Chair Louis, Chair Dinowitz, and distinguished members of the City Council, thank you for the opportunity to testify today. I’m Claire Kozik, Associate Director of Policy & Advocacy at The Coalition for Behavioral Health. The Coalition represents over 100 community-based mental health and substance use providers, who collectively serve over 600,000 New Yorkers annually.

The COVID-19 pandemic has catalyzed and exacerbated mental health challenges and substance use disorders for hundreds of thousands of New Yorkers, and veterans were no exception. In 2020, 30% reported having suicidal thoughts over a two-week period and sadly, the number of U.S. military suicides increased by 15% nationwide. New York State, in particular, has a veteran suicide rate that is almost twice that of the national average.

Moreover, 52% of veterans reported that their mental health declined as a result of isolation that came from the necessity of social distancing. The rate of generalized anxiety disorders has increased, particularly among veterans aged 45-64, with one in seven experiencing increased distress. There was also a 15% national increase in the number of veterans’ crisis calls in 2020. Veterans, like many other New Yorkers, are experiencing significant mental health and substance use challenges as a result of the pandemic.

Unfortunately, the behavioral health workforce is insufficient to meet this increased need, and, as a result, veterans and many others are not able to access the care they need. Prior to the pandemic, the behavioral health field already had a workforce shortage, due low salaries and benefits across the sector. This shortage has now reached crisis levels, as staff have left the field for higher paying positions in other sectors, such as retail and restaurants, while record numbers of New Yorkers seek help.

Nationally, 97% of mental health and substance use treatment organizations reported that it has been difficult to recruit staff. Our providers tell us every day of the staffing crisis they face. We have agencies that have over 100 open positions, but have only received a handful of applications. Behavioral health providers are pausing new admissions, decreasing the size of programs, and in some cases, closing programs entirely due to insufficient staffing. Many of our members are hesitant to take on new contracts because they do not know where they would find
the staff for these programs. Veterans will not be able to access the mental health and substance use care they need unless significant action is taken to address the workforce crisis.

Lack of access to care, or delays in receiving care, has a detrimental effect. Veterans who screened positive for depression before the pandemic demonstrated higher levels of substance use after the pandemic's onset. This increase in substance use runs parallel to the 40% increase in overdose deaths among all New Yorkers in 2020. The City Council should support efforts to expand and reinforce the behavioral health workforce to ensure that there are behavioral health professionals available to care for mental health and substance use treatment needs of its 138,000 veterans.

Most importantly, the Council should increase funding for city-contracted mental health and substance use providers so that they can raise wages and provide better benefits for their staff. The City must work with providers to ensure that city services are funded adequately. For too long, the City has forced providers to accept contracts that provide poverty level wages for staff. There should be a living wage floor set on all city contracts, as well as annual cost-of-living adjustments. Additionally, the City should create, fund, and incorporate a comprehensive wage and benefit schedule for government contracted human services workers comparable to the salaries made by City and State employees in the same field.

Just recently, we saw providers lose hundreds of social workers who were providing clinical services to New Yorkers every day, when the City hired those same social workers at a salary thousands of dollars higher than the City paid for the contracted services. This counterproductive move means that rather than increasing the capacity for mental health services at a time when it is desperately needed, the City disrupted care for thousands of New Yorkers. If the City had provided equitable funding for contracted providers, this never would have occurred. For the City to ensure services for veterans, the City must provide adequate fund for the staff who provide these services.

We also encourage the Council to continue efforts to address the digital divide. Telehealth proved to be an invaluable tool for many individuals who sought care during the pandemic. Many programs, including outpatient services and substance use treatment groups, were able to transition to telehealth, avoiding gaps in service and maintaining access to care. However, many veterans were unable to access telehealth, as they lacked sufficient internet bandwidth or did not have a sufficient device. While providers worked to fill these gaps, conducting sessions over the telephone and purchasing devices for clients, it is clear that access to the internet has become a social determinant of health. The City Council should continue efforts to close the digital divide, by providing affordable internet and subsidizing the purchase of devices for telehealth.

Lastly, we want to highlight the importance of the Council’s funding for veteran's mental health. Two of our member agencies receive funding through this initiative. It is critical to connecting veterans to community-based mental health and substance use care. This initiative directly funds mental health and substance use care for veterans, including medication management, psychiatry services and treatment for opioid use disorder. The Coalition encourages the City Council to maintain funding for this initiative.
Thank you for the opportunity to testify today. We look forward to working with the City Council to ensure robust mental health and substance use services are made available to our veterans.

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2 https://apnews.com/article/coronavirus-pandemic-health-army-lloyd-austin-aa9971be75f6a78d9b6530d6ff3d6d72