



**Testimony Presented at the New York City Council Fiscal Year 2022 Preliminary Budget
Hearing
Committee on Health
Committee on Mental Health, Disabilities, and Addiction**

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Thank you for this opportunity to provide testimony. My name is Alice Bufkin and I am the Director of Policy for Child and Adolescent Health at Citizens' Committee for Children of New York, Inc. CCC is a 75-year-old independent, multi-issue child advocacy organization dedicated to ensuring that every New York child is healthy, housed, educated, and safe. CCC does not accept or receive public resources, provide direct services, or represent a sector or workforce. We document the facts, engage and mobilize New Yorkers, and advocate for solutions.

I would like to thank Levine, Chair Louis, and all the members of the Committee on Health and the Committee Mental Health, Disabilities and Addiction for holding today's hearing on the Preliminary Budget for Fiscal Year 2022. Children and families have experienced a year of hardship that will continue to impact families across generations. CCC has joined our city partners in advocating at the State and Federal level for widespread investments to enable families and communities to recover from the COVID-19 pandemic. Particularly with the additional funding New York City will receive from the American Recovery Act, we believe it is imperative that the City reject austerity measures and instead invest in urgent needs today so children do not suffer the long-term consequences of budget cuts.

There are critical steps the city must take to reverse harmful cuts in previous years, as well as invest in the health and behavioral health services that will be so essential for recovery. We look forward to working with leaders in the City Council and the Administration to identify and address urgent needs of New York's children and families.

Supporting Children's Healthy Development

As New York City leaders and advocates continue to fight back against state cuts to the city's public health infrastructure, we urge the City Council and the Administration to prioritize the healthcare needs of children and families. Without adequate investments now, we will see long-term repercussions for the health and wellbeing of children as they grow into adults.

- 1. Fully restore Fiscal Year 2021 cuts to City Council health and human service initiatives. These cuts have impaired the ability of community-based organizations to support communities through the COVID-19 pandemic.**

In the Fiscal Year 2021 Adopted Budget, City Council initiatives saw an average 15-20% reduction in funding. These cuts affected community-based organizations across a broad spectrum of services, ranging from maternal and child health, to reproductive and sexual health,

to mental health services, to nutritional assistance, to services designed to connect New Yorkers to the healthcare safety net.

These cuts hit CBOs at a time when community needs were escalating in the face of the pandemic. Many of those providing services through these initiatives belonged to the very communities most impacted by COVID-19, multiplying the harmful effects of austerity during a time when investments in health were needed more than ever.

As New York begins to envision recovery, we urge the Administration and the City Council to recognize that recovery will not be possible without restoring and enhancing the wide spectrum of health and human service that help support struggling families, keep children healthy, and connect communities to care.

We therefore urge that City Council health and human service initiatives at a minimum be restored to their funding levels in Fiscal Year 2020.

2. Develop a comprehensive plan to ameliorate the secondary health impacts of COVID-19 on young children.

National data shows a precipitous decline in preventive and primary care rates since a state of emergency was declared, including a 22 percent decline in vaccinations, a 44 percent decline in physical, cognitive, and developmental child screening services, and a 69 percent decline in dental services.ⁱ

While these rates are beginning to improve, much of the damage has been done, as many children have gone months without the preventive and primary care services that are so important for their development. Early Intervention stands as a stark example of this loss. A recent report from Advocates for Children found that during the 4-week period beginning March 22, there was an 82% decline in referrals from earlier in the year. From mid-April through mid-May, there was 67% decrease in evaluations, and the total number of infants and toddlers receiving EI services between July and September 2020 was 15% lower than the same time period in 2019—a difference of nearly 2,900 children.ⁱⁱ

These rates underscore the urgent need to make additional investments to identify which children have been left behind and develop a campaign to reconnect children and their families to essential preventive and primary services.

We urge city leaders to commit additional investments in these efforts to enable both the Department of Health and Mental Hygiene and community-based organizations to connect families to care, including strategies such as:

- Enhancing funding for community health workers and health navigators.
- Enhancing funding, support, and coordination among public health departments, providers, and community-based organizations to help identify unvaccinated children and connect them to services. Promote streamlined vaccination strategies that have been effective in other states, including pre-visit virtual screenings, mobile vaccinations, drive-through clinics, and

curbside immunization clinics, and clearly stated safety protocols to ensure parents feel safe when their children are vaccinated.

- Identifying and implementing strategies to improve children’s access to oral health services, including by promoting mobile dental service models and ramping up school-based dental services once students are able to return safely to school.
- Enhancing funding for child find efforts to identify children who may have missed developmentally appropriate screenings. Additionally, the City should invest in efforts such as the United for Brownsville Early Intervention Ambassador program, designed to combat racial inequities in EI referral and evaluation rates.

3. Protect funding for Article VI public health services.

In State Fiscal Year 2020, the state reduced its reimbursement for NYC’s Article VI General Public Health Works Program from 36% to 20%. This year’s Executive Budget proposes an additional 10% reduction. CCC has joined many of our partners – including those within the City – to adamantly oppose these discriminatory cuts, which have cut tens of thousands of dollars from NYC’s public health budget. These cuts are particularly unconscionable in the middle of a public health crisis that has disproportionately impacted New York City.

The Article VI General Public Health Works program supports a broad range of services that are heavily accessed and relied on in communities that have been disproportionately impacted by the pandemic - including communities of color, Indigenous New Yorkers, and immigrant households, as well as people with disabilities and those experiencing chronic illness impacting their physical and mental well-being. Cuts to Article VI impact programs providing immunizations; tuberculosis outreach, education, and testing; and sexual reproductive health. They also impact community-based preventive services addressing maternal and child and maternal health; mental health; substance use; and chronic diseases. These cuts put the health and well-being of children and families at risk, at a time when our city and state can least afford to slash public health.

WWe hope and continue to advocate for the State budget to restore its reimbursement to 36%. However, failing this, we urge the City Council and the Administration to backfill these funding cuts for both DOHMH and CBOs, as it did in CFY 2020.

Supporting Children’s Behavioral Health Needs

New York is facing a children’s behavioral health crisis, as children have faced a year of anxiety, isolation, loss of loved ones, disconnection from school, and economic insecurity. The pandemic has led to declines in critical mental health screenings and access to services,ⁱⁱⁱ even as rates of anxiety, depression, substance use, and suicidal ideation have risen.^{iv} Children are facing unprecedented emotional distress, yet are unable to access adequate primary and preventive services, resulting in stark increases^v of psychiatric distress, hospitalizations, and families waitlisted for services.^{vi} This has created a perfect storm that is impacting all children, and disproportionately impacting low-income communities and families of color.

CCC is appreciative of the inclusion of \$35 million for Social Emotional Learning in the Preliminary Budget. We believe this takes the city in the right direction and is an important step towards addressing the enormous needs that existed prior to COVID and have grown because of the pandemic. However, we join other partners in calling on the city to invest even further in behavioral health supports for children, given the escalating challenges children and families are facing. Investments are needed in schools (as discussed below), but also in early care and education; in clinical care; and in community-based services.

Moreover, we remain concerned that the details of this \$35 million investment have not been shared with community members. The city has announced a number of initiatives in recent months, including a partnership with Health+Hospitals and a crisis response pilot. While we laud any effort to enhance behavioral supports, it remains unclear how these initiatives are related to each other and to existing programs; if and how they are funded; how they will be operationalized; and what level of stakeholder engagement was involved in their development and eventual rollout.

We ask that the Administration provide a comprehensive and accessible mapping of current youth-focused behavioral health efforts to enable a more systematic approach to addressing service gaps.

In addition, we urge city leaders to take the following steps to support children's behavioral health in the city:

- 1. Restore cuts to Community Schools, SONYC, and other education services that provide essential wraparound and behavioral supports for students.**

Community schools, which serve 135,000 students and families citywide, suffered a \$3 million cut in last year's Adopted Budget. NYC community schools offer wrap-around supports for students and families, including upstream prevention services like food pantries and benefit enrollment help, in addition to direct mental health services in the form of counselors, social workers and school-based mental health clinics. These supports have been shown to have positive effects on outcomes like attendance, grade progression, math achievement and reductions in disciplinary incidents.

If the city wants to truly prioritize student achievement and recovery in the next school year, community schools are the type of programs they should be investing in, not cutting. **We urge city leaders to reverse Fiscal Year 2021 cuts to Community Schools.**

Additionally, the FY 22 Preliminary Budget proposes to cut School's Out New York (SONYC) summer camp for as many as 24,000 low-income New York City middle schoolers. At a time when children across New York City have lost so much -- social connections, their in-person school community and even their loved ones -- this budget would strip away vital summer programming and social support systems for children when they need it most. Children have experienced profound trauma as a result of the pandemic, even as access to behavioral health supports has plummeted. Programs like SONYC and community schools provide children with a vital connection to their peers and a wide range of youth and community services which can help

prevent children's behavioral health needs from escalating. The Mayor's proposal to cut those funds at a moment like this will be devastating for thousands of families hit hardest by the pandemic.

We strongly urge the Mayor and City leaders to restore and expand its investment in SONYC and community schools in the Executive Budget in order to ensure that New York City's children have a safe, engaged summer and school year, regardless of income.

2. Address the trauma and loss of the pandemic by enhancing school-based behavioral health supports for children.

When children return to school, the preparedness of the education and community-based behavioral health system will play a critical role in identifying and providing mental health support and treatment to students. An integrated system of intensive supports and services will be particularly important for students who experienced significant mental health needs even before this crisis.

What is *not* needed are punitive responses to trauma that engage the police, emergency services, and school safety agents when reacting to students in emotional distress. Too often, schools respond to a child's need for emotional or behavioral support with suspension, expulsion, or a call to the NYPD or Emergency Medical Services. In fact, the NYPD reported intervening in more than 3,500 incidents involving students in emotional distress in the 2018-2019 school year, with a disproportionate number of the incidents involving Black and Latinx students.

Rather than continue investing in police engagement in schools, **we join other city partners in calling on the city transfer \$450 million from the NYPD budget out of school policing and towards social and emotional supports for students.** Below are critical areas where additional investments are also needed:

- **Additional funding for direct social/emotional support services in schools.** Only a fraction of NYC schools have a School Based Mental Health Clinic on site, and 290,000 students attend a school without a full-time social worker. We greatly appreciate investments in last year's budget to add more social workers to schools. However, a single social worker is often insufficient to address the complex needs of a school's population. New York City must make significant additional investments in training and supervisory supports for social workers, as well as make investments in the full continuum of direct social/emotional supports for students, including behavior specialists, trauma-informed de-escalation staff, school psychologists, conflict resolution specialists, and school climate and restorative justice staff.
- **Investment in a Mental Health Support Continuum to support the significant behavioral health needs of students in designated neighborhoods in high-need schools.** CCC joins our city partners in urging the administration to invest in targeted intensive mental health supports for students such as a Mental Health Support Continuum. This proposal is based on the Mayor's Leadership Team on School Climate and Discipline's 2016 Recommendations. These recommendations included strategies to address in-school

environment and student behavior to promote a safe learning setting for everyone, one that ensures students who misbehave or make a mistake are provided the supports to stay engaged in school for their academic and social well-being.

The Continuum would implement strategies including clinician response teams; student assessments to determine appropriate level of care needed; direct, ongoing mental health supports; school partnerships with hospital-based mental health clinics; school-based mental health clinicians; whole-school trainings in Collaborative Problem Solving; and call-in centers to advise school staff about students in crisis in two designated neighborhoods with high-need schools.

- **Expansion of whole-school restorative practices citywide.** Restorative practices help build healthy school communities, promoting inclusiveness, relationship-building, and problem-solving to help address student behavior and reduce harmful disciplinary practices. The successes provided this program should now be expanded citywide.

3. Restore and enhance funding for community-based behavioral health supports

For years, programs in the City Council’s Mental Health Initiatives have used non-traditional, community-based settings to help identify children and families in need and offer developmentally appropriate services and support. These trusted community services are more essential than ever in addressing the trauma children and families are experiencing in the face of COVID-19. Unfortunately, many of these programs saw cuts in the FY21 Adopted Budget. According to a survey by the Coalition for Behavioral Health, because of cuts to Mental Health Initiatives, 40% of providers report serving fewer people; 20% had to lay off staff, and 30% had to cut staff hours.

Given the heightened needs facing children and families now, we urge the City Council to restore and enhance funding for key programs:

- 1) **The Mental Health Services for Children under Five Initiative (CU5)** allows organizations to work with children to develop psychosocial and educational skills, as well as cope with trauma resulting from witnessing or experiencing domestic violence, sexual abuse, or physical or mental abuse. CU5 has provided screening and psychotherapy to thousands of families, as well as mental health consultation services to numerous pediatricians, preschool teachers, and child welfare workers. **We urge city leaders to fund this program at \$1.2 million.**
- 2) **Opioid Prevention and Treatment** Supports neighborhood-based prevention & treatment efforts around opioid abuse, including overdose reversal drugs. Overdose deaths increased 55% from 2015 to 2019. Early 2020 data shows the pandemic made this substantially worse: deaths rose an additional 28% in Q1 of 2020, compared to Q1 of 2019. **We urge city leaders to fund this program at \$4,375,000**
- 3) **Mental Health Services for Vulnerable Populations** supports community-based behavioral health programs, including medication for individuals in transitional housing and mental health services for families with child welfare involvement. **We urge city leaders to fund this program at \$3,477,000**

- 4) **Developmental, Psychological and Behavioral Health** helps individuals with behavioral health needs and developmental disabilities, supporting harm reduction, clubhouses and more. **We urge city leaders to fund this program at \$2,255,493.**
- 5) **The Court-Involved Youth Initiative** helps identify youth involved in the justice system who require mental health services and provides family counseling and respite services to families of court-involved youth. **We urge city leaders to fund this program at \$3,400,000.**
- 6) **LGBTQ Youth Mental Health** supports comprehensive mental health services for vulnerable LGBTQ youth, focusing particularly on youth of color, youth in immigrant families, homeless youth, and youth who are court-involved. **We urge city leaders to fund this program at \$1,200,000.**
- 7) **Autism Awareness** supports wraparound services for children with autism spectrum disorders (ASD) in after-school and summer programs and during school closings. **We urge city leaders to fund this program at \$3,246,846.**

Combatting Hunger in the Face of COVID-19

Even prior to COVID-19, 1 in 5 children in NYC were experiencing food insecurity. COVID-19 has had a devastating impact on hunger in the city, leading to a 39% increase in food insecure children in 2020 compared to 2018.^{vii} CCC echoes the priorities of Lunch 4 Learning and the New York COVID-19 Food Coalition in urging the City to take immediate steps to combat food insecurity and support families struggling with hunger. We urge city leaders to take the following actions:

1. Address emergency feeding and benefits access.

- **Maintain and baseline funding for the Emergency Food Assistance Program (EFAP) by at \$20.2 million, and allow additional flexibilities with program operation.** To meet increased demand, EFAP funding should be allowed to use program funds to cover their increased administrative, rental and operational costs that have emerged since the start of the pandemic. In addition, we ask that the RFP for EFAP be adjusted to allow more opportunity and incentive for the purchase of fresh food and that pantries have choice in what they buy as they do with the New York State Hunger Prevention Nutrition Assistance Program and New York City’s Pandemic-Food Reserve Emergency Distribution Program.
- **Allocate additional funds within Human Resource Administration towards nutrition benefit program enrollment and outreach.** Food insecurity has nearly doubled in NYC since the start of the pandemic. To meet this need, we look to HRA to allocate additional funds within their budget towards promoting and enrolling New Yorkers in social safety net programs, re-opening field offices closed during the pandemic, adding additional One Stop Shop locations, expanding emergency food distribution efforts, adding additional staff to the hotline to enroll people in programs as well as additional money for promoting Health Bucks and Get the Good Stuff Program at DOHMH.
- **Support additional funding for GetFoodNYC and hold a hearing on details and impact of the Get Food Program and Emergency Food Relief in NYC.** We support

the Mayor's Preliminary Budget request for an additional \$52 million for the Get Food NYC program in FY22. However, little to no information has been made available to advocates or City Council on the details and impacts of the Get Food program to date. We therefore join partners in calling on City Council to hold an oversight hearing on the program the Mayor's Office of Food Policy to publish a report on GetFoodNYC. We also urge the City Council to include review of the \$25 million investment in emergency food relief in this hearing to ensure this funding is distributed equitably, that a wider range of organizations can receive this funding, and that data on the outcomes from this program are collected and reported.

2. Address hunger in schools.

- **Invest \$3.5 million for additional school food managers in The Office of Food and Nutrition Services (OFNS).** OFNS has been working tirelessly to make sure that students have the food they so desperately need during COVID-19 school closures, and to ensure that these meals are high quality and culturally competent. In order to do so, an additional 60 school food managers should be employed to plan and review appealing menus, educate students on the importance of eating healthfully, train new personnel, and increase participation in the school meals program. Funding for these additional 60 managers would enable OFNS to better achieve these goals, helping to ensure that children are well-fed and ready to learn. To support these managers a culinary institute should be reinstated.
- **Commit an additional \$30 million per year in the DOE's 5-Year Capital Plan to Expand the Food Court Style ("enhanced") cafeterias.** OFNS has rolled out an innovative cafeteria redesign in 34 middle and high school buildings that serve 60,000 students across the city. The Chancellor has committed \$25 million for approximately 50 more schools. We join partners at Lunch 4 Learning in calling for an additional \$150 million towards a planned phase-in of 300 more cafeterias over 5 years. The food court style serving line includes more daily menu options, speeds up the serving line, and provides a presentation that dramatically increases the appeal of the food.
- **Expand menu options, including access to halal and kosher meals.** Families would save an average of \$900 per year per student if the school meals met their needs and they did not have to provide lunch from home every day.
- **Ensure ongoing, broad reaching and innovative communication about school food.** Universal Free School Lunch reverses decades of the discriminatory policy that separated children by income in the cafeteria. OFNS must invest in a comprehensive and creative rebranding and sustained marketing campaign. Annual funds must be dedicated to promote UFL and other initiatives such as New York Thursdays, which aims to support local NYS growers.

3. Support community-based organizations feeding New Yorkers.

- **Restore cuts and enhance funding for City Council discretionary initiatives that combat hunger.** These initiatives include the NYC Composting Program; Access to Healthy Food and Nutritional Education; Worker Cooperative and Business Development Initiative at SBS; Food Access and Benefits Initiative; the FoodEd Resource Hub; and food pantries.
- **Allocate \$1 million to establish a new Food Justice Grant Program housed within the Mayor’s Office of Food Policy that supports community-led projects to grow food justice.** The purpose of the Initiative is to improve healthy food access by investing in community-based projects designed and led by the people most impacted by race, social, health, and environmental injustices.

Thank you for your time and consideration.

ⁱ Centers for Medicare and Medicaid Services. “Service use among Medicaid and CHIP beneficiaries age 18 and under during COVID-19.” September 2020.

ⁱⁱ Advocates for Children and Citizens’ Committee for Children. “Early Inequities: How Underfunding Early Intervention Leaves Low-Income Children of Color Behind.” December 2020.

ⁱⁱⁱ Centers for Medicare and Medicaid Services. “Service use among Medicaid and CHIP beneficiaries age 18 and under during COVID-19.” September 2020.

^{iv} Czeisler, Mark et al. “Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic – United States, June 24-30, 2020.” CDC Morbidity and Mortality Weekly Report. August 14, 2020.

<https://www.cdc.gov/mmwr/volumes/69/wr/mm6932a1.htm>

^v Leeb, Rebecca et al. “Mental health-related emergency department visits among children aged <18 years during the COVID-19 pandemic – United States, January 1-October 17, 2020.” Centers for Disease Control and Prevention. November 2020. <https://www.cdc.gov/mmwr/volumes/69/wr/mm6945a3.htm>

^{vi} Kramer, Abigail. “In COVID-Era New York, Suicidal Kids Spend Days Waiting for Hospital Beds.” The New School Center for New York City Affairs. January 2021. <http://www.centernyc.org/reports-briefs/2021/1/25/in-covid-era-new-york-suicidal-kids-spend-days-waiting-for-hospital-beds>

^{vii} Gartland, Michael. “One out of three children in New York City is food insecure, non-profit says.” MSN News. March 13, 2021. <https://www.msn.com/en-us/news/us/one-out-of-three-children-in-nyc-are-food-insecure-non-profit-says/ar-BB1eypzt?li=BBnbcA1>