arrangement.

How can there be assertions that as LGBTQ we are endowed with “equal rights” when our rights to life, property and safety as homeowners and taxpayers are deemed secondary to this illicit rental arrangement by DSS based on their “pro-nuclear family” stance and their preoccupation with client needs above and beyond lawfulness and community safety particularly in black and brown communities? Moreover it is due to DSS’ twisted stance that their clients’ needs circumvent both law and reason that this fraudulent rental arrangement has persisted for close to two years and with it our ongoing harassment. Furthermore our harassment as LGBTQ homeowners and taxpayers in our very home continues to be flippantly excused by DSS based on their clients’ “need for housing” with no thought that our ‘safe space” which is our home has now metamorphosed into a place of trauma for us with the juxtaposition of a homophobic and physically violent family alongside us where they have continued to target us. The fact that we are made to exist thus traumatized and with threat of physical violence as our continuing reality for over twenty months and counting, with all agencies involved being cognizant of these issues, but preferring to focus on DSS clients’ “need for housing” rather than the threat to our life and safety as a black LGBTQ family, my wife and I continue to be rated as second class citizens and continue to be denied Equal Protection under the law by all NYC agencies involved.

For this reason, I am also requesting that the General Welfare Committee Chair Mr. Levin and Ms. Diaz Women and Gender Equity Committee members investigate my claims against Commissioner Banks as well as DSS, DHS, HRA agencies mishandling of this matter.

Thank you.

I was sexually abused by a prominent NYC obstetrician. I did not report it immediately for a wide variety of complicated reasons ... confusion, fear, shame, embarrassment to name a few.

Confusion because the predator was my doctor. How could this have happened? Did I imagine it?

Fear because I simply did not have the courage to accuse a powerful doctor at a world class hospital of sexual abuse. Who would believe me?

Shame and embarrassment because of the nature of the abuse and the prospect of having to relive it or even talk about it.

It takes courage to come forward, and mustering up that courage can take time—more time than the current statutes of limitations allow.

Please vote in favor of amending the GMVA to open up the Statute of Limitations. By doing so, you empower victims of sexual abuse like me to speak out when we are ready. By voting in favor of amending this law, you remove a significant roadblock in our path to justice.

Diana Jones — sexual assault survivor

I moved to New York City at 24 (in 1999), excited to live in the city where my parents grew up (Brooklyn and the Bronx!). I was referred to Dr. Hadden by my GP and was thrilled to see a GYN that worked for such a respected institution.

I went to see Dr. Hadden for typical gynecological health concerns, as well as my strong family history of breast cancer. He used my fears to convince me that I should see him every 6 months, with that second visit to include an additional pelvic exam. As I look back, I realize that he immediately began grooming me through the familiarity of our regular visits and his apparent concern for my health. Maybe I was too young to question why he didn't suggest additional screenings but I trusted that he was doing the right thing. He had all of the credentials I required, including working for a prestigious hospital. Instead, he was using his position of authority to violate me, to put his hands on and inside my body without medical necessity.

It was not until Columbia closed Dr. Hadden's office and I began to see other doctors that I realized what he was doing was wrong. It's especially alarming knowing that Columbia could have prevented this but chose not to.

We deserve more than we have received - he has traumatized so many - and this law will not only help the survivors of this type of abuse but it will send a clear signal that it will no longer be tolerated in our society. Clearly, by the findings at USC and UCLA, this is not an isolated incident. If we don't show these institutions that it is wrong to protect these men over the women who are there for help, who are we as a society?

Please pass the GMVA to help those that have been abused to hold their tormenters accountable and to send a clear signal that this behavior will no longer be tolerated.

Extending the statute of limitations for victims / survivors of gender-motivated violence and sexual harassment is necessary to enable people to be able to come to terms with the abuse they've sustained and help make it less prevalent in our society. Many of us who have sustained sexual harassment, mistreatment or sexual assault - in or out of the workplace - are faced with many personal obstacles for reporting (i.e., Will they believe me? Will I lose my job? Will my husband still love me? Will my reputation be ruined?) and individual responses to trauma vary greatly from person to person depending on their history of prior abuse or victimization. Often, a "freeze" response to trauma is experienced, temporarily disabling victims/survivors from being able to process what has happened to them. There can be dissociation to trauma and that takes time to work through. Additionally, the legal system is quite a lengthy and complicated process, and for those of us who don't know where to start it can be overwhelming. So time is needed in order to ethically, humanely and empathically ensure the voices of those victimized are heard. I speak as someone who has experienced sexual harassment, molestation, and assault both in and out of the workplace, and had I had more time to process what happened to me, I might have been able to help change things for the better for the next survivor. – Ingrid H

Good morning council members. The amendment to the Gender Motivated Violence Act is crucial to helping New York City survivors of sexual assault. Fifteen years ago my doctor sexually assaulted me numerous times during what should have been standard gynecological care. Being young and inexperienced, I was unaware of the abuse that was happening to me. My doctor took advantage of his position and my vulnerability and, from day one, he abused his position in order to have access to my body. He made me believe he was giving me exemplary care when in reality all he was doing was looking at my unclothed body, making vulgar comments and asking inappropriate sexual questions, performing unnecessary physical exams including ungloved touching and penetrating all parts of my body for his own pleasure. I trusted him and the hospital that employed him and he knew exactly how to make me think I was getting exemplary care when, in fact, I was getting the opposite. And I'm not the only one. He has hundreds of victims. The hospital protected and enabled him to do this. Without the power of his position or the power of the hospital, he could not have done this on such a widespread scale. The hospital could have stopped him but instead turned a blind eye and allowed his abuse to continue woman after woman for decades. While his victims unknowingly continued to see him for gynecological care, the hospital knowingly allowed his abuse to continue.

Once I realized that I was being abused, I was certainly not comfortable speaking to anyone about it. This was a powerful doctor with an even more powerful employer. I spent years keeping this to myself. I couldn't bring myself to share this with the police, attorneys or even my family. It took me over a decade to come to terms with what happened and to finally speak up. Now, I'm told I have waited too long. I should have spoken up earlier however, I was too afraid, ashamed and embarrassed to do so. The legal system which should be there to help me, is instead, saying sorry it's too late. That it's my fault I can't seek justice. He gets to walk away without penalty because he shamed me into silence. My abuser groomed me to make me think what he was doing was healthcare

and he groomed me into silence so he can get away it time and time again.

Survivors shouldn't have to fight to have their day in court. With the confidence of being older and supported, I finally can speak out but now I am time barred from holding my abuser accountable. He has done damage to his victims for the remainder of their lives and these statute of limitations only perpetuates the abuse and allows them to continue. This amendment is a step in the right direction to stopping this abuse and giving survivors their voices back. Please allow justice to be heard and sought by victims who finally find the courage to speak up. All survivors should know the justice system believes them, supports them and prioritizes them. We should all be encouraging survivors to come forward knowing that the law will be on their side. As a city, we should be standing up for survivors and telling abusers they will be held responsible in a court of law. I urge you to vote in favor of amending this law that will finally give survivors their voices back.

Jane Doe

Thank you for the opportunity for all of us to have been actively involved and continue to be a part of making this change. We have to learn from the past to create a better future for generations to come. It's so important for the Committee to vote in favor of amending the law that provides victims and survivors with a path to justice. Being the victim is extremely damaging both physically and emotionally and leads to a lifetime of pain. So how does it make sense that a perpetrator is held accountable for only a short period of time? Time shouldn't make a crime any less punishable and consequences need to exist for criminal actions of any sort at any time. The trauma of being a victim can affect how and when someone comes forward and even when they do it can sometimes take years until their report is taken seriously. Early victims can be diminished, brushed off and even disregarded until a multitude of reports make things impossible to ignore. Criminal actions should have punitive consequences and perpetrators should not be afforded time limits as a determining factor in the path to justice.

Jane Doe #148

Testimony of Julianna Czernyk

Hello and Good Morning to Councilmember Rivera, Councilmember Brooks-Powers, members of the committee, and everyone in the meeting room today. My name is Julianna Czernyk and I am a rape survivor. In the fall of 2020, during my senior year at Fordham University, I attended a college party and while incapacitated and unconscious due to alcohol and recreational substances, I was sexually assaulted by a peer. College rape is a huge problem and leaves victims in limbo. It took me a few months to process and realize what had happened to me, which means I didn't have the concrete evidence that cases typically need to move forward in criminal court. But how was I supposed to know and grasp all that in the hours after recovering from the assault?

Once I had finally processed my trauma enough to come forward, I chose to report the incident to my university and the NYPD 6 months after the incident. Neither pursuit provided a successful outcome. The biggest issue came when I sought to press criminal charges and an ADA told me they wouldn't pursue my case unless they were certain they would win. Because the burden of proof is different in the civil context, I was able to pursue my case civilly. The same is not true for survivors who take even longer to process their sexual assaults than I did. We need to amend this legislation so that victims have the ability to pursue justice through civil litigation, because as my case shows, other avenues often fail to bring abusers to justice. I beg you, committee members, to vote yes and help not just me, but countless people in similar situations to receive the recompense they deserve.

Thank you.

I moved to New York City at 24 (in 1999), excited to live in the city where my parents grew up (Brooklyn and the Bronx!). I was referred to Dr. Hadden by my GP and was thrilled to see a GYN that worked for such a respected institution.

I went to see Dr. Hadden for all manner of health concerns and reproductive issues, including my strong family history of breast cancer. He used my fears to convince me that I needed twice-yearly pelvic exams. (The second was unnecessary) As I look back, I realize that he immediately began grooming me through the familiarity of our regular visits. I was too young to question why he didn't suggest additional screenings and as time went by, I assumed he was doing the right thing. Instead, he was using his position of authority to violate my body.

It was not until Hadden was arrested, and I began to see other doctors, that I fully understood how wrong what he was doing to me was. It's especially alarming knowing that Columbia could have prevented this but chose not to.

We deserve more than we have received - he has traumatized so many - and this law will not only help the survivors of this type of abuse but it will send a clear signal that it will no longer be tolerated in our society.

Clearly, by the findings at USC, MSU and UCLA, this is not an isolated incident. If we don't show institutions that it is wrong to protect these male predators, over the women who are there for help, what are we as a society?

Please pass the GMVA, to help those that have been abused, and to hold their tormenters accountable. Help us send a clear signal that such acts of sexual exploitation and abuse will no longer be tolerated.

SD, survivor of doctor sexual abuse

- 2-Women sexually assaulted within 45 minutes in separate attacks in Manhattan
- Bronx Man Indicted for Rape of a Stranger on A Train
- Prison Avoided for Man Who Pleaded Guilty for Rape in NY
- Neurologist Arrested on Federal Charges in Sex Assault Probe
- Man, 44 Admits to Statutory Rape of Girl Under Age 15
- NYC Priest Removed from Duties After Credible Sex Abuse Allegations
- Pain Doctor Accused of Sexually Assaulting Patients Faces New Federal Charges
- Sadistic NYC Doctor Sexually Abused Anorexic Girl
- 175 Women Alleged Sexual Abuse Against a Columbia Gynecologist. Five Years After His Conviction, They're Still Fighting to Be Heard.

These are just a few headlines from 2021. Each headline represents a real person, someone or many people who have been harmed.

More and more we are becoming a society of broken people. People who have been harmed by others and people who harm others.

We are living in an epidemic of unabated sexual abuses and assaults. And we can no longer look the other way or push it aside for another day.

The Amendment to the GMVA is vital. It takes a clear stand that we will no longer tolerate and accept harmful, abusive, behaviors and actions against others. It respects victims and survivors, in giving them an opportunity and outlet to express their pain and have their truth heard.

This Amendment to the GMVA is an integral positive step in changing the growing trend of bold sexual assaults and abuses.

Every day someone else is harmed and hurting. We must take this step to Amend the GMVA and change this continued pattern.

And we must do it, Now.

— Survivor of doctor sexual abuse

Statement by Julie Johanna, former New Yorker, Sexual Assault Survivor

Thank you for the opportunity to speak in support of creating the two-year “lookback window” for the GENDER MOTIVATED VIOLENCE PROTECTION ACT to allow survivors of gender-motivated violence an opportunity to seek justice in civil court.

One does not have to be a combat soldier or visit a refugee camp to encounter trauma. Trauma happens to us, our friends, our families, our neighbors.

Research by the Centers for Disease Control and Prevention has shown that one in five Americans was sexually molested as a child;

One in four was beaten by a parent to the point of a mark being left on their body;

And one in three couples engages in physical violence.

Because wounded and unstable people go out into our communities and our institutions, the cycle of violence, trauma and abuse continues in these places.

What happened to me?

I was sexually assaulted by Dr. Robert Hadden at Columbia University.

For five years.

I was both a graduate student and a full-time employee at the University.

What happened to you?

What happened to someone you love?

To others you know?

You might have some memories. Or painful stories.

Regardless of the types of traumas all of us experience in life – or where we experience them -- we know that one thing that all of us who are survivors have in common is that it takes tremendous energy to keep functioning while carrying the memory of terror, of shame, and of utter weakness and vulnerability.

This is why – *and science tells us this* – so many people repress the violence and abuse that they experience.

Transformation to heal and push forward requires brutal honesty with oneself and with others to face painful truths.

While it might be uncomfortable, what isn't faced generally can't be resolved.

So, people repress abuse. Until they are ready to face it.

We have breakthroughs. We cry. Scream. Yell.

Why did this happen to me. We try to understand.

We fall apart and try to put ourselves together again. We push forward.

But this process takes longer for some than for others, for so many reasons.

Some people have better coping mechanisms. Or social support. Or financial resources.

As City Councilwoman Carlina Rivera powerfully stated: "There is no timeline on processing trauma".

That's why amending the GMVA is so important, to allow for civil actions to be filed that formerly may have taken place beyond the statute of limitations.

As leaders, legislators, and members of the greater NYC community:

It is not our business to determine how quickly and effectively people should be processing the trauma and violence that happened to them.

It's not our business to compare their ability with others.

It IS our business, and our duty, to provide safe environments in which people can thrive.

It IS our business to provide the *conditions* – including in our legal system – under which people may pursue action and justice, when they are willing and able, and when have the courage and conviction to pursue action.

"There is no timeline on processing trauma".

Not passing this bill means that we would be denying what it means to be fundamentally human – and denying the science – that it takes some of us longer than others to not only come forward to tell their story, but to seek justice.

Please pass this bill. Thank you.