

² Care, Community, Action: A Mental Health Plan for NYC. March 2023.

and its possibilities. I'd also like to elevate what could make this plan even stronger.

The plan mentions expanding school-based clinics, but fails to mention Medicaid's flexible, preventative Children and Family Treatment and Support Services (CFTSS).³ To overlook this program would be a tragic, missed opportunity. CFTSS provides multi-tiered, wraparound mental health services to youth and families where they are. Many community-based organizations (CBOs) across the city are already designated and providing these services. While the satellite clinic model in schools certainly needs revamping and expansion, CFTSS is a promising model we've seen success with; we've recently established an innovative, district-wide partnership with school District 1 thanks to supplemental funding through Trinity Church Wall Street.⁴ Moreover, we've seen an increase in referrals for family therapy at home, classroom push-ins, and peer services which are components that clinics haven't historically offered. Leveraging CFTSS could be a game-changer for amplifying the current conditions of services offered by partnering CBOs providing CFTSS with city agencies such as the DOE and DYCD.

Secondly, every day I grow more concerned about our workforce crisis and the conditions our workforce operates within. For example, we've strategically embedded mental health staff within after-school programs. Recently, a participant turned to one of our staff in the minutes after a suicide attempt because she knew our staff could help. Our staff took this teenager to the ER where she wasn't admitted. It was only after her second ER visit for suicidality, one week later, that she was admitted. While I'm thankful we're onsite in community locations, there are many preventative mental health programs like ours that are being forced to operate like crisis or case management programs due to the acute needs of our communities. This is not sustainable.

I am concerned about the increase of youth in crisis who don't have that go-to person. I worry about wait lists and asylum-seekers who can't find a Spanish speaking social worker. And I'm concerned about constantly feeling like I must choose between sacrificing our bottom line or perpetuating cycles of burnout.

To sustain our mental health workforce the city must:

- Provide an 8.5% Cost of Living Adjustment (COLA) and at a minimum fund a 6.5% COLA. In 2021, the National Association of Social Workers Code of Ethics was revised to include the statement that "social workers should take measures to care for themselves professionally and personally."⁵ How can social workers engage in the self-care required to be effective if they are struggling to meet their basic needs? It's critical that the city fosters and supports an environment of care for our essential workers.
- Increase flexible funding and rates for services.

³ [Children and Family Treatment and Support Services](#)

⁴ [NYC Community School District 1 to offer mental health services to all district families this fall](#). NYNMedia. September 7th, 2022.

⁵ [Highlighted Revisions to the Code of Ethics](#). NASW. 2021.

- Find ways to collaborate more efficiently across agencies and organizations in acknowledgment of how we're all inundated. For example, we're often receiving referrals for students who are already seeing a DOE counselor or social worker. These DOE staff are also overwhelmed. Could training or reform in how DOE mental health staff operate enable us all to work together much more efficiently and effectively?
- And lastly, train community members as peers and have them augment our workforce. I join calls from CCIT-NYC⁶ to have peers lead the response to mental health crisis calls so that they're handled effectively, without police.⁷ According to a recent data brief, B-HEARD teams only responded "to approximately 68% of all calls routed to them."⁸ A peer-led approach will reduce harm, build trust, create more jobs for our communities, disrupt ongoing cycles of crises, and strengthen representation.

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

⁶ [Correct Crisis Intervention Today \(CCIT\) NYC](#).

⁷ [Saving Lives, Reducing Trauma: Removing Police from New York City's Mental Health Crisis Response](#). NYLPI. 2021.

⁸ [B-HEARD: Transforming NYC's Response to Mental Health Emergencies](#)