Testimony

of

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on

Int. 1225

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Good morning, Chair Cohen and members of the Committee. I am Dr. Gary Belkin, Executive Deputy Commissioner of the Division of Mental Hygiene for the New York City Department of Health and Mental Hygiene. Thank you for the opportunity to testify today on the City’s work to provide mental health services for Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) New Yorkers. I would like to thank you, Chair Cohen, for the support you and your fellow council members have shown to changing the culture of mental health in this city. I would like to also thank Council Member Torres, Council Member Johnson, Council Member Dromm, and the City Council LGBTQ Caucus for their leadership in championing civil rights in New York City and fighting to ensure that services are provided for all LGBTQ New Yorkers.

The LGBTQ population in New York City faces very real health disparities, particularly related to mental illness and substance use. LGBTQ high schoolers in New York City experience double the prevalence of feeling sad or hopeless in comparison to heterosexual youth (50% vs. 25%). A higher percentage of these LGBTQ youth, almost threefold, seriously considered attempting suicide (31% vs. 11%) or have attempted suicide (20% vs. 6%). LGBTQ youth are twice as likely to misuse both prescription and illicit drugs compared with heterosexual youth (16% vs. 8%).

From national data, we know that the mental health outcomes are far worse for transgender and gender non-conforming persons. In the 2015 U.S. Trans Survey, 39% of respondents reported currently experiencing serious psychological distress, compared to 5% of the U.S. population. Additionally, 40% of the nearly 28,000 respondents had attempted suicide, compared to 4.6% in the U.S. population.

It is a priority for this Administration to expand healthcare and social services to traditionally underserved communities, including LGBTQ New Yorkers. I would like to highlight some of our recent work in this area.

The Administration has created and expanded offices coordinating LGBTQ programming and input across City government. As part of this commitment, the City has formed LGBTQ offices within a number of city agencies, including the Department of Education, the Department of Health and Mental Hygiene, the Human Resources Administration (HRA), New York City Health + Hospitals, the Department of Homeless Services, and the Administration for Child Services (ACS). These units help coordinate LGBTQ related programming, policy, and outreach within and between City agencies. This is a marked expansion from 2014, when only one such position existed in City government.

Through a partnership with Councilmember Torres, the Department of Homeless Services recently announced the creation of a new shelter which will prioritize the needs of LGBTQ young people. This new shelter will be run by Project Renewal and is expected to open in the coming weeks, with screening for current residents underway. New shelter staff will have training on LGBTQ issues, and provide supportive services tailored to the needs of LGBTQ youth, including mental health, substance use programs and benefits access.

For the first time, the City has added funds dedicated to enhancing mental health services at Runaway and Homeless Youth Drop-In Centers, Crisis Shelters, and Transitional Independent
Living Programs. In Fiscal Year 2015, residential programs served more than 2,200 youth under age 21, nearly 40% of whom identify as LGBTQ. These new services allow youth to receive psychiatric and psychosocial evaluations, help them apply for supportive housing, and provide access to life skill supports.

In 2015, HRA began an agency-wide initiative to train all of their 14,000 staff on LGBTQ and intersex basics. The training provides thorough background on many issues affecting LGBTQ and intersex people, including the general need for LGBTQ-affirming mental health providers, as well as the unique mental health needs associated with anti-LGBTQ violence, discrimination, and family rejection. In addition, as a result of the March 2015 settlement in a case called Lovely H. v. Eggleston, HRA has developed and piloted a new optional mental health screening to be offered to all new cash assistance clients. Paired with cognitive/learning disabilities screenings, these tools are designed to identify mental health needs that may require accommodation in service delivery. When fully implemented, these screenings will enable HRA workers to offer reasonable accommodations to people with mental illness or disabilities both at the benefit application and renewal stages.

In addition, through supportive housing programs overseen by HRA, the City provides stable housing and as needed supportive services, including both mental and physical healthcare, alcohol and substance use programs and other social services including education and employment, to a variety of qualified populations living with serious mental illness, substance use disorders, disabilities, and/or HIV AIDS, as well as young adults who have left foster care, homeless single veterans, and medically frail individuals and individuals receiving nursing home care. Through supportive housing these vulnerable populations are able to address the multiple barriers they face when trying to obtain and maintain stable housing and live with independence and dignity.

The Department for the Aging (DFTA) has been conducting training for Case Management Agency (CMA) staff on “Working with LGBTQ” seniors since September 2008. Every new CMA hire attends training within their first two years. Realizing the need for a senior center focusing on the needs of the LGBTQ community, DFTA has also funded the first LGBTQ-dedicated senior center in the country – the SAGE Innovative Senior Center which opened in 2012. SAGE offers a range of social and cultural activities as well as health and wellness classes. In addition, SAGE provides a set of Title III-E services and LGBTQ seniors and their caregivers and family networks throughout the City, including counseling, support groups, and assistance accessing benefits.

Commissioners Bassett, Commissioner Banks, and Commissioner Carrion commented on proposed state regulations regarding Medicaid coverage of transition-related transgender care and services. As studies confirm, access to gender-affirming healthcare is essential for both physical and mental health. As agencies that play a role in the administration of health programs and services, it is vital that we support the rights of transgender people to get medically necessary care that has been shown to dramatically improve health and well-being. Additionally, the Department of Health provides support for four grassroots transgender-focused organizations to increase their capacity to address social exclusion and health inequities in order to broadly promote the well-being of transgender and gender non-conforming persons.
As this committee is well aware, mental health is a priority of this Administration. In November 2015, Mayor Bill de Blasio and First Lady Chirlane McCray launched ThriveNYC, a set of 54 initiatives – representing an investment of $850 million over four years – to address the mental health of our city. At the heart of each ThriveNYC initiative is a focus on destigmatizing mental illness, increasing access to services, and changing the way New Yorkers think and talk about mental health at home, in their communities and in the workplace.

This plan was developed over a year of going out into the community to get feedback from New Yorkers. During this process, we heard from hundreds of New Yorkers through 25 stakeholder focus groups, town halls in every borough, countless informal conversations, and meetings with our elected officials. We received critical feedback from communities across the city, including immigrant communities, faith-based organizations, and business leaders, representing over 250 organizations. Members from many LGBTQ organizations were invited to participate as well, including the Ali Forney Center, AIDS Center Queens, the Hetrick-Martin Institute, FIERCE, Covenant House, Gay Men’s Health Crisis, Gay Men of African Descent, the LGBTQ Center, the Audre Lorde Project, and the Door. This critical feedback has informed the development and implementation of ThriveNYC.

ThriveNYC is meant to serve all New Yorkers, but I would like to highlight a few ways in which they provide support specific to the LGBTQ community:

- Our Mental Health First Aid initiative will train 250,000 New Yorkers in Mental Health First Aid and certify another 500 individuals as Mental Health First Aid instructors. The Gay Men’s Health Crisis and the Hetrick-Martin Institute participated in the instructor program and now lead Mental Health First Aid training in their communities. We are working to increase the number of LGBTQ community organizations that receive trainings and encourage more of them to pursue instructor certification.

- NYC Well is our single point of access to counseling, support services and treatment referral. It is free, confidential, and available 24/7. NYC Well operators can connect individuals to over 100 LGBTQ resources for all ages.

- Our first cohort of 120 Mental Health Services Corps members are now embedded in primary care and behavioral health clinics across the city. Every corps members will complete a special populations training on LGBTQ issues during their three-year curriculum. One of our corps members is embedded at the Callen Lorde primary care center in Manhattan, the largest Federally Qualified Health Center in the city that provides services specifically targeted to LGBTQ New Yorkers.

- Thanks to the generous support of the City Council, the Department collaborates with the Hetrick-Martin Institute and key agencies to foster the Citywide LGBTQ Youth Initiative, which supports youth, their families, and youth service providers. This year the Institute will also provide training, capacity building, and technical assistance programs for school based health clinic staff and school mental health consultant program staff. These trainings will help staff guide their schools in a variety of topics around gender
identity and sexual orientation including, but not limited to: deconstructing gender, the importance of vocabulary, and LGBTQ policy impacts for schools. It will also provide case scenarios and actions plans for schools that surface challenges while serving LGBTQ youth.

But ThriveNYC is more than a collection of initiatives; it is a comprehensive strategy for reforming the behavioral health system for all New Yorkers. By taking a public health approach to mental health, we identify leading risks, health outcomes, and access to resources across society. This approach aims the spotlight on groups at highest risk, and calls us to design interventions accordingly. In this way ThriveNYC provides a framework for creating culturally competent services for LGBTQ New Yorkers of all ages.

As ThriveNYC continues to reform the City’s mental health system, we are committed to engaging stakeholders from across the city to guide the development and implementation of our work. We have reinvigorated the Community Service Board (CSB), the advisory body required by law to advise the Department of Health in all areas related to the City’s mental health and substance use treatment services. New appointees to the board represent a broad spectrum of communities, organizations and viewpoints to engage people whose voices have previously been underrepresented.

As part of efforts to revitalize the CSB, the board formed an LGBTQ subcommittee that will meet for the first time this month. This subcommittee is well poised to provide input to the Department’s existing programming and policy work supporting LGBTQ populations, review and inform the development of the Department’s annual mental health services plan that is presented to the State, and strengthen the Department’s burgeoning efforts to collaboratively address the unique public health needs of the LGBTQ community.

Outside of specific new ThriveNYC initiatives, the Department of Health is making additional strides to address the mental health needs of LGBTQ New Yorkers. Including:

- Through contracts with service providers that deliver treatment, support services and health education such as:
  - The LGBTQ Center of New York which provides both individual and systems advocacy services for the LGBTQ community by offering direct and indirect support.
  - The Rainbow Heights Club which provides mental health services to LGBTQ individuals to support their recovery, develop or re-establish a sense of self-esteem and group affiliation, and support their reintegration into a meaningful role in the community.
  - The LGBTQ Service Center which has five programs that serve the LGBTQ population affected by substance use disorders, including adult outpatient treatment, peer support, and group and individual counseling prevention.

- Through partnerships with:
The Department of Education to pilot a model called Out for Safe Spaces that helps school-based employees “come out” as visible allies for LGBTQ students. As part of the program, participating staff wear badges identifying themselves as allies in order to make school a safer, more welcoming place. This partnership also allows Community Schools to provide a variety of clinical and psycho-educational group work specific to LGBTQ youth, support for after school clubs, and training and professional development for staff to increase knowledge and awareness of LGBTQ issues.

The New York State Office of Alcoholism and Substance Abuse Services to provide comprehensive substance use disorder treatment, including medication assisted treatment for opioid use disorder, to adolescents at the LGBTQ Center in Manhattan.

- And through expanding internal coordinating capacity to ensure that LGBTQ health issues are addressed across the Department of Health’s portfolio. Currently within the Department we have six dedicated staff who work exclusively on LGBTQ health issues, joined by an additional twenty staff across the agency that form a working group to enhance the Department’s overall programming, policy and data collecting on LGBTQ communities. I also want to highlight the Center for Health Equity’s Gender Justice Initiative, which works to transform gender and power relations, norms and structures as a core strategy for challenging health inequality. Through this work, the Center builds capacity within the Department and with healthcare providers across the city to understand and address multiple barriers caused by race, ethnicity, poverty, gender identity, gender expression, sexual orientation, disability status and other factors. As with ThriveNYC, the work is informed by, and done in collaboration with, the community.

Intro. 1225

I would now like to address the legislation being discussed today. Intro 1225 would require the Department of Health to develop a comprehensive plan to address the mental health and substance use needs of LGBTQ New Yorkers. As I hope my testimony conveys, we are continually working to address the needs of all New Yorkers, including those communities that suffer mental health disparities, of which the LGBTQ community is especially prominent. We would be happy to work with the Council to determine how to best integrate the extensive planning and mental health development ongoing through ThriveNYC and partner efforts with feedback from the LGBTQ community, and look for ways to share these findings with the Council and the public at large.

We look forward to working with the Council to ensure that the behavioral health needs of LGBTQ New Yorkers are met through ThriveNYC and other programs funded through the Department.

Thank you again for the opportunity to testify. I am happy to take questions.