Testimony of University Settlement

Before the New York City Council

FY 2022 Joint Preliminary Budget Hearing: Committee on Education

Council Member Rita Joseph, Chair of the Committee on Education

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Presented by Barbara DiGangi, Director of Families Thriving at University Settlement

Thank you for convening this hearing. I’m Barbara DiGangi, founding Director of Families Thriving at University Settlement. I’m writing to ask the city to strengthen the funding and support of mental health partnerships between community-based organizations (CBOs) and the Department of Education (DOE).

For 135 years, University Settlement has partnered with New Yorkers to build community strength and promoted resilience through challenging times in history. We’ve collaborated with our neighbors to pioneer highly effective programs that fight poverty and systemic inequality across Manhattan and Brooklyn. University Settlement infuses a commitment to civic engagement, equity and communal action into each of our programs which include early childhood education, mental health and wellness, youth development, healthy aging, and the arts.

Families Thriving is a home and community-based, wraparound family support program offering a wide range of mental health and social emotional supports to individuals, families, and communities. Our program aims to make quality support and meaningful impact accessible, flexible, and community driven. From classrooms and school offices to family living rooms and Zoom meetings, we offer individual and family therapy, skill-building, crisis avoidance, psychoeducation and Triple P, an evidence-based model for positive parenting. To create community-level change, we partner with after-school programs, community centers, and schools to provide consultation and thought partnership, family workshops and parent support groups, crisis management and debriefing, professional development trainings, and Connection Circles, the community-care model we developed in 2020 which offers a lightly facilitated support circle.

A recent survey administered by Citizens’ Committee for Children found that 35% of youth want or need mental health services from a professional yet only 42% of these youth reported receiving these services.[[1]](#footnote-1) More than twice as many black teens did not have access to therapy when they needed it in comparison to white teens.[[2]](#footnote-2) No youth in our city should feel unheard, alone or underserved and yet so many do.

In our work and partnership with District 1, we’ve seen that a new vision of school-based mental health can be possible if given the opportunity to be scaled. Our multi-tiered, healing-centered approach supports the school community as a whole, centers antiracist practices, and fills gaps and cracks in our education system. To promote success for individual students, it’s critical that we’re not only looking at the student, but we’re also looking at the environment -- such as school climate and culture and the impact of systemic inequity -- to ask, what are the ideal *conditions* for success?How can we take a lens beyond pathology and clinical work to provide *community*-care and empowerment? These are the approaches we take in District 1, and it is our hope that more districts can follow.

When a student is having behavioral challenges in the classroom, Families Thriving is at the table during Planning and Placement Team (PPT) meetings to offer consultation, connect them to our services, and then potentially provide 1:1 support in the classroom or at home – often interrupting a pathway to Special Education or further behavioral challenges.

When social workers and guidance counselors have full caseloads of mandated students and cannot take on facilitation of restorative circles, at-risk counseling and crisis interventions, implementing DESSA follow-up plans, and more – we step in.

When a family is experiencing the loss of a loved one, we provide family therapy sessions at home since satellite mental health clinics often cannot. Through attendance team meetings, we help prevent an ACS call or further academic loss by doing warm outreach, light touches or offering services on our mental health continuum to get students in the classroom.

When school staff are feeling overwhelmed or challenged, we provide psychoeducation, collaboration and Connection Circles to counter against burnout, implicit bias and compassion fatigue. Through family workshops and groups, we provide family engagement to destigmatize mental health, decrease feelings of isolation, and encourage connection to support.

According to Advocates for Children, they have received “about 25% more calls from families requesting assistance with school discipline matters” compared to the two years prior.[[3]](#footnote-3) Especially amidst Covid-19, bridging home and school and deepening connections between the two can have a powerful impact. Who is better positioned to be a partner for strengthening relationships between home and school than CBOs? An investment into a CBO taps into a full network of resources, community trust and often decades of community-driven expertise. Funding a CBO partnership instead of one DOE social worker seems like an easy decision that can go a long way.

We know that behaviors showing up in the classroom are often a result of trauma, complex family stressors and the impact of structural racism. If a school doesn’t have the capacity to work more deeply with a student’s family to address a child’s well-being and challenges interfering with learning, an embedded program like Families Thriving can do home visits, build feedback loops, and work on strengthening the relationship between home and school. We’ve seen this result in greater understanding, empathy, academic performance, student’s well-being and attendance.

Families Thriving leverages New York State Medicaid’s Children and Family Treatment and Support Services (CFTSS) which has designated providers across all 5 boroughs who can offer services to youth ages 0-21 with Medicaid. However, programs like Families Thriving cannot adequately operate, innovate, support their staff and reach families on just Medicaid dollars alone.

With supplemental funding to support more seamless CBO and DOE partnership, organizations providing CFTSS can offer **all** families **and** school staff a much wider, sustainable and flexible array of services than the traditional satellite clinic and school-based mental health supports. At this time, not only has there been limited funding opportunities for CBOs, the DOE Vendor process for obtaining contracts with schools for costs over $25K is an onerous one that often takes over a year to approve. This creates a significant barrier for schools and CBOs to partner in the way their school communities need.

To make sure all NYC families and children, particularly those in our communities of color and immigrant communities, can access the mental health care they need, we must ensure best practices and sustainability for comprehensive mental health continuums in schools. This means strengthening and expanding funding allocated for community-based organizations (CBOs) to partner with schools.

Thank you for the opportunity to present testimony. If you have further questions, I can be reached at bdigangi@universitysettlement.org.

1. [NYC Youth Agenda](https://www.canva.com/design/DAE4c8phyT0/13skE2EipkwigCgflRUMmg/view?utm_content=DAE4c8phyT0&utm_campaign=designshare&utm_medium=link&utm_source=publishpresent#9). Citizens’ Committee for Children. 2021. [↑](#footnote-ref-1)
2. [Youth Ask Youth Census Report](https://docs.google.com/document/d/15X1VP_5jihz4Wew35kr53Qb7pZbnYsfm7OwDZ0MdTsc/edit). Intergenerational Change Initiative. 2021. [↑](#footnote-ref-2)
3. [City Education Budget Priorities for FY 2023](https://www.advocatesforchildren.org/sites/default/files/on_page/agenda_final_fy23_budget.pdf?pt=1). Advocates for Children. Winter 2022. [↑](#footnote-ref-3)