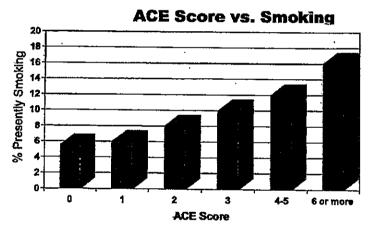
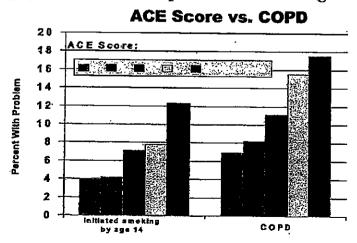
### Organic disease:

We shall first look at the relationship of adverse childhood experiences to smoking 4. Smoking underlies some of the most important causes of death in America; there has been a strong public health effort to eradicate smoking in California. In spite of initial success in significantly reducing the number of smokers, there has been no further net decrease in recent years although the efforts against smoking have continued. Because of this, smoking in the face of California's strong social pressures against it is often attributed to 'addiction'. The usual concept of tobacco addiction implies that it is attributable to characteristics that are intrinsic within the molecular structure of nicotine. However, we found that the higher the ACE Score, the greater the likelihood of current smoking. In other words, current smoking is strongly related in a progressive dose-response manner to what happened decades ago in childhood. Finding 'addiction' attributable to characteristics that are intrinsic in early life experiences challenges the conventional concept of addiction. The psychoactive benefits of nicotine are well established in the medical literature although they are little remembered. Are smoking and its related diseases the result of self-treatment of concealed problems that occurred in childhood?



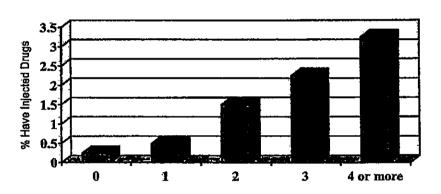
Chronic obstructive pulmonary disease (COPD) also has a strong relationship to the ACE Score, as does the early onset of regular smoking. A person with an ACE Score of 4 is 260% more likely to have COPD than is a person with an ACE Score of 0. This relationship has the same graded, dose-response effect that is present for *all* the associations we found. Moreover, all the relationships presented here have a p value of .001 or stronger.



When we compared hepatitis in ACE Score 0 patients with hepatitis in ACE Score 4 patients, there was a 240% increase in prevalence. A progressive dose response effect was present with every increase in the ACE Score. Similarly, with regard to sexually transmitted disease, comparison of the adjusted odds ratio for sexually transmitted disease in these same two groups showed a 250% increase at ACE Score 4 compared to ACE Score 0.

In the United States, intravenous drug use is a major public health problem with which little progress has been made. It is widely recognized as a cause of several life-threatening diseases. We found that the relationship of iv drug use to adverse childhood experiences is powerful and graded at every step; it provides a perfect dose-response curve.

### ACE Score vs. Intravenous Drug Use



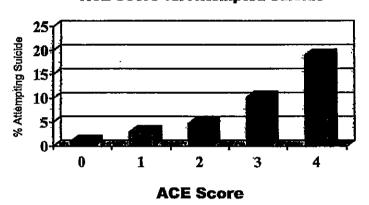
In Epidemiology, these results are almost unique in their magnitude. For example, a male child with an ACE Score of 6 has a 4,600% increase in the likelihood of later becoming an iv drug user when compared to a male child with an ACE Score of 0. Since no one injects heroin to get endocarditis or AIDS, why is it used? Might heroin be used for the relief of profound anguish dating back to childhood experiences? Might its psychoactive effects be the best coping device that an individual can find? Is intravenous drug use properly viewed as a personal solution to problems that are well concealed by social niceties and taboo? If so, is intravenous drug use a public health problem or a personal solution? Is it both? How often are public health problems personal solutions? Is drug abuse self-destructive or is it a desperate attempt at self-healing, albeit while accepting a significant future risk? This is an important point because primary prevention is far more difficult than anticipated. Is this because non-recognition of the benefits of health risk behaviors leads them to be viewed as irrational and as solely having damaging consequences? Does this major oversight leave us speaking in platitudes instead of understanding the causal basis of some of our intractable public health problems?

### Emotional disorders:

When we looked at purely emotional outcomes like self-defined current depression or self-reported suicide attempts, we find equally powerful effects. For instance, we found that an

individual with an ACE Score of 4 or more was 460% more likely to be suffering from depression than an individual with an ACE Score of 0. Should one doubt the reliability of this, we found that there was a 1,220% increase in attempted suicide between these two groups. At higher ACE Scores, the prevalence of attempted suicide increases 30-51fold (3,000-5,100%)! Our article describing this staggering effect was published in a recent issue of the Journal of the American Medical Association<sup>5</sup>. Overall, using the technique of population attributable risk, we found that between two-thirds and 80% of all attempted suicides could be attributed to adverse childhood experiences.

### **ACE Score vs. Attempted Suicide**



In addition to these examples, we found many other measures of adult health have a strong, graded relationship to what happened in childhood: heart disease, fractures, diabetes, obesity, unintended pregnancy<sup>6</sup>, sexually transmitted diseases<sup>7</sup>, and alcoholism were more frequent. Occupational health and job performance worsened progressively as the ACE Score increased. Some of these results are yet to be published, as is all the data from the prospective arm of the Study that will relate adverse childhood experiences to medical care costs, disease, and death a half-century later.

Clearly, we have shown that adverse childhood experiences are common, destructive, and have an effect that often lasts for a lifetime. They are the most important determinant of the health and well-being of our nation. Unfortunately, these problems are painful to recognize and difficult to deal with. Most physicians would far rather deal with traditional organic disease. Certainly, it is easier to do so, but that approach also leads to troubling treatment failures and the frustration of expensive diagnostic quandaries where everything is ruled out but nothing is ruled in.

Our usual approach to many adult chronic diseases reminds one of the relationship of smoke to fire. For a person unfamiliar with fires, it would initially be tempting to treat the smoke because that is the most visible aspect of the problem. Fortunately, fire departments learned long ago to distinguish cause from effect; else, they would carry fans rather than water hoses to their work. What we have learned in the ACE Study represents the underlying fire in medical practice where we often treat symptoms rather than underlying causes.

If the treatment implications of what we found in the ACE Study are far-reaching, the prevention aspects are positively daunting. The very nature of the material is such as to make one uncomfortable. Why would one want to leave the relative comfort of traditional organic disease and enter this area of threatening uncertainty that none of us has been trained to deal with? And yet, literally as I am writing these words, I am interrupted to consult on a 70-year-old woman who is diabetic and hypertensive. The initial description given to me left out the fact that she is morbidly obese (one doesn't go out of one's way to identify what one can't handle). Review of her chart shows her to be chronically depressed, never married, and, because we routinely ask the question of 58,000 adults a year, to have been raped by her older brother six decades ago when she was ten. That brother molested her sister who is said also to be leading a troubled life.

We found that 22% of our Kaiser members were sexually abused as children. How does that affect a person later in life? How does it show up in the doctor's office? What does it mean that sexual abuse is never spoken of? Most of us initially are uncomfortable about obtaining or using such information; therefore we find it useful routinely to pose such questions to all patients by questionnaire. Our Yes response rates are quite high as the ACE Study indicates. We then ask patients acknowledging such experience, "How did that affect you later in life?" This question is easy to ask and is neither judgmental nor threatening to hear. It works well and you should remember to use it. It typically provides profoundly important information, and does so concisely. It often gives one a clear idea where to go with treatment.

What then is this woman's diagnosis? Is she just another hypertensive, diabetic old woman or is there more to the practice of medicine? Here is the way we conceptualized her problems:

Childhood sexual abuse Chronic depression Morbid obesity Diabetes mellitus

Hypertension

Hyperlipidemia

Coronary artery disease

Macular degeneration Psoriasis

This is not a comfortable diagnostic formulation because it points out that our attention is typically focused on tertiary consequences, far downstream. It reveals that the primary issues are well protected by social convention and taboo. It points out that we physicians have limited ourselves to the smallest part of the problem, that part where we are comfortable as mere prescribers of medication. Which diagnostic choice shall we make? Who shall make it? And, if not now, when?

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# **Major Findings**

Childhood abuse, neglect, and exposure to other traumatic stressors which we term *adverse childhood* experiences (prevalence.htm#ACED) (ACE) are common. Almost two-thirds of our study participants reported at least one ACE, and more than one in five reported three or more ACE. The short- and long-term outcomes of these childhood exposures include a multitude of health and social problems. The ACE Study uses the ACE Score, which is a count of the total number of ACE respondents reported. The ACE Score is used to assess the total amount of stress during childhood and has demonstrated that as the number of ACE increase, the risk for the following health problems increases in a strong and graded fashion:

- alcoholism and alcohol abuse
- chronic obstructive pulmonary disease (COPD)
- depression
- fetal death
- health-related quality of life
- illicit drug use
- ischemic heart disease (IHD)

- liver disease
- risk for intimate partner violence
- multiple sexual partners
- sexually transmitted diseases (STDs)
- smoking
- suicide attempts
- unintended pregnancies

In addition, the ACE Study has also demonstrated that the ACE Score has a strong and graded relationship to health-related behaviors and outcomes during childhood and adolescence including early initiation of smoking, sexual activity, and illicit drug use, adolescent pregnancies, and suicide attempts. Finally, as the number of ACE increases the number of co-occurring or "co-morbid" conditions increases.

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Content source: Division of Adult and Community Health (http://www.cdc.gov/nccdphp/dach).

National Center for Chronic Disease Prevention and Health Promotion

(http://www.cdc.gov/nccdphp/)

Page Located on the Web at http://www.cdc.gov/nccdphp/ACE/findings.htm

### **Prevent Child Abuse New York**

134 South Swan Street Albany, NY 12210

# THE COSTS OF CHILD ABUSE AND THE URGENT NEED FOR PREVENTION



January 2003

### **EXECUTIVE SUMMARY**

Research during the past twenty years demonstrates that an array of human and social problems resist solutions if we do not respond to the urgent need to prevent the abuse and neglect of our children. For too long, government has spent billions of dollars treating the consequences of child abuse and maltreatment and investing next to nothing in up front prevention.

Child abuse and maltreatment is a societal problem and preventing it requires universal support. With this paper, Prevent Child Abuse New York calls upon the great institutions in New York State government and philanthropy to halt the epidemic of child abuse by significantly increasing their investment in prevention.

### Child Abuse is Often a Vicious Cycle

Typically, abusive parents have histories of abuse or deprivation in childhood and in turn treat their children similarly. It is estimated that about one-third of abused children will one day abuse their offspring.

### Domestic Violence

Domestic violence places children at greater risk for continuing the generational cycle of violence. In a domestic violence study, about 33% of the alleged abusers were abused by their parents and about 50% of their parents were themselves involved in battering relationships.

### Alcohol and Substance Abuse

Alcohol and drug abuse and child abuse are risk factors for each other. Substance abuse is one of the top problems exhibited by families in child abuse and neglect cases. Children of substance-abusing parents are 3 times more likely to be abused and 4 times more likely to be neglected than parents who are not substance abusers.<sup>3</sup> About two-thirds of people in drug treatment programs report they were abused as children.

### Juvenile Delinquency and Adult Criminal Behavior

Child abuse is a risk factor for delinquent behavior in adolescents and violent adult tendencies. Being abused or neglected as a child increased the likelihood of arrest as a juvenile by 53 percent, as an adult by 38 percent, and for a violent crime by 38 percent. Violent child victimizers are substantially more likely than those that victimize adults to have been physically or sexually abused as children.<sup>5</sup>

### Mental/Emotional Problems

Victims of child abuse suffer in later years from mental and emotional problems, including low self-esteem, depression, anxiety, psychiatric disorders and suicide attempts.

### Injuries and Health Problems

In 2000, 4,532 substantiated child injuries were sustained as a result of abuse in New York. However, this is probably a small percentage of all the injuries received by children since most are never reported.

### **Learning Problems**

The most rapid period of brain development throughout the whole life span occurs during the first 3 years of life. Delayed and disordered development is very common in children that are abused or neglected, requiring extensive special services during childhood.

### Foster Care

Foster care is costly socially as well as fiscally. Children in foster care often have emotional and behavioral troubles that lead to expensive social problems such as dropping out of school, teen pregnancy, homelessness, unemployment, criminal activity, incarceration and welfare dependency.

### Homelessness

Adverse childhood experiences are powerful risk factors for adult homelessness. The likelihood of homelessness among individuals who experience a neglect and abuse during childhood increases tremendously.

### Teen Mothers

Teenage childbearing often decreases opportunities for both mother and child. On average, the children of teen mothers are less healthy, more likely to suffer child abuse and be placed in foster care, more likely to engage in criminal behavior, and less likely to be economically and socially successful as adults.

### **Prostitution**

Child prostitutes are victims of sexual abuse. A study of prostitution found that 70% of prostitutes reported that sexual abuse as children definitely affected their decision to become prostitutes and 90% of them were juvenile runaways often forced to engage in prostitution.

### Public Assistance

Studies have concluded that being abused as a child increases one's chances of being unemployed and relying on public assistance in later life.

### INTRODUCTION

Child abuse and maltreatment is not a new societal problem. Since the beginning of time, no class of people has been subjected to greater abuse and neglect than children. More than one million children are confirmed each year as victims of child abuse and neglect by child protective service agencies in the United States. Every day nearly four children die as a result of abuse and neglect and most are under the age of five. In New York State there were close to 45,000 substantiated cases of child abuse and maltreatment in 1999 following investigation of nearly 140,000 reports. Of course many more cases are never brought to light.

According to a recent report by the *Violence Against Children Research Center*, crimes against youth are less likely to be reported to the police; youths have a much greater chance of being sexually assaulted than adults; and youths are more likely to be injured during victimization. Nationwide, in one-third of all sexual assaults reported to law enforcement, the victim was under the age of twelve. About 20% of immates serving time in state prisons for violent crimes in 1991 had been convicted of a crime against a child victim. Two-thirds of all prisoners convicted of rape or sexual assault committed their crime against a child.

During the past two decades, there has been significant research on the effects of abuse and maltreatment on children. While some children have suffered terrible childhoods and managed to become successful adults, the vast majority of research has demonstrated that the consequences of child abuse are grave, damaging and often spill over into a person's adult life. An abused child suffers from the abuse as well as from the long-term effects of the abuse. Adverse effects have been identified in maltreated children's physical, cognitive, emotional, and social development.

The failure to address child abuse through preventive measures not only harms a million children each year, it imposes a tremendous cost to society. Like most states, New York spends a considerable amount of fiscal and human resources to treat the numerous consequences of child abuse and maltreatment. The failure to invest in prevention results in a significantly greater amount of resources needed to treat the outcomes.

This paper primarily summarizes prior research studies in the area of child abuse and maltreatment, many of which have demonstrated a powerful link between abuse as a child and harmful consequences in later life. In addition, attention is given to the cost borne by New York State citizens to treat these consequences, some of which could be prevented by a greater investment of resources used to prevent child abuse.

### Domestic Violence and the Continued Cycle of Abuse

Typically, abusive parents have histories of abuse or deprivation in childhood. A cycle of abuse and neglect is created as abused or neglected children mature and become parents who know discomfort, hunger, neglect, and loneliness as the norm. They in turn treat their children similarly. It has been estimated that one-third of those who were abused as children will abuse their offspring.

Violence within the family has been part of the human condition throughout the recorded history of mankind and most murders are committed within the confines of kinship. Vii Research has found a link between exposure to violence and posttraumatic stress symptoms, problem behaviors at school, and difficulties with interpersonal relationships.

Parents who have been traumatized by violence feel frustrated and helpless to keep their children safe, and if they have been victimized, may be emotionally unable to care for their children. Researchers have found that wife battering is often accompanied by physical and/or sexual abuse of the children. Domestic violence also places children at greater risk for continuing the generational cycle of violence. In a study of battered wives, it was reported that 37% of the women and 54% of the men who had been abused beat their own children.

Violent patterns of spousal relationships usually are passed onto the children, beginning an intergenerational cycle that can perpetuate itself indefinitely. In one domestic violence study, one-third of the alleged abusers were abused by their parents and about half of their parents were themselves involved in battering relationships. Results suggested that exposure to domestic violence during childhood, either as a victim or witness, is a strong predictor of domestic violence. xii

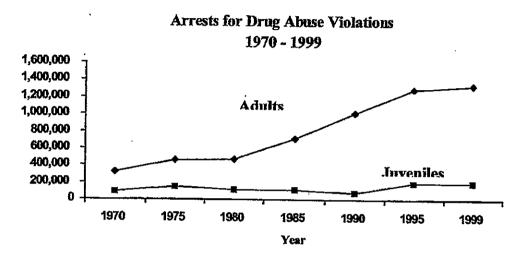
### Alcohol and Substance Abuse

Alcohol and substance abuse are widespread in this country, with 14 million adults abusing alcohol and more than 12 million using illicit drugs. State child welfare records show that substance abuse is one of the top two problems exhibited by families in 81% of reported cases of child abuse and neglect. Eleven percent of U.S. children (8.3 million) live with at least one parent who is either alcoholic or in need of treatment for the abuse of illicit drugs. Children of substance-abusing parents are three times more likely to be abused and four times more likely to be neglected than children of parents who are not substance abusers.

As many as two-thirds of all people in treatment for drug abuse report they were abused during childhood.\*\*vii A review of recent studies found that 30% to 59% of women receiving drug abuse treatment have posttraumatic stress disorder (PTSD).\*\*viii Even more frequent than PTSD among women who abuse drugs is a history of trauma. A review of the studies showed that 55% to 99% of these women reported a history of physical and/or sexual trauma, usually occurring during childhood and involving repetitive physical and/or sexual assault.\*\*

In 1999, there were 283,497 people admitted to alcoholism and substance abuse treatment programs in New York State of which 14,919 were under the age of 18. The 2000-01 State Budget appropriated \$498,976,000 to support alcoholism and substance abuse services.

Arrests for drug abuse violations have risen dramatically since 1970. According to the FBI, in 1970, 322,300 adults and 93,300 juveniles were arrested in the U.S. In about 30 years, the numbers rose to 1,337,600 and 194,600 respectively.



Source: FBI, The Uniform Crime Reports

### Juvenile Delinquency/Runaways

Research has consistently identified child abuse as a risk factor for violent behavior in adolescents. A lack of nurturing, hostility and neglectfulness can produce delinquent behavior.\*\* Children who are abused or neglected are 50% more likely to be arrested while a juvenile, 40% more likely to be arrested for a violent crime as an adult, and 33% more likely to abuse drugs. The results of one study showed that 55% of status offenders and 45% of juvenile delinquents had substantiated histories of maltreatment. The percent of status offenders who had been sexually abused was seven times higher among runaways.\*\*

There are about 450,700 runaway children and 127,100 thrownaway children each year in this country. Two major motivations of a runaway child are to avoid an emotional experience or consequence that they are expecting to occur or to escape a recurrent or ongoing unpleasant, painful or difficult experience in their life. Runaways are more likely to have a history of sexual abuse and child abuse and incest contribute significantly to the health problems of runaway adolescents and require special attention. Life on the streets exacerbates the typical health problems of adolescents, where often they ignore signs of poor health due to the fear that they may be returned home. In addition to health risks, runaways are often sought out by child pornographers, pimps and pedophiles, continuing to be victimized.

### Adult Crime

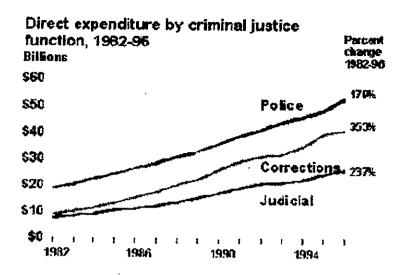
As of October 30, 2000, there were 71,667 people under the custody of the New York State Department of Corrections; 68,178 were males and 3,489 were females. In 1999, there were 21,402 arrests for offenses involving child victims (under the age of 17) in New York; 2,132 were for sex offenses. The remainder of arrests were for a number of crimes against children including criminal solicitation, assault of a child, murder, manslaughter, abandonment, and sale of a controlled substance or a firearm to a child. Of those convicted, about 35% were convicted of felonies, about 37% were convicted of misdemeanors, and about 28% convicted of lesser offenses.\*\*

An extensive body of research has demonstrated that a history of child abuse can lead to criminal activity. Violent child victimizers are substantially more likely than those that victimize adults to have been physically or sexually abused as children. In a U.S. Department of Justice report, more than 40% of female inmates reported they had been physically or sexually abused. In the same survey, more than a quarter of inmates reported that their parents or guardians were alcohol or drug abusers. Another report by the U.S. Department of Justice estimated that 14.4% of men and 36.7% of women in state prisons were child abuse victims. XXVIII

A study by the National Institute of Justice assessed the long-term criminal consequences of childhood abuse through the examination of official criminal histories of 908 validated cases of childhood sexual and physical abuse. Being abused or neglected as a child increased the likelihood of arrest as a juvenile by 53%, as an adult by 38%, and for a violent crime by 38%. XXIX A 1993 study of 12 murderers diagnosed with dissociative identity disorder found definitive evidence of severe childhood abuse in 11 of the cases. XXX

The rate of recidivism must be considered when viewing criminal justice policies since released prisoners are often rearrested for the same type of crime for which they served time. Of the 108,580 persons released from prisons in 11 states in 1983, about 63% were rearrested for a felony or serious misdemeanor within 3 years, 47% were reconvicted, and 41% returned to prison or jail. \*\*xxi\*

Public protection is an expensive undertaking. Nationally, direct expenditures for corrections rose from \$9 billion in 1982 to \$41 billion in 1996. Expenditures for police rose from \$19 billion to \$53 billion, while judicial expenditures rose from \$7.7 billion to \$41 billion. During this period, state expenditures for criminal justice expenditures increased 275%.



Source: FBI, The Uniform Crime Reports

While violent crime has recently decreased in New York State, particularly in New York City, criminal justice services still comprises a significant portion of expenditures in New York State. In 1996, New York State ranked number 2 in the nation in per capita spending for corrections at \$210.\*\* The 2000-01 State Budget included more than \$3.24 billion for Criminal Justice purposes. In addition, the State Budget provided more than \$15 million for the Capital Defender Office for public defense for criminal cases.

| <u> </u>             | Adult Arrests | Felony Prosecutions | Convictions | Sentences  |
|----------------------|---------------|---------------------|-------------|--|
| Total Felony         | 181,052       | 53,458              | 334,066     |  |
| Violent              | 53,986        | 13,764              |             |  |
| Drug                 | 51,210        | 21,904              |             | <u> </u>   |
| Other                | 75,856        | 17,790              | .           | <del> </del>                                     |
| Total Misdemeanor    | 371,345       | ·                   | 143,900     | <del>                                     </del> |
| Drug                 | 94,484        |                     |             | 1  |
| DWI                  | 39,353        |                     |             | -  |
| Other                | 237,508       |                     |             | -  |
| Lesser               |               |                     | 145,038     | <del> </del>                                     |
| Total Incarcerations | 1             |                     | 7.2,00      | 132,366  |
| Prison               |               |                     | 1           | 20,110   |
| Jail                 |               |                     |             | 100,914  |
| Jail & Probation     |               |                     | † ·         | 11,342   |
| Probation            |               |                     |             | 28,856   |
| Fine                 |               |                     |             | 76,775   |
| Other                |               | İ                   |             | 96,069   |

According to a two-year research effort by the U.S. Department of Justice, personal crime is estimated to cost Americans \$105 billion annually in medical costs, lost earnings, and public program costs related to victim assistance. When including pain, suffering and the reduced quality of life, the cost is estimated at \$450 billion annually. Violent crime causes 3% of U.S. medical spending and 14% of injury-related medical spending. It also results in wage losses equivalent to 1% of American earnings. Violent crime also imposes an enormous cost on mental health care. As much as 10% to 20% of mental health care expenditures in the U.S. may be attributed to crime, primarily for victims being treated as a result of their victimization. About half of these expenditures are for child abuse victims receiving treatment for abuse that occurred years earlier. \*\*xxxiv\*\*

### Mental/Emotional Problems

According to a new report by the U.S. Surgeon General, the nation is facing a public crisis in mental health for children and adolescents. In the U.S., 1 in 10 children and adolescents suffer from mental illness severe enough to cause some level of impairment. In 1997-98, there were 7,625 people admitted to programs at state psychiatric centers in New York State (1,766 under the age of 18). Results from numerous studies have concluded that victims of child abuse suffer from low self-esteem and numerous other mental and emotional problems in later years. XXXVI

An 18-year longitudinal study conducted to gather information on childhood sexual abuse (CSA) and its consequences concluded that CSA, particularly severe CSA, was associated with increased risk of psychiatric disorder in young adults. Another long-term study found that 80% of abused young adults met DSM-III-R (the Diagnostic and Statistical Manual of Mental Disorders-Revised) criteria for at least one psychiatric disorder at age 21. When compared to their nonabused counterparts, abused subjects demonstrated considerable impairments in functioning both at ages 15 and at 21. This included greater depression, anxiety, psychiatric disorders, emotional-behavioral problems and suicide attempts. \*\*xxxviii\*\*

More than 2,100 children 19 years of age or younger committed suicide in 1996 in the U.S. Suicides have increased considerably in younger children in recent years, with an increase of 113% from 1980 to 1996 in children under the age of 15. An association between suicide and child abuse has been found in studies of adolescents who have attempted suicide. Adolescents who have attempted suicide often report a history of abuse. It has also been found that adolescent runaways have high rates of suicide attempts in addition to a history of physical or sexual abuse. \*\*xxxix\*\*

### Injuries and Health Problems

In 1993, about 3 million children nationwide were maltreated or endangered. About 55% of all victims experienced serious or moderate harm as a result. In 2000, 4,532 substantiated child injuries needing hospital treatment were sustained as a result of child abuse in New York. However, this is probably a small percentage of all the injuries received by children since most are never reported. According to New York State Department of Health figures, the average cost of treatment for a traumatic injury to a child in 1999 was \$4,022.30.

There are numerous types of injuries that abused and maltreated children sustain short of death including lacerations, punctures, burns, broken bones, internal injuries and more. Abusive head trauma (AHT) is a dangerous form of child abuse that can be difficult to diagnose in young children. A recent study determined how frequently AHT was previously missed by physicians in a group of abused children with head injuries and determined factors associated with the unrecognized diagnosis. One hundred seventy-three children younger than 3 years with head injuries caused by abuse comprised the study population. Twenty-five (14.5 percent) of the 173 children died as a result of their head injuries. A total of 54 (31.2 percent) of 173 abused children with head injuries had been seen by physicians after AHT and the diagnosis was not recognized.\*

Research indicates a high degree of risk for HTV and AIDS in children who have been sexually abused. The risk is two-fold; as a direct effect of the sexual abuse itself and also as a result of subsequent risky behavior by victims of abuse in later life, such as alcohol and drug use, unsafe sex, numerous sexual partners, and prostitution. Lii Common medical complications of child sexual abuse include injury, pregnancy and sexually transmissible diseases (STDs).

A recent study explored the relationship of health risk behavior and disease in adulthood to the breadth of exposure to childhood emotional, physical, or sexual abuse, and household dysfunction. More than 9,500 adults answered questions about adverse childhood experiences, including psychological, physical, or sexual abuse; violence against the mother; and living with household members who were substance abusers, mentally ill, or ever imprisoned. Persons who had experienced four or more categories of household dysfunction, compared to those who had experienced none, had a significantly increased health risk for alcoholism, drug abuse, depression, suicide attempt, smoking, sexual promiscuity, sexually transmitted diseases and severe obesity. The categories of adverse childhood experiences were strongly interrelated and persons with multiple categories of childhood exposure were likely to have multiple health risk factors later in life such as heart and liver disease. \*liii

### **Learning Problems**

The most rapid period of brain development throughout the whole life span occurs during the first 3 years of life. Xliv This brain growth is enhanced by positive environmental factors but is also vulnerable to negative factors such as malnutrition, maltreatment and abuse. Most victims of child abuse are under the age of five and often struggle for years in school, never catching up to their peers. Results from an Adolescent Health Survey of 36,000 7th to 12th grade students found that students with a history of sexual abuse had higher rates of poor school performance than did a comparison group. Xlv

Maltreatment can have negative effects on many areas of child development. Delayed and disordered development are a result of an abusive or neglectful environment. Research on the interactional environment of maltreated infants found that they are exposed to a different style of interaction than nonmaltreated infants. This interaction is less stimulating, less active, and more negative. XIVI Data has also demonstrated developmental deficiencies for sexually abused children due in part to the internalizing of problems by the children. XIVIII

Children with disabilities are at greater risk for abuse not only because they are sometimes less able to articulate that they were abused but also because most professionals are not versed in working with disabled children. A survey of 165 trainers of health, social work, police, and education professionals revealed that less than one-third of the trainers addressed the abuse of children who are disabled. Even fewer of the respondents reported that they specifically discussed learning disabilities in their training programs. The trainers did not feel competent to develop training programs about children with learning disabilities.

### Foster Care

Foster care is costly socially as well as fiscally. Children in foster care often have emotional and behavioral troubles that lead to expensive social problems such as dropping out of school, teen pregnancy, homelessness, unemployment, criminal activity, incarceration and welfare dependency. Aside from these indirect costs, states and the federal government spend about \$7 billion annually on foster care. Xlix

A study by the Bureau of Justice on childhood abuse in inmates found that abuse was most common among prisoners who had lived in foster care. Research studies over the past 20 years have firmly established that children in foster care represent a high-risk population for poor outcomes including socio-emotional, behavioral, and psychiatric problems. It

Entrance into the foster care system is often a result of child abuse or maltreatment. The largest group is children between the ages 0 to 5. This group enters the system at about twice the rate of children ages 6 and older. Research has found that half the children in foster care have "adaptive functioning scores in the problematic range." Among children in the 0 to 6 age group, 50-65% are developmentally problematic; among 2 to 17 year-olds, 50-60% have behavior problems; and among 6 to 17 year-old, approximately 40% have moderate impairments. It

According to the New York State Office of Children and Family Services (OCFS), of the 52,270 children in foster care as of December 31, 1997, the median stay was about 3 years compared to 2 years nationally, and double what it was in 1993. In December 1999, there were 47,761 children in foster care in New York State. Compounding the problem of entering the foster care system damaged, we know that some children continue to be victims of abuse in foster care.

### Homelessness

Over the last decade the homeless population has increased with a growing number of women and children. Today, children make up the largest population of homeless persons. It is difficult to ascertain an exact number of homeless people at any given time. Generally, figures are based on the number of people seeking shelters at a given time. This however, does not account for all homeless since many of them never visit shelters. In November of 2000, New York City sheltered about 7,400 single adults and about 5,500 families. In upstate New York, the figures were 2,400 and 1,542 respectively.

A recent study compared homeless women who had childhood histories of foster care or other out-of-home placement to those who have not. One third of homeless women reported

being raised apart from their parents. Among women with children under the age of eighteen, 61.5% had children who had lived in foster care or other out-of-home care. Variables associated with homeless mothers' children living in foster care or other out-of-home placement were if the mother had an alcohol or drug problem, had been sexually abused as a child, and/or ran away from home as a child. Itil

Adverse childhood experiences are powerful risk factors for adult homelessness. Lack of parental care during childhood can sharply increase the probability of subsequent homelessness. The likelihood of homelessness among individuals who experience a lack of care and abuse increases tremendously. In addition, the children of homeless adults who were abused as children likewise are often homeless. Effectively reducing child abuse and neglect may help to prevent homelessness.

### Teen and Single Mothers

Teenage childbearing often decreases opportunities for both mother and child. Most mothers under the age of 18 are unmarried, have not completed high school, and are not settled into a job. Many young fathers are unable to provide financial assistance for the child. On average, the children of teen mothers are less healthy, more likely to suffer child abuse and be placed in foster care, more likely to engage in criminal behavior, and less likely to be economically and socially successful as adults. According to the Census Bureau, in 1995 only 3% of mothers age 15 to 17 received child support payments. Eight to 12 years after birth, a child born to an unmarried, teenage, high school dropout is 10 times more likely to be living in poverty as a child born to a mother without these characteristics. Iv

Child sexual abuse seems to be a risk factor for earlier pregnancy among adolescents. Ivi Studies have concluded that most infant homicides are committed by parents or stepparents. Half the homicides are committed within the first month of life. The most important risk factors for infant homicide are teenage mothers, teenage mothers with more than one child, and teenage mothers that have not completed high school. Ivii

In 1998, there were almost 485,000 babies born to teenagers 15 to 19 years of age, a birth rate of 51.1 live births per thousand women this age. The number of teenage mothers from age 15 to 19 in New York State was about 47,500 in 1998. States have reported some decline in the number of teen pregnancies due in part to safer sexual practices. While the teen birth rate has declined, the percent of unmarried teen mothers has increased considerably.

### Child and Adult Prostitution

Child prostitution has only received attention as a major public concern in the last few decades. It is one of the most overlooked forms of child abuse, due in part to the misconception that child prostitutes are willing participants in their own victimization. Viii End Child Prostitution, Child pornography, and the Trafficking of Children for Sexual Exploitation (ECPAT) has estimated that there are between 100,000 and 300,000 children sexually exploited through prostitution and pornography in the United States. Iix

Child prostitutes are victims of sexual abuse, often unwilling and underage participants forced to engage in sexual acts. Some of them have run away from homes where they have been sexually or physically abused. Some come from families who no longer want them or who feel they can no longer handle them. These children often see themselves as their only supporter. Under such circumstances, they fall into prostitution as a way to survive or as a way to get the things they need. Unfortunately, these victims often become involved in the criminal justice system as offenders. In order to support themselves, or to escape the life that they have come to lead, they often get involved in the use and/or sale of drugs, theft, or robberies. It is through such actions that prostitution affects all of us.

A study examining the antecedents to prostitution and the long-term consequences of child abuse found the following: 78% of women reported starting prostitution as juveniles; extremely high levels of sexual child abuse were found in their backgrounds; the mean age at the time of first victimization was 10; in 82% of the cases, some force was used; 70% reported that the sexual abuse definitely affected their decision to be a prostitute; and 90% of them were juvenile runaways.<sup>[xi]</sup>

### **Public Assistance**

A study of the intergenerational cycle of child abuse and neglect found adults that suffered abuse during childhood to be significantly more likely than nonabused subjects to be receiving public assistance. Likii A 1992 study found that 38% of women on public assistance were sexually abused as children. The report concluded that women on public assistance who were sexually abused as children had an elevated risk of being sexually active at an early age, and were more likely to become pregnant adolescents and adolescent mothers leading to reliance on public assistance.

Programs or policies that are able to prevent or mitigate the effects of childhood abuse may also lessen early sexual activity, dropping out of school, adolescent pregnancy and childbirth, and welfare dependency. Conclusions from other studies indicate that child sexual abuse adversely affects one's annual earnings due to the numerous other consequences associated with the abuse (e.g. mental/health impairments, criminal activity, and homelessness) and therefore makes one more likely to depend on public assistance. being

According to the New York State Office of Temporary and Disability Assistance, in 2002, there were more than 2.6 million public assistance recipients in New York State including people receiving temporary assistance, food stamps and Supplemental Security Income (SSI). In addition to the aforementioned public assistance programs, most public assistance recipients qualify for Medicaid assistance a major expense in New York State exceeding \$38 billion, including federal aid.

Child abuse prevention programs could prove cost-effective to New York State by holding down public assistance reliance by parents who are unable to work due to being caught in the legal system or child protective system as well as the reliance by adult child abuse victims still suffering from the effects of the abuse.

### CONCLUSION

The costs of child abuse and neglect are borne not only by the abused children, but by society as well. Like most states, New York spends a considerable amount of fiscal and human resources to treat the numerous consequences of child abuse and maltreatment. Generally. State level implementation of the federal Child Abuse Prevention and Treatment Act (CAPTA) has emphasized treatment over prevention. The costs of operating foster care, police protection, medical attention, incarceration and drug and alcohol abuse treatment could be greatly reduced by taking steps to prevent the abuse and maltreatment of children.

We cannot afford to fail to prevent children's maltreatment. We cannot afford it in terms of human suffering and we cannot afford it in terms of the financial cost to our state and country. Prevent Child Abuse New York calls upon the great institutions in New York State government and philanthropy to significantly increase their investment in prevention and halt the epidemic of child abuse.

Aside from the economic costs associated with child abuse and neglect, it is impossible to overstate the tragic consequences endured by the children themselves. Each year, more than three million children are reported as abused or neglected in the United States. And three children die each day from abuse and neglect in this country. The costs of the human suffering some children experience at the hands of those responsible for protecting them is incalculable.

While it is impossible to determine exactly what percentage of New York State expenditures are directly attributable to child abuse, Table 1 provides detail on some of the expenditures made by New York State for specific related purposes. Funds from these agencies are used to treat the direct and indirect consequences of child abuse and neglect. Table 2 demonstrates the lack of investment in child abuse prevention when compared to other health epidemics and Tables 3 and 4 make estimates of some of the costs to New York State due to the effects of child abuse and maltreatment. As the tables indicate, the estimated costs of child abuse and neglect to New York State exceeds \$2.4 Billion annually.

Effective prevention programs that promote the safety and well-being of children and families can reduce the suffering of children, assist parents in developing better parenting skills and reduce the economic costs to society. The total financial costs of child abuse and neglect are quite high. But the benefits or savings from investing in prevention programs also are quite high.

Many prevention programs address not only child abuse prevention but other aspects of family dynamics that threaten child and family well-being. These threats include preventable health conditions such as low birthweight, infant mortality, drug-addicted babies and more. In addition, these threats are often elements associated with child abuse and neglect. These programs often provide referrals, education, expertise, and most importantly stability for at-risk families.

Trust Fund and the Healthy Families New York Home Visiting Program (HFNY). The Trust Fund was established in 1984 to provide funding for the prevention and treatment of family violence. It is funded through an annual appropriation in the State Budget. The majority of children served by Trust Fund dollars are the State's youngest and most vulnerable to child abuse (under 5 years of age). Funds are awarded on a competitive basis across the state, with consideration given to the geographic areas with the greatest need. In 2000, Trust Fund prevention programs targeted 38 counties, including four New York City boroughs. Unfortunately, State Appropriations have dropped by \$381,400 from year 2000 to 2002, making it impossible to expand programs to the many families in need. According to Governor Pataki, "The Hoyt Memorial Trust Fund grants are tremendous assets in our efforts to end child abuse, domestic violence and elder abuse so that no child, spouse or elderly New Yorker has to fear their own family members."

The Healthy Families New York Home Visiting Program is a voluntary program provided by public and private community organizations that promote positive growth and development to give families a healthy start. HFNY promotes positive parenting skills and parent-child interaction, thereby preventing child abuse and neglect and reducing out-of-home placement. New York's effort is part of a nationwide program entitled Healthy Families America (HFA), a program of Prevent Child Abuse America. Families who have been participated in the HFNY Program have revealed numerous positive outcomes including: less emergency room visits; more timely child immunizations; better parent-child relationships; and better infant care by parents. A study of the nurse home visiting program in Elmira, New York found that child abuse and neglect reports declined for families participating in the program. A cost-effective analysis component of the study demonstrated that program costs for operating the program were significantly lower than the State expenditures to similar at-risk families not participating in the program. Unfortunately, due to insufficient funding, HFNY is only available to a fraction of children and families in need Statewide.

The WBHM Children and Family Trust Fund and the Healthy Families New York Home Visiting Program are two programs that have worked to reduce the incidence of child abuse, while lessoning the fiscal burden on New York State. Greater availability of these services and support for other promising child abuse prevention programs would ensure the safety of many more children in New York, build stronger families and work towards saving New York government from making unnecessary expenditures in crime, health care, public assistance and more.

### TABLE 1

# 2000-01 New York State Budget Appropriations for Services to Treat the Outcomes of Child Abuse and Neglect\*

(Percentage directly attributable to child maltreatment is not reflected here.

Refer to Tables 3 and 4 for estimates)

| Crime   | sumates)                |
|---|-------------------------|
| Division of Probation and Correctional Alternatives     |                         |
| Office for the Prevention of Domestic Violence          | \$90,959,300            |
| Capital Defender Office                                 | \$2,519,000             |
| Commission on Corrections                               | \$15,197,500            |
|   | \$2,327,000             |
| Department of Correctional Services Crime Victims Board | \$2,168,096,400         |
|   | \$55,794,300            |
| Division of Criminal Justice Services                   | \$217,098,950           |
| Division of State Police                                | \$378,224,400           |
| Division of Parole                                      | \$192,864,500           |
| Subtotal  | \$3,123,081,350         |
| Health  | 1 0 3,2 2 3,0 0 2,0 2 0 |
| Early Intervention Services (0-3 year-olds)             | 0125 020 025            |
| HIV/AIDS  | \$135,000,000           |
| Subtotal  | \$113,997,200           |
| Mental Health   | \$248,997,200           |
|   |                         |
| Office of Alcoholism and Substance Abuse                | \$498,976,000           |
| Office of Mental Health                                 | \$1,973,409,000         |
| Subtotal  | \$2,472,385,000         |
| Education   |                         |
| Preschool Special Education                             | #550.000.000            |
| Public Excess Cost Aid (Students w/disabilities)        | \$552,000,000           |
| Private Excess Cost Aid (Students w/disabilities)       | \$1,808,760,000         |
| Subtotal (Statement Wassabilities)                      | \$151,170,000           |
|   | \$2,511,930,000         |
| Family Assistance                                       |                         |
| ** Children and Family services                         | \$2,095,502,700         |
| Total Appropriated                                      |                         |
| One Persont to Bernand Claus                            | \$10,451,896,250        |
| One Percent to Prevent Child Abuse and Neglect          | \$104.5 million         |

may include some federal funds

<sup>\*\*</sup> does not include the WBHM Children & Family Trust Fund (\$1 million) or Healthy Families New York Home Visiting (\$16.4 million) since these are preventive measures. After-school program funding also is excluded. Note: Additional costs to society for preventing child abuse including public assistance, hospitalizations, Medicaid, teen pregnancy, lost labor and productivity and court expenses are not included here.

|                     |   | BLE 2                                   |                                   |
|---------------------|---|---|-----------------------------------|
| Public Health Issue | Estimated Number of<br>Americans Affected | FY 2000 Federal<br>Spending on Research | Spending Per<br>Affected American |
| HIV/AIDS            | 393,045                                   | \$1.8 billion                           |                                   |
| Cancer              | 757,600                                   | \$3.3 billion                           | \$4,665                           |
| Alcohol Abuse       | 3,100,000                                 | \$293 billion                           | \$4,398                           |
| Drug Abuse          | 13,000,000                                | \$689 million                           | \$95                              |
| Heart Disease       | 59,700,000                                | \$2 billion                             | \$453                             |
| Child Abuse         | 3,154,000 America: Voices of Three Mills  | C20 million                             | \$34<br>\$10                      |

Source: Prevent Child Abuse America: Voices of Three Million Abused and Neglected Children So Far Unheard in 2000 Election Season. October 16, 2000.

| TABLE 3  |                         |
|--|-------------------------|
| DIRECT COSTS OF CHILD ABUSE AND NEGLECT  | *ESTIMATED ANNUAL COSTS |
| Hospitalization/Medical Examinations   |                         |
| 4,532 children received injuries in 2000 as a result of abuse. According to Department of Health figures, the average cost of treatment for a traumatic injury to a child in 1999 was \$4,022.30. Generally, abused and maltreated children are examined by a physician upon the discovery of abuse. A conservative estimate would be assuming that of the substantiated cases in New York, those not being treated for injuries above would require at least an examination at a minimal cost of \$100. | \$22,670,964            |
| Chronic Health Problems  30% of maltreated children suffer chronic medical problems. The cost of treating a child per incident (for a common problem like asthma) in the hospital is \$6,410.  | \$135,286,896           |
| Mental Health Care  One of the costs to the mental health care system is counseling. Estimated cost per family for counseling in \$2,860. <sup>2</sup> About one in five abused children receives these services.  | \$40,241,344            |
| Child Protection Includes abuse investigations, protective services, and operation of the SCR: (NYS Budget, Ch.53, 2000)   | \$174,357,265           |
| Foster Care/Adoption 57.3% of children in foster care in New York in 1999 were there as a result of child protective services or prevention services. <sup>3</sup>   | \$686,812,9564          |
| Judicial System Approximately 16% of child abuse victims have court action on their behalf. <sup>5</sup>   | \$15,443,671            |
| Total Direct Costs   | \$1,074,813,096         |

<sup>&</sup>lt;sup>1</sup> Hammerle (1992) as cited in Myles, K.T. (2001) Disabilities Caused by Child Maltreatment: Incidence, Prevalence and

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<sup>2</sup> Daro, D. Confronting Child Abuse (New York, NY: The Free Press, 1988). In New York State, 44,419 children were found to have been abused or maltreated in 1999.

<sup>3</sup> New York State Office of Children and Family Services, Government Relations Office.

<sup>4</sup> NYS Budget, Department of Family Assistance (Ch.53, 2000)

<sup>5</sup> Dallas Commission on Children and Youth (1988) concluded that the average cost per court action was \$1,372.34.

| TABLE 4  |                             |
|--|-----------------------------|
| INDIRECT COSTS OF CHILD ABUSE AND NEGLECT  | *Estimated<br>Annual Cost   |
| Special Education  |                             |
| More than 22% of abused children have a learning disorder that requires special education services. The additional instructional cost associated with educating such a child is an additional \$7,108 per pupil per year in New York State. This does not include transportation and other additional costs. | \$110,013,644               |
| Juvenile Delinquency Studies have indicated that it was a second costs.  |                             |
| Studies have indicated that about 50% of juvenile delinquents have substantiated histories of being abused. <sup>7</sup>   | \$84,498,102 <sup>8</sup>   |
| Adult Criminality  | 907,770,102                 |
| Numerous studies have demonstrated a cause and effect relationship between abuse as a child and adult criminal behavior in later life. A conservative estimate is that 10% of all crime can be linked to child maltreatment and abuse.   | \$312,056,235°              |
| Alcohol and Substance Abuse  |                             |
| About 66% of people in treatment for substance abuse report they were abused as children. 10   | \$329,324,160 <sup>11</sup> |
| Domestic Violence  |                             |
| About 33% of family abusers were themselves abused as children. 12   | \$15,928,762 <sup>13</sup>  |
| Public Assistance  | WAD9/209/02                 |
| Based on an estimate that 10% of the costs of public assistance costs are attributable to child abuse and maltreatment.  | \$405 C52 00 c14            |
|  | \$497,673,806 <sup>14</sup> |
| Total Indirect Costs   | \$1,349,494,709             |

### Notes:

Figures in tables use an estimate of 16 children per thousand are victims of abuse in New York State. The figure is based on statistics compiled by the U.S. Department of Health and Human Services using New York State data. Based on population figures, there are at least 70,352 children that are victims of child abuse each year.

\*The cost estimates are based on scientific studies and the use of conservative estimates when exact statistics are unavailable. In all likelihood, the financial costs to new York far exceeds the total direct and indirect costs in these tables since certain costs such as Medicaid (where New York State spends in excess of \$38 billion each year including federal and local money), lost productivity, police costs for abuse allegations/investigations, other health costs and adolescent pregnancy are not included. Additionally, many local and federal fiscal costs as well as personal expenses are not included here as well.

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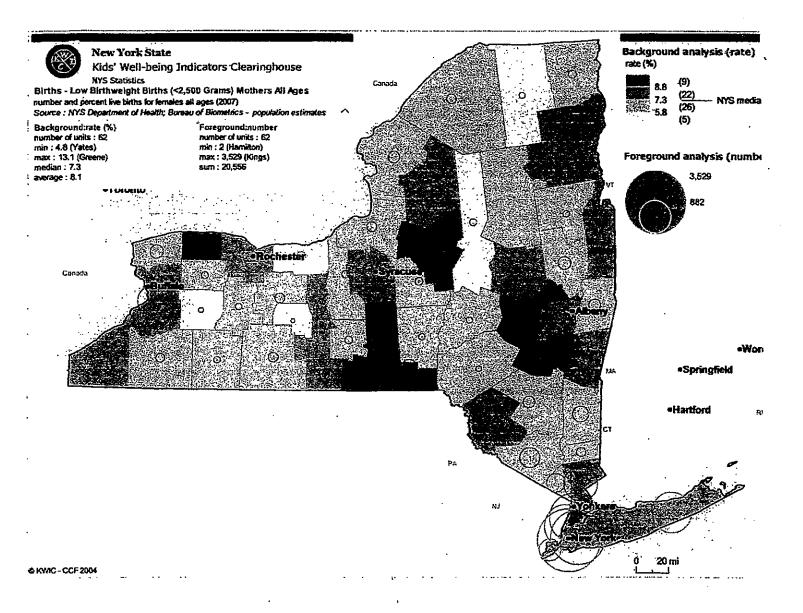
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# NUTRITION CONSORTIUM of NYS

## Joint Legislative Hearing on the New York State Human Services Budget February 10, 2010

Prepared by Casey Dinkin, Manager of Advocacy and Communications
Nutrition Consortium of NYS

Thank you to Senator Kruger and the Senate Finance Committee, Senator Squadron and the Senate Social Services Committee, Assemblyman Farrell and the Assembly Ways and Means Committee, and Assemblyman Wright and the Assembly Social Services Committee, for having this hearing today, and for affording the opportunity to testify. The Nutrition Consortium is a statewide, nonprofit organization dedicated to alleviating hunger for residents of NYS. To do this, we focus on maximizing participation in governmental nutrition assistance programs, such as the federally-funded Food Stamp Program.

One of New York's cost effective, state-funded initiatives to increase access to nutrition assistance programs by eligible populations is the Nutrition Outreach and Education Program (NOEP). NOEP is federally matched dollar for dollar by the United States Department of Agriculture (USDA). NOEP serves 45 service areas throughout NYS—32 upstate counties, including Long Island, and 13 areas in NYC. NOEP provides outreach, education, and application assistance to help eligible individuals learn about and enroll in the federally-funded Food Stamp Program.

Last year, NOEP helped 27,000 households across NYS to enroll in the Food Stamp Program. Since food stamp benefits are 100% federally-funded, this brought more than \$65 million in federal food stamp dollars into New York State's economy.

In addition to its economic benefits to NYS, NOEP assists OTDA by being the "on the ground partner" in implementing and publicizing new initiatives such as mybenefits gov, the Working Families Food Stamp Initiative, and the electronic food stamp application. As OTDA seeks to maximize the impact of its access and eligibility improvements, NOEP services ensure that community residents learn about, and benefit from, these initiatives.

In the 2010-2011 proposed budget, administration of NOEP has been transferred to OTDA from the DOH. NOEP funding, which was previously split between OTDA and DOH, has been transferred entirely to OTDA. Since both OTDA and DOH are longstanding and supportive partners of the Nutrition Consortium and NOEP, we believe that NOEP will continue to operate successfully with this transfer in administration and funding.

However, the 2010-2011 proposed budget also includes a \$142,000 cut to NOEP, which will be detrimental to the program's results. With this cut, the program also loses \$142,000 in federal USDA matching money, and this cut represents a loss of 4 NOEP service areas. This translates to more than 2,000 households that will not receive application assistance through NOEP, and \$7 million in food stamp benefits that will not come in to New York's grocery stores. For a savings of \$142,000, the state loses \$7.1 million—about 50 times the amount it saved.

Given that the program has experienced a 30% increase in demand due to the economic downtown, and in keeping with New York State's goal of maximizing federal dollars, we ask the Legislature to restore this cut, bringing NOEP funding to its previous level of \$1.83 million. We also recommend that the state expand NOEP so that it can adequately serve NYS, including all upstate counties, and a significant increase in NYC. To do so would require a state investment of \$4 million, and would bring a projected \$186 million in federal food stamp benefits into NYS.

The Nutrition Consortium fully supports the state's \$504 million investment in food stamp administrative funding. With record increases in demand for food stamps, maintaining the program's infrastructure by providing an adequate number of caseworkers, technology, and support, is essential to meeting the increased demand for benefits.

We also recommend, as a cost savings measure, that the legislature pass bill A1681/S6291, which would eliminate finger imaging for food stamp applicants. There is no federal requirement for finger imaging of food stamp applicants, but the state can choose to allow it, and must pay for half of the associated costs. New York is only one of four states which utilizes finger imaging for food stamps. Finger imaging is not an effective way of preventing duplicate application, and has an unintended consequence of deterring eligible people from applying. Given the current budget deficit, NYS should pass legislation that eliminates this unnecessary and ineffective process, and save the state millions of dollars.

Thanks again for holding this hearing, and for the Legislature's continued leadership towards a New York State where all residents have access to adequate food and nutrition.



# United Way of New York State

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# <u>Testimony of United Way of New York State</u> Joint Fiscal Committees Human Services Budget Hearing

We are here today to request your support for restoring certain human services funding that has been reduced or eliminated in Governor Paterson's budget proposal. No one doubts the revenue freefall and resulting blow to the state's finances, as a reflection of the wider national economic downturn. We recognize that the pressures on the state's cash flow, current budget commitments and the new state budget have never been greater.

In addition, we will ask for your support for 2-1-1; an easy-to-remember number for anyone to call for non-emergency health and human services information and referral; that will increase services to New Yorkers and save the state significant money.

As legislators, you know that these same factors are affecting families across

New York State. You hear from them on a daily basis: Food stamp applications
are up along with unemployment rates, more people than ever are seeking help
from food panties and soup kitchens, and are requesting home heating aid.

People who never needed help before are reaching out in record numbers as demonstrated by the 2.78 million referrals made by 2-1-1 call centers during 2009, almost one million more than all of 2008.

While the state is required to balance revenues and expenses, surely the budget must be more than mere numbers, signaling to the public what programs, services and tax policies are most important. United Ways believe that the budget should reflect two important additional priorities:

- Ensuring that those New Yorkers who need help, many who never needed help before, get the assistance that they need, and
- Continuing the state's investment in those prevention programs whose value has been documented, thereby protecting the foundation of cost savings to the state for years to come.

Therefore we recommend the following <u>restorations</u> to programs that meet these criteria:

- Community Optional Preventive Services (COPS) \$2.9 million
- Home Visiting \$6.02 million
- Nurse Family Partnership \$5 million.

With only 11% of at risk children currently being served by home visitation programs, this is not the time to reduce these services which significantly improve pregnancy outcomes, child health and development, parent skills, child safety and family economic self-sufficiency, resulting in significant savings to the state.

Cutting these programs will have a serious and detrimental effect on the most vulnerable children and families they serve. Extensive research over the past 30-years on home visitation programs and families served in New York State, clearly documents their impact on reducing child abuse and neglect, as well as children's eventual involvement in the criminal justice system.

Nutrition Outreach Education Program (NOEP) - \$150,000. This program is also slated to move from the Department of Health (DOH) to the Office of Temporary and Disability Assistance (OTDA). If the program remained at DOH it would be eligible for the human services COLA, but at OTDA it will lose this benefit. We urge you to also include funding to continue the COLA in the budget at a cost of \$300,000. NOEP has been highly successful in increasing the number of eligible New Yorkers receiving food stamps.

Advantage After-School - \$10.91 million. This program provides after school services for school age children, so that their parents can work. Why would the state significantly cut funding for these programs in the after school hours, which have been documented as the time during which students are most likely to engage in risky behavior?

### 2-1-1 - \$4.4 million

The cost for the state share of 2-1-1 can be financed by the Governor's recent proposal to consolidate 350 state hotlines, a proposal United Way and 2-1-1 recommended to the Administration two years ago. These actions will result in

savings in telecommunications, database development and maintenance, and promotion costs.

Preliminary results from a study of state toll free numbers by the Office of the State Comptroller uncovered a cost of \$4.5 million for telecommunications expenses *alone*, for the first six months of 2009 by over 200 state agency facilities. At an annual cost of \$9 million, this supports our recommendation for sharing some of the savings from the Governor's consolidation plan with 2-1-1. In fact, investing \$4.4 million in 2-1-1 will save the state even more.

Last year's 2.78 million referrals, (compared to 1.8 million in all of 2008) reflect double digit increases in requests for help with human services problems over last year.

Without 2-1-1's continued presence, what agency or organization is prepared to provide the help that is needed now by so many New Yorkers, at that scale?

### A \$4.4 million State budget appropriate will support:

- Continuation of 2-1-1's six operating call centers year-round, 24/7 and which provide language translation service to support New York's diverse population.
- Extension of 2-1-1 service to those counties not yet served, resulting in a true state-wide system.
- Access for New York's residents to 2-1-1 databases on the web, 24/7 as well as via the phone.
- The ability to partner with state agencies on outreach, information,
   referrals, public benefits screening, and assistance with disaster relief and
   response.

Over three budget years from 2006-2009, the Legislature supported \$13 million for 2-1-1 development and services in partnership with funding from United Ways, local governments and other private sources. The result: High utilization of 2-1-1 services which are available to 93% of the state's population, as evidenced by over 2.78 million referrals by 2-1-1 in 2009, a jump of one million over the year before.

Let me repeat, these referrals reflect double digit increases in requests for help with human services problems over last year, including: basic needs - up 40%, health care - up 41%, finding employment or temporary financial assistance up 56%, and mental health services - up 71%.

Last year's state budget provided no funding for 2-1-1. Without state funding in the 2010-11 budget, the continued availability of this service is in serious jeopardy.

<u>EITC Outreach</u> - In addition to the restorations noted above, we request \$30,000 to match funding received by United Way of New York State from the Bank of America for outreach to New Yorkers eligible for the Earned Income Tax Credit. About 25% of those eligible for this credit in New York State do not receive it, leaving \$825 million unclaimed *annually*. In the past two years OTDA has provided a small matching grant to support outreach work in communities across the state. However, funding to support this outreach is not in the budget.

EITC refunds provide additional earned revenue for low income working families, are spent in the communities in which they live and work, providing a boost to local businesses, and a much needed sales tax increase for state and local governments as well.

We urge you to include these programs in the final budget, in reflection of the Legislature's continued commitment to New Yorkers who need their help, and to results driven, prevention programs.

Susan K. Hager, President United Way of New York State

### Attachments:

2-1-1 Budget Request – by funding for each region 2010 State Map of 2-1-1 Services 2009 Referrals Breakdown EITC/2-1-1 Outreach Poster

| 2-1-1:NY 2010-2011 Budget Request Summary. | Population Counties Served Total State Start-up Costs Request (included in Total Request) |              | 2,282,116 Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester | 2,863,849 Suffolk, Nassau  S476,923 Call center and database services updates are being provided under a contract between the United Way of Long Island with 2-1-1 Hudson Valley. Services will be live October 1, 2009 with a public launch December 1, 2009. | 170,294 Franklin, Clinton & \$97,173 Essex | 363,556 Oneida, Herkimer, Madison \$221,747 \$92,729 | 8,363,710 Bronx, New York, Richmond, Kings, \$400,000 Queens | 1,202,416 Albany, Columbia, \$467,526 Fulton, Greene, Hamilton, Montgomery, Rensselaer, Saratoga, Schenectady, Schenectady, Washineton | 245 180            |
|--|---|--------------|---|--|--|--|--|--|--------------------|
|  | Populatio   | 1,484,575    | 2,282,116   | 2,863,849  | 170,294                                    | 363,556  | 8,363,710  |  | 245,189            |
|  | 2-1-1 Region  | Finger Lakes | Hudson Valley   | Long Island  | North Country                              | Leatherstocking<br>Region                            | New York City  | Northeastern<br>New York<br>(Capital Region)   | Suscinehanna River |

| は、現代の事が出るという。   |            |  | 2-1-1 NV               | 2010-2011 Budge   | 1 NY 2010-2011 Budget Request Summary   |
|---|------------|--|------------------------|---|---|
|   | Population | Counties Served  | Total State<br>Request | One Time or<br>Start-up Costs<br>(included in Total<br>Request) | Comments  |
| Western New York  | 1,265,917  | Erie, Genesee,<br>Niagara, Orleans,<br>Wyonning  | \$653,620              | 000'0E\$  | Funding will support call center in Buffalo located in Brie County's Public Safety building, and managed by Central Referral Services in partnership with the United Way of Buffalo and Erie County. Also included is the one time cost to begin services to Genesee County.  |
| Western New York<br>Partnersite                                 | 213,477    | Chautauqua,<br>Cattaraugus   | \$77,061               | ,   | Funding will support the 2-1-1 Western New York partner site located at the United Way of Southern Chautauqua County in Jamestown.  |
| Bringing 2-1-1<br>services to<br>Counties not<br>already served | 1,035,198  | Cortland, Jefferson,<br>Lewis, Onondaga,<br>Oswego, St. Lawrence,<br>Chenango, Otsego,<br>Delaware | \$596,736              | \$248,618   | Funding will provide 2-1-1 services to counties that do not have services, under contract with an already designated region. Costs to develop the initial database and the cost to "turn on" the service are shown as "one time".   |
| 2-1-1 NY<br>Statewide Services<br>and Oversight                 | N/A        | N/A  | \$1.55,956             |   | Funding will support full time executive assistant, 2 days/week of the grants coordinator, training, travel, and meetings, as well as UWNYS support for 2-1-1 services in the absence of a statewide director, and support for the start-up of the 2-1-1 New York subsidiary and its Board. Based on emergencies from the past two years which have strained existing resources, a contingency fund of \$50,000 is also included, just over 1% of the total request, to be used to address requests from the call centers or partner sites for emergency staffing, or other unanticipated costs as a result of a weather, health or other disaster related emergency. |
| Statewide Totals  | 19,490,297 | 62 Counties  | \$4,444,606            | \$443,999   | Funding will support existing call centers and partner sites including database development and updates, will bring 2-1-1 to counties which currently lack the service, support 2-1-1 statewide services, and provide for contingency funding to address emergencies or other unanticipated costs.  |
| Optional Quality Enhancements                                   | Enhancemer | ıts  |                        |   |   |
| CGR Performance<br>Evaluation                                   |            |  |                        | \$20,000  | This funding would complete the statewide evaluation begun through the Center for Governmental Research (CGR). The evaluation is half way complete but was halted due to loss of state funding. Tasks completed included the interviews with each 2-1-1 call center director, development of the evaluation plan and training the regions on the evaluation process. The funding will support compiling the data, its analysis and a report with findings and recommendations.  |
| Statewide<br>Marketing  |            | ·  | -                      | \$100,000   | Bach region has requested funding for marketing, however additional funding could be used to support the marketing of 2-1-1 as a way to access such public benefits as child health insurance, the Earned Income Tax Credit and the Medicaid buy-in for the disabled. In an emergency this funding could support messages to call 2-1-1 to avoid an influx of calls to 911.   |

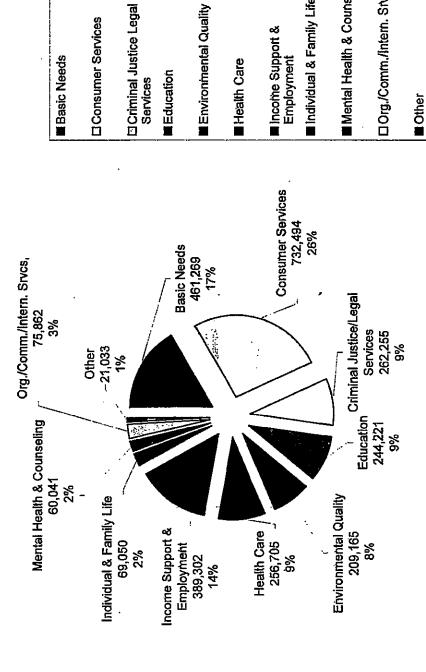
2010

# \*2-1-1 Service Available By County

| Albany County*               | Oneida County         | NYC             |
|------------------------------|-----------------------|-----------------|
| Allegany County *            | Onondaga County       | •Bronx*         |
| Broome County *              | Ontario County *      | •Brooklyn*      |
| Cattaraugus County *         | Orange County *       | •Manhattan*     |
| Cayuga County *              | Orleans County        | •Queens*        |
| Chautauqua County *          | Oswego County         | •Staten Island* |
| Chemung County *             | Otsego County         |                 |
| Chenango County              | Putnam County *       |                 |
| Clinton County*              | Rensselaer County*    |                 |
| Columbia County*             | Rockland County *     |                 |
| Cortland County (Some areas) | Saint Lawrence County |                 |
| Delaware County              | Saratoga County*      |                 |
| Dutchess County *            | Schenectady County*   |                 |
| Erie County *                | Schoharie County*     |                 |
| Essex County*                | Schuyler County *     |                 |
| Franklin County*             | Seneca County *       |                 |
| Fulton County*               | Steuben County *      | •               |
| Genesee County               | Suffolk County *      |                 |
| Greene County*               | Sullivan County *     |                 |
| Hamilton County*             | Tioga County *        |                 |
| Herkimer County              | Tompkins County *     |                 |
| Jefferson County             | Ulster County *       |                 |
| Lewis County                 | Warren County*        |                 |
| Livingston County *          | Washington County*    | •               |
| Madison County               | Wayne County *        |                 |
| Monroe County *              | Westchester County *  |                 |
| Montgomery County*           | Wyoming County *      |                 |
| Nassau County *              | Yates County *        |                 |
| Niagara County *             |                       | •               |



# January 1 through December 31, 2009 2-1-1 NY Total Referrals 2,781,397



■ Environmental Quality

■ Education

☐ Consumer Services

■ Basic Needs

■ Mental Health & Counseling

Individual & Family Life

□ Org./Comm./Intern. Srvcs

Basic Needs Programs that furnish survival level resources including food, housing, material goods, transportation and temporary financial assistance for individuals with low or fixed incomes, people who are homeless, older adults and/or people with disabilities who are otherwise unable to adequately provide for themselves and their families. Also included are related services that are available to the community at large.

Criminal Justice and Legal Services Programs that promote and preserve the conditions that enable community residents to live in a safe and peaceful environment through the enforcement of laws that protect life and property and the administration of justice according to the principles of law and equity. Included are crime prevention programs as well as programs that investigate and make arrests for criminal behavior, provide support for witnesses to and victims of crimes; and provide for the arraignment, prosecution and defense, judgment, sentencing, confinement and eventual release and resettlement of offenders.

Consumer Services Programs that provide for the education and protection of individuals who purchase, use, maintain and dispose of products and services. Included are programs that establish and/or enforce pricing policies, credit reporting and debt collection practices, quality and safety standards for goods and services and other trade practices that affect the consumer; programs that provide information and/or counseling to help consumers manage their finances and make informed credit and purchasing decisions; and programs that provide access for consumers to fair hearings, mediation or binding arbitration when they have complaints regarding consumer products and services and to appropriate remedies when their complaints are justified.

Education Programs that provide opportunities for people to acquire the knowledge, skills, desirable qualities of behavior and character, wisdom and general competence that will enable them to fully participate in and enjoy the social, political, economic and intellectual life of the community.

Environmental Quality Programs that preserve protect and, where possible, improve both the natural and built aspects of the physical environment and/or which develop and implement measures for accident prevention and intervention in the case of emergencies in order to promote public health and safety and enable people to live in ecological balance and harmony with their surroundings.

Health Care Programs whose primary purpose is to help individuals and families achieve and maintain physical well-being through the study, prevention, screening, evaluation and treatment of people who have illnesses, injuries, disabilities or substance abuse problems; and the provision of family planning, maternity and other services that relate to human reproduction and sexual health.

Income Security Programs that help to meet the economic needs of the community by helping residents prepare for, find and sustain gainful employment; providing public assistance and support for those who are eligible; and ensuring that retirees, older adults, people with disabilities and other eligible individuals receive the social insurance benefits to which they are entitled.

Individual and Family Life Programs that promote the personal, social and spiritual development of people in the community by providing services that replace or supplement the care and support that is generally available through the family unit, and by offering social, religious/spiritual and leisure-time activities that are personally satisfying and lead to optimal social functioning.

Mental Health Care and Counseling Programs that provide preventive, diagnostic and treatment services in a variety of community and hospital-based settings to help people achieve, maintain and enhance a state of emotional well-being, personal empowerment and the skills to cope with everyday demands without excessive stress. Treatment may include emotional.

Organizational/Community Services Programs that facilitate the settlement of new residents in the community, assure that travelers' needs are met, marshal community resources on behalf of disadvantaged residents, provide for volunteer development, assure the availability of adequate space for meetings and service delivery, provide centralized administrative services, provide outlets for financial transactions, offer access to office equipment, manage the delivery of mail, encourage participation in the political process, administer services associated with the armed forces, and/or offer other similar services for community residents.

Other Calls that do not fit into traditional AIRS Taxonomy categories and calls that did not result in referrals.



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# TESTIMONY OF THE NEW YORK STATE CATHOLIC CONFERENCE

### REGARDING THE 2010-2011 HUMAN SERVICES BUDGET

### PRESENTED ON BEHALF OF THE COUNCIL OF CATHOLIC CHARITIES DIRECTORS BY

EARL EICHELBERGER
DIRECTOR FOR CATHOLIC CHARITIES
NEW YORK STATE
CATHOLIC CONFERENCE

Albany, New York February 10, 2010

### Introduction

Good afternoon! My name is Earl Eichelberger and I serve as the Director for Catholic Charities at the New York State Catholic Conference and Executive Secretary to the New York State Council of Catholic Charities Directors. The New York State Catholic Conference represents the Bishops of the eight dioceses of New York State in matters of public policy. In the human service arena, the expertise, experience and advice of the Council of Catholic Charities Directors guides the Conference. The Catholic Church is the largest non-profit provider of education, health care and human services in the state. Catholic Charities programs exist in all eight dioceses to provide services to people in need. Our Catholic tradition compels us to be active participants in the civic life of our community, to fashion a more just world that upholds the dignity of every individual and to serve those in need. The needs of the poor and vulnerable must not be ignored. A key measure of any society is how the most vulnerable members are cared for; those with the greatest need require the greatest response. There is a long history in New York State of government and not-forprofit providers collaborating to deliver services in a cost-effective manner. This public/private partnership in support of the poor and vulnerable must be maintained.

### Background

In 1917, recognizing the significant role of the Catholic Church's charitable efforts to serve the poor in our State, the New York State Legislature passed a Special Act formally incorporating Catholic Charities agencies in each of the eight Dioceses in New York State. In 2008 Catholic Charities in New York State provided total services valued at more than \$1.5 billion. We provided approximately 1.7 million services to more than 1 million persons of all faiths and all age categories. We provide services in each of the state's 62 counties, and have a long-term commitment to both inner-city and rural communities. Catholic Charities employs nearly 21,000 people, and utilizes the services of more than 17,100 volunteers. Clearly Catholic Charities' presence in New York State is extensive and important.

As the charitable human services arm of the Catholic Church, Catholic Charities works closely with the 1,500 parishes (with some 7.3 million parishioners) located in every community throughout the state. Parish communities are important resources in the delivery of emergency and community-building services. New Yorkers in need regularly come to Catholic parishes with requests for assistance when they feel they have no place else to turn, and the parishes are serving as the true safety net for these individuals and families.

Catholic Charities USA is celebrating 100 years of service and advocacy this year. Albany will be the site of on of the 10 Regional Centennial Leadership Summits focusing on Catholic Charities anti-poverty campaign. That event is scheduled for Monday, March 8, 2010. In 2006 the Catholic Charities USA developed and produced a policy paper entitled "Poverty in America: A Threat to the Common Good". That paper opens with the following statement: "Poverty in the United States is a moral and social wound in the soul of our country. It is an ongoing disaster that threatens the health and well-being of our nation. We have the resources, experience, and knowledge to virtually eliminate poverty, especially long-term poverty, but we do not yet have the political will." That document sets a goal of steadily decreasing poverty to at least cut it in half by the year 2020. The NYS Council of Catholic Charities Directors supports this initiative and provided the impetus for the national campaign by encouraging the Roman Catholic Bishops of New York State to issue a pastoral letter on society's responsibility to the poor and vulnerable entitled "Restoring the Covenant" in 2005. In that document the Bishops' pointed out "that in fiscally difficult times sacrifices must be made by all and not unfairly borne by those most in need". They also state that "we understand that to honor this Covenant will require both reallocation and enhancement of public and private resources". With that as a backdrop we encourage all to work together to create a more just society.

### **Current Fiscal Situation**

The New York State Council of Catholic Charities Directors wishes to express our understanding for and acknowledgement of the difficult decisions that you and your partners in government face as we move into the future. At the same time, we urge you to continue to seek strategies that do the least harm possible to our most vulnerable citizens. Many factors have brought us to the present moment of deep economic distress. It is a fact that during the years of "plenty", the gap between the working poor and the rest of society only widened. One need look no further than around our own state to see the rise in poverty levels in urban and rural communities. In short, the poor did not benefit previously and should not be negatively impacted currently. Social policies and budgetary cuts which further deteriorate the quality of life of our most vulnerable citizens will only increase the cost to our state and the neighborhoods and communities we encompass.

Prior to the current economic crisis, our agencies have expended considerable voluntary dollars in meeting the needs of the poor, including the subsidization of a variety of state and local funding initiatives. The last several months have seen a significant spike in requests for assistance, particularly in the areas of basic necessities, housing and employment. While we will continue to do our best, we know that we will not be able to fill the gap that will be created by a further sharp decline in state support. We respectfully urge all parties to proceed

cautiously and to keep in mind that our state has a legal, moral and ethical obligation to care for the poor and vulnerable. As Article XVII Section 1 of the New York State Constitution states, "The aid, care, and support of the needy are public concerns and shall be provided by the state..." We also continue to see many New Yorkers who require the assistance of government to move toward self sufficiency. In difficult economic times the needs for services increase. We are concerned that the poor and vulnerable populations, who are so often voiceless in the halls of government, have the supports that are necessary to live a life of dignity.

### **Proposed Executive Budget**

The Executive Budget that was presented by Governor Paterson has a number of areas that raise concern. We recognize that there is a significant deficit that must be addressed. These are difficult times and tough choices have to be made. However, we strongly feel that those who are currently underserved can be asked to give even more. The basic public assistance grant that had not been increased for 18 years until last year is slated for delay. We find that unacceptable.

The Governor indicates that his budget is an attempt at "shared sacrifice," but it is clear that not everyone has the same capacity to contribute to the effort. Additionally, many of the service cuts appear to be "penny wise and pound foolish." The short term savings ultimately result in greater long term cost.

We are concerned about cuts to many programs that have previously been supported by TANF dollars. Approximately \$200 million in funding for programs last year have been eliminated in this year's proposed budget. These cuts will seriously erode the quality of life for our sisters and brothers who find themselves at risk of homelessness, who are seeking help with providing for their families and who are struggling to ensure quality care for their children so that they can work.

Cuts to housing programs such as the Supportive Housing for Families and Young Adults, SRO Supportive Housing Program and the Supplemental Homeless Intervention Program will end up costing our local and state governments more in emergency shelter costs. The reduced funding for the Homeless Prevention Program will also lead to the utilization of more costly services.

We also are concerned by the elimination of funding for Advantage Schools and Home Visiting programs. The Advantage Schools program serves students statewide and is critical to connecting youth development to academic improvement and to providing a safe and nurturing environment for children and teenagers after school. The Home Visiting program sends caseworkers into

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the homes of new parents to provide support and provide guidance that results in emotionally and physically healthy children and families. The elimination of funding for the Maternity and Early Childhood Foundation raises similar concerns. This program has a 26 year history of assisting young, low-income mothers deliver healthy babies and learn how to care for them. The elimination of funding for the Fatherhood programs that involve non-custodial parents in the lives of their children is also of great concern. This program has the potential to strengthen families and expand the possibilities of success for children. We must continue to make these investments in our children, in our future.

We are concerned about the elimination of TANF funding for the Refugee Resettlement Assistance Program as well as the cut in funding for the Citizenship program. These programs assist refugees and asylees with services leading to the attainment of citizenship status and developing self sufficiency skills. Funding for Wage Subsidy and Wheels to Work programs is also eliminated. These programs make it possible for employers to hire individuals who need training to fully perform the require tasks and for employees to get to locations where employment may be available.

The Summer Youth Employment is another critical program that has TANF funding eliminated in the proposed executive budget. The list goes on and there are no easy answers. But we must do better.

In the areas of alcohol and substance abuse treatment the available treatment options will not keep pace with the existing need for services. The same is true for mental health services. People are struggling and are in need of assistance. We as a state cannot abandon them.

Catholic's from across the state will be visiting the Capitol en masse on Tuesday, March 9, 2010 for the NYS Catholic Conference's Public Policy Forum; and we will be advocating for funding for these programs that provide necessary services for the poor and vulnerable. If we can be helpful in making clear the impact the absence of these programs will have, we stand ready to do so.

### Conclusion

It is our hope that humane and wise decisions will be made to deal with the current crisis, decisions that do not add further stress and hopelessness to those already struggling with great burdens. We can and must find a way to arrive at a balanced budget that does not further jeopardize the poor and vulnerable members of our society, a budget that affirms the dignity of all our state's citizens. We stand ready to work with you in achieving this laudable goal.

Thank you for the opportunity to share our thoughts and concerns as the Legislature reviews the difficult choices that are ahead.

HA

February 10, 2010

Good Afternoon Senators and Assemblymen,

My name is Iris Williams and I am here as a representative for Catholic Charities Kinship Caregiving Program. I would like to tell you a story about myself and how kinship care and I became acquainted.

5 years ago I was at my ropes end, not knowing where to go who to talk to and I felt completely alone while raising 4 grandchildren. They were put in my custody and each had different behavioral, social, and character flaws. I reached out all over NYS looking for help. Not just financial help but also to maintain my sanity. During my search I spoke with several agencies and legislators looking for help. I stumbled upon kinship care. After they interviewed me and took a look at my case and what was going on in our lives, our lives as a family began to take a different direction. I knew now that there was help out there. They helped me to remain strong mentally, emotionally, as well as physically, and relief was provided not just for me but for my grandchildren as well. I wouldn't have been able to do it with out them. The kids also look forward to working with the workers of the kinship program because they have a better senses of security knowing that there was someone there to help them be children and enjoy their lives.

Those four kids are teen agers now and now I am on a new assignment. This summer I acquired custody for 5 more of my grandchildren and once again, Kinship care has helped to bring balance to our lives. These five are 10 years of age, 9, 7, 3 and a 1 years of age. I am symbolic of what is happening across of all of New York and our country. In New York State there are 400 thousand children living with their grandparents or other relatives. These are not part of the formal foster care system. These are relatives like me or you. This can happen to any of us. Having support and access to kinship support services is something we absolutely must have for the benefit of us all.

In fact, New York State could not afford to cover the costs if they had not gotten the help of the families. The costs for foster care and mental health services would only further break the bank. Do not cut funding for these necessary services. Cutting supports will only cost the state more money and ruin lives.

14 A(2)

February 9, 2010

Dear New York State Legislative Staff:

My Name is Donetta Graham. There is no way that I could make a speech in my allotted 10 minutes so I am writing to you. I am worth more than 10 minutes!

I feel that Grandparents are being ignored in upstate NY. We need funding like New York City. We need help, not denials. We need access to our grandbabies' legal documents. If I don't know the father's name, I cannot get a Certificate of Birth for my grandchild. The grandparents need more rights to care for their grandchildren. They need to fund programs for these grandparents who keep children out of foster care.

We need furniture and clothing for the children. The OTG is not supposed to look at income. I am a great-grandmother employed and I lost my OTG benefits based up on the fact that I obtained employment! These workers need to know what the law is and the Legislators need to improve it. Grandparents need someone to represent them legally.

We truly need legal representation to assist us with matters. The legal Aide Services in Albany is overwhelmed and does not assist. We have been denied when birth parents are provided council. Day care is another matter... see I can go on for longer than 10 minutes!

Catholic Charities Kinship Caregiving Program has been very good to me during this time but it does not give legal council.

We need better coordination between CPS, DSS, Court and Justice Departments and legal aide. We need a CPS caseworker in every family court room when a child is changing hands to ensure that everything that the caregiver needs is exchanged.

Please contact me for further information. I look forward to talking with one of you. (518) 729-4598

Or write me at: 80B Dove Street, 1st floor, Albany, NY 12210

Thank you for your attention towards this matter.

Donetta Graham

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Honorable Carl Kruger Chair of New York State Senate Committee on Finance

Honorable Herman D. Farrell
Chair of New York State Assembly Ways and Means Committee

Re: New York State Workers' Compensation Board expenditure of/ requesting \$916,160.00 to conduct a Digital-Audio Recording Pilot Program

Good morning, Chairman Kruger and Chairman Farrell, and distinguished members of the Senate Committee on Finance and the Assembly Ways and Means Committee. Thank you for permitting me the opportunity to address this panel on the granting of \$916,160.00 to conduct a study to determine the use of a digital-audio recording system instead of a Verbatim Reporter to record New York State Workers' Compensation Board hearings.

My name is Jean Beskin and I am an Official Court Reporter employed full-time by the Unified Court System for the Supreme Court of the State of New York, County of Queens, Long Island City. I am also the Immediate Past President of the New York State Court Reporters Association, Inc., which is an organization in its 134th year comprised of members who serve as Official Court Reporters in the Unified Court System, Court Reporters in the freelance field, and Verbatim Reporters in the New York State Workers' Compensation Board.

I, myself, worked at the Workers' Compensation Board from 1985 to 1998 as a Hearing Reporter, which was the title before it changed to Verbatim Reporter. I was also the supervisor of 24 Hearing Reporters at the Hempstead District Office on Long Island. Prior to becoming the Senior Hearing Reporter, I was the Hempstead District's union delegate for CSEA and in that capacity I was a committee member on the Workers' Compensation Board Labor/Management Subcommittee for the Hearing Reporters Pilot Project, which took place from 1995 through 1996.

This Pilot Project was conducted to address the feasibility of replacing Hearing Reporters with the use of audiotape equipment due to an audit conducted by the Office of the State Comptroller in 1993 which estimated the Workers' Compensation Board (WCB) would save approximately \$4 million per year by eliminating salaries and benefits.

This Pilot clearly showed that the costs involved in operating the SONY analog recording equipment would not bring about the savings that the audit performed by the Office of the State Comptroller predicted. The projected expenses totaled \$4,235,055.60 with estimates for ongoing years of \$4,087,164.62. This was due mostly in part because the audit did not include any costs for someone to operate the equipment, as the Judge was going to take on that role.

Since it became clear it would not be feasible for the Judge to operate the equipment, the study stated on Page 46, "While we do not recommend the use of analog audiotape systems, for the purpose of this exercise, we will estimate the cost of a complete introduction of such equipment and the replacement of Hearing Reporters with a new Hearing Clerk (SG-9). The Hearing Clerk would assume the duties of the Equipment Operator plus those non-transcription related duties of the current Hearing Reporters. A Hearing Clerk will be assigned to every part plus be responsible for the storage and processing of tapes with the transcription service."

The study estimated that the WCB would need to hire 80 Hearing Clerks at an annual salary of \$21,151.00 for a total cost of \$1,692,080.00. Due to the need to hire an equipment operator and pay them a salary and provide benefits, the cost effectiveness anticipated by the audit would not exist.

The value of the Hearing Reporter was further demonstrated through the accuracy and quality of the transcripts produced from short hearings that last five minutes and represent over 70% of the cases. The hearings conducted before the WCB are adversarial in nature and, as such, can at times become heated and volatile with

parties speaking simultaneously. It was noted on Page 2 of the Executive Summary, "A large number of hearings that last under five minutes are held. These hearings tend to include very quick and brief exchanges between the parties and a lot of simultaneous conversation. These are prime candidates for omissions and the type of hearing that is better handled by a Hearing Reporter. Approximately 73% of the hearings recorded lasted under five minutes."

These fast-paced proceedings caused the recording equipment to suffer because, as stated, "simultaneous conversations also tend to record in all microphones equally. This greatly reduces the benefits of single channel listening using 4 track recording equipment." Also, "the fast-paced exchanges that frequently take place in the hearing room do not provide sufficient opportunity for the Operator to take notes of great detail."

The study also noted that the "differences caused by the speaking accent of a participant, a soft spoken voice, paper shuffling, p.a. announcements or, as noted above, fast heated exchanges by legal participants will always be a component of the hearing environment and will not be resolved by procedure."

The Hearing Reporter is able to read back a portion of the testimony immediately. The study stated, "Read-backs (playbacks) are difficult to quickly accomplish using recording equipment. If the tape location (count) cannot be determined by Equipment Operator notes or another participant, it may be impossible to accomplish a playback. Without question, the current read back method is dependable and far more efficient."

One of the comments states, "Because the issues in Workers' Compensation have become so much more complex and the flow and quantity of hearings so intense, without a Reporter and Clerk, calendar becomes unmanageable. Many doctors and claimants are foreign born and the recorder cannot get the words or make clear what was said. This is critical. We just had a case with simple injuries and extraordinary complicated issues of coverage, jurisdiction, fraud, etc., and these issues are coming up more and more frequently. Without a Reporter this would have been a disaster and without a Clerk to make arrangements to contact the carriers, the hearing would have degenerated into a larger disaster than it was."

The report refers to Workers' Compensation Law Section 122, which states, "A copy of the testimony, evidence and procedure of any investigation, or a particular part thereof, transcribed by a stenographer in the employ of the board and certified by such stenographer to be true and correct may be received in evidence with the same effect as if such stenographer were present and testifying to the facts so certified. A copy of such transcript shall be furnished to any party upon payment of the fee for transcripts of similar minutes in the supreme court."

It also cites Board Rule 300.13(d) which states, "The board file shall contain a copy of all stenographic minutes of hearings where the issues raised in the application for review were covered, and the file shall only be considered by a board panel after the minutes covering the disputed issues are inserted in the file. The review bureau shall promptly make arrangements for the transcription of all minutes not heretofore inserted in the file, as set forth above, and such minutes shall be inserted in the file."

The study stated that "The above Statute requires that the minutes of a hearing be transcribed and certified by a stenographer (understood to be a Hearing Reporter) in the employ of the Board. To implement the use of recording equipment, it would be necessary to modify this Law."

The final recommendation was that the Board should continue its use of Hearing Reporters. Since the WCB was moving in the direction of "total automation of the workplace, including the hearing environment", that to implement the analog cassette tape "would be a great step backwards." That at that time, and it is still true today, "the Board's Hearing Reporters are using computer-aided transcription (CAT) equipment which enables the hearing to be recorded on paper and diskette." However, this software program would not be able to accommodate the automation changes anticipated, so myself and the Hearing Reporters on the committee began the process of investigating and recommending an updated computer-aided transcription software program which the WCB later purchased for the Hearing Reporters. It has been updated since, but 13 years later it is still the means by which the Reporters prepare the transcripts.

A few months ago Verbatim Reporters, formerly known as Hearing Reporters, who are members of our state Association, informed us that the WCB wants to adopt the use of a digital audio recording system. Although it is not the analog cassette tape recording that was used in the study conducted from 1995 to 1996, it does pose many of the same issues that existed then.

The primary distinction between digital audio recording and tape recording is the ability to search the digital audio file if it is properly annotated, which it often is not. In every other sense, it's simply a tape recording. And with that come certain challenges, such as the fact that digital audio systems produce only recordings. Digital audio systems are not voice-to-text systems. Digital audio requires human transcribers to create a paper or digital transcript. Verbatim Reporters sort and distinguish between testimony and background noise, such as sirens, coughing, inaudible, or heavily accented speech. Digital audio records sounds, not words. When several participants in the proceeding speak at once, or there is a great deal of background noise, inaudibles are common, bringing the recording's value and integrity into question. The term inaudible refers to dropped words or phrases due to environmental disruptions. Similar problems arise with video recording because what a video camera will record depends on what sounds microphones acquire. Verbatim Reporters can manage the proceedings to ensure an accurate record is made – electronic recording devices cannot do that.

Verbatim Reporters clarify technical terms and do not inadvertently record attorney-client exchanges. They can search for a word or phrase from any portion of their notes and can read back testimony instantly.

Verbatim Reporters certify the accuracy and integrity of the record and can testify to those points if necessary.

Verbatim Reporters undergo two or more years of academic and skills training and must pass an entrance test for employment with the NYS Workers' Compensation Board, and abide by fee guidelines as set forth by their CSEA union agreement.

Verbatim Reporters can provide continuity of operations, such as in the case of power outages, and they have better backup systems, with built-in redundancies. Electronic recording can be subject to a loss of control or be less secure, i.e., when machinery is inadvertently left on.

Several courtrooms that replaced court reporters with alternative methodologies have now switched back to court reporters. States such as New Mexico, New Jersey, and Texas have found that the recording systems left much to be desired. Problems with inaudible or blank recordings and overall system failures caused many courts in these states to return to the use of court reporters.

For your review I have attached a detailed outline of New Mexico's experience with electronic recording, an article from the *New Jersey Law Journal*, dated May 12, 2008, explaining how an audio glitch may have cost a litigant more than \$500,000, a letter from a Texas Judge opposing electronic recording, and an article by Chandré Prince, dated April 12, 2007, *David Best trial testimony lost as recorder goes on blink*.

When it comes to funding court systems, it is often believed that electronic/digital or video recording provides a cheaper alternative to court reporters. Those who market and sell these beliefs, and the required equipment that is packaged with those beliefs, often note that the hefty initial investment for the equipment is offset by reduced salaries and benefits costs resulting from the reduction and/loss of court reporters. By accepting and buying this belief in electronic recording, hidden costs, such as maintenance fees and the cost of transcription, and operational problems become the norm. More importantly, this acceptance places the security and safety of the spoken word at risk. Digital audio is not foolproof and can suffer from equipment failure, erasures, or accidental deletions. Moreover, the use of digital audio can result in unintentional disclosure of privileged conversations or disclosures contrary to the standards of judicial process. The Verbatim Reporter has the ability to exclude off-the-record conversations from the transcript, such as sidebar conversations.

Wonder what could go wrong with electronic recording? How about this:

- Power outage during Hawaii grand jury testimonies resulted in a failure to record nine days of Oahu grand jury proceedings using their videotape system. ([Honolulu Advertiser] May 21, 1991)
- Recording device in Greene Circuit Court failed to pick up witness' hour-long testimony, Judge ruled a mistrial in case. ([Bloomfield (IN) Evening World] Sept. 25, 1992)
- Official tape recording found blank of secret federal hearing for James Nichols, who was being held as a material witness in the Oklahoma City bombing. ([Detroit Free Press] April 28, 1995)
- Two consecutive recording failures at attempted hearings lead to the need for a third preliminary hearing for a couple charged with the alleged abuse of their daughter. ([Casper (WY) Star Tribune] March 26, 1996)
- Every audio recording of the 22-day Wyoming state legislative session in 2000 was found blank. ([Mattoon Journal-Gazette, IL] July 27, 2000)
- "Bellingham prosecutors will decide this month whether to retry a man whose molestation conviction was overturned because a court clerk forgot to turn on a tape recorder during his testimony." (As reported in [Yakima Herald-Republic] WA, July 17, 2003)
- "...judgment in the treason trial of opposition leader Morgan Tsvangirai (Zimbabwe) has been 'indefinitely postponed.' ...During the trial, it was reportedly discovered that 14 hours of Tsvangirai's testimony was unrecorded because the court's audio equipment was faulty." (As reported in [Business Day] August 16, 2004)

For your review I have also included articles on "Realtime: The Gold Standard of Stenographic Court Reporting", "Realtime Court Reporting", "Realtime Court Reporting Grows in Popularity, and "Why Use Stenographic Reporters?"

Realtime court reporting is what is known as voice-to-text whereby the court reporter through the use of a computer-aided stenotype machine will display on a monitor or screen the court proceedings instantaneously. The text will appear on the monitors of the judges, attorneys, witnesses, and jurors with the capability of the judges and attorneys being able to highlight or mark portions of the proceedings. This is truly the state of the art technology which stenographic court reporters have been using since the early 1990s.

Chairman Kruger, Chairman Farrell, and distinguished members of the Committee on Finance and the Ways and Means Committee, on behalf of our Verbatim Reporter members, the New York State Court Reporters Association, Inc., requests that the Workers Compensation Board be directed not to spend \$916,160.00 to conduct the digital-audio recording pilot, as it is in violation of WCL Section 122, and that they be held to comply with Senator Onorato's directive that "Unless the Legislature determines the current law should be changed to allow the Workers' Compensation Board to experiment with the use of electronic recording, the Board may not proceed on its own." It should be noted that the New York State Legislature rejected budget language when the Division of the Budget tried to amend Workers' Compensation Law Section 122 in prior budget bills. At a time when our state's budget deficit has reached 8 billion dollars, it is not fiscally prudent to spend close to a million dollars on another pilot study that is not necessary. In this vein we ask that the WCB be required to continue to maintain the use of Verbatim Reporters, the true "Guardians of the Record."

Thank you for your time and attention to this matter.

Respectfully submitted,

Jean H. Beskin Immediate Past President NYS Court Reporters Association, Inc. (NYSCRA) Testimony 2-10-2010

14A

Good Morning and thank you members of the Senate Finance Committee and the Assembly's Ways and Means Committee for this opportunity to respond to elements of the governor's budget proposal.

I am the Executive Director of a small Not -For- Profit. We have two programs in our agency one that offers caregiving support services family members who are caring for their frail elderly at home for as long as possible. This "Elder Cargiving Program" supports wives and husbands, sons and daughters and others who are doing what they can do to keep their spouses or parents or other ailing friends or family at home and not in nursing homes.

The other program we offer is "Kinship Caregiving Program." This program helps families when a parent is not available to raise their child or children and another relative takes over the child raising responsibilities. Often this is the grandparent raising the grandchildren. This program offers profound outcomes in keeping children out of foster care. These children and families teeter on the edge. Typically, a single older adult on a fixed income is sacrificing their previous retirement expectations and parting with peer relationships to take on child raising. They encounter some typical issues such as education, or routine health concerns and some more challenging issues such as navigating systems such as family court, special education and mental health systems into their lives. These families get none of the support that formal foster care families receive. They have no cushion and they risk spiraling into physical, mental, and financial disarray. Our program steps in to help these families meet their basic needs. We assist with stabilizing their homes and relationships and help these families stay together in a healthy manner.

Currently in NYS there are 21 such programs in serving 30 counties. These programs understand the unique challenges faced by kinship families and work to improve children's school engagement and family and peer relationships, as well as their legal status and access to state and federal assistance.

According to Commissioner Carrion, "Kinship programs promote permanency and well-being for children living with their extended families. These programs also reduce costs to taxpayers by decreasing out-of-home placements and maintaining the familial bond for children." Research supports that youth in kinship care have better outcomes than youth in fostercare.

The Governor's proposed budget uses general funds to partially fund the Office of Children and Families' Kinship Program (\$677,500) and keep the statewide Kinship Navigator (\$220,500) at almost full funding. The Governor also recognized the importance of kinship care by implementing the federal kinship guardianship program. We applaud this support.

However, the almost \$2 million of Temporary Assistance to Needy Families funding TANF (\$1,998,000) is no longer targeted for the Kinship Programs. This means that the entire 21 direct service programs have only \$677,500, a cut of almost \$2 million from last year's funding. It is likely that without the funding some programs will close.

As an agency representative I can tell you with confidence that the demand for kinship support services has been increasing. Our agency struggles to keep up with demand. The economic climate now only increases the difficulty for these families. If these programs close or reduce services it is likely- even predictable that a number of children will end up in foster care that could have been kept at home with family reducing the chances for positive outcomes for the youth and costing the state more money in foster care. We need your support to help these families stay together and to save the state funding. We believe that whenever possible children belong with family not in fostercare. Please restore the funding to keep these programs operating. It is right for the families and it is right for the state.

By Renée Goldsmith Benson, LMSW Executive Director Catholic Charities Caregivers Support Services.

Bear Governor Paterson, and legislator

For every child served in an OCFS Kinship Program, New York State saves the Foster Care System \$22,500 in direct costs as well as many more dollars in indirect costs. If not for the support of OCFS Kinship Programs, many more children would be in foster care. These core services result in greater family stability and permanency, and get better outcomes than foster care.

PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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For every child served in an OCFS Kinship Program, New York State saves the Foster Care System \$22,500 in direct costs as well as many more dollars in indirect costs. If not for the support of OCFS Kinship Programs, many more children would be in foster care. These core services result in greater family stability and permanency, and get better outcomes than foster care.

PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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Dear Governor Paterson, \* Leguslators

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS

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Address: 133 Main St. Birdhamfon, Ny 1392

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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Address: 248 rand 3t. Johnson City, X/9 13750

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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Dear Governor Paterson, \* Leguelaturs

For every child served in an OCFS Kinship Program, New York State saves the Foster Care System \$22,500 in direct costs as well as many more dollars in indirect costs. If not for the support of OCFS Kinship Programs, many more children would be in foster care. These core services result in greater family stability and permanency, and get better outcomes than foster care.

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Dear Governor Paterson, and Legliolatics

For every child served in an OCFS Kinship Program, New York State saves the Foster Care System \$22,500 in direct costs as well as many more dollars in indirect costs. If not for the support of OCFS Kinship Programs, many more children would be in foster care. These core services result in greater family stability and permanency, and get better outcomes than foster care.

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Dear Governor Paterson, and Leguelators

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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Dear Governor Paterson, and Leglus Laters

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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Name: HOLPEN BROCKAMS!

Address: 4 Boutimore Ave Bing Ny 13903

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Dear Governor Paterson, \* Leglas Latara

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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Dear Governor Paterson, and Leghalatars

For every child served in an OCFS Kinship Program, New York State saves the Foster Care System \$22,500 in direct costs as well as many more dollars in Indirect costs. If not for the support of OCFS Kinship Programs, many more children would be in foster care. These core services result in greater family stability and permanency, and get better outcomes than foster care.

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMSI

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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Address: 112 Cliff() STreet 41 bany

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Dear Governor Paterson, \* Legis 1 2 tox-5

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

Address: 47 6th. Ave. Troy NY 12180
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Dear Governor Paterson, 4 | eq. 15 | utests

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

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Dear Governor Paterson, and legislators

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PLEASE SUSTAIN STATE FUNDING FOR KINSHIP PROGRAMS!

Name: <u>Demena Waiton</u>

Address: 10 qua; 1 Street

Message: Klep us Going

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## Testimony of the New York State Coalition Against Domestic Violence Michele McKeon, Chief Executive Officer

To the Joint Budget Hearing of the Senate Finance Committee and Assembly Ways & Means Committee On Human Services

### February 10, 2010

The New York State Coalition Against Domestic Violence (NYSCADV) is a membership organization comprised of over 140 domestic violence programs and shelters located throughout the State of New York committed to ending domestic violence through education, advocacy and social change. Founded in 1978, NYSCADV is a driving force in the development of hundreds of programs throughout New York that provide services for victims who are abused and their children. For more information: <a href="https://www.nyscadv.org">www.nyscadv.org</a>.

NYSCADV participates in the Empire State Economic Security Campaign (ES2), which represents several hundred communities, faith and labor organizations. ES2 focuses on universal health care, income security, education and workforce development, housing, and job creation. ES2 also supports the Better Choice Budget Campaign in calling for a more equitable sharing of the burden of New York's fiscal crisis, including more revenue-generating strategies. We support these revenue building strategies.

NYSCADV acknowledges the immense difficulty of the task before the State. Addressing the current-year \$8.2 billion shortfall is an arduous task, especially considering the issues faced by particularly vulnerable populations, including domestic violence victims and their children. In a time of national economic crisis this is unenviable work. However, we urge you not to balance the budget on the backs of vulnerable women and children.

NYSCADV is alarmed by the *Proposed Executive Budget for FY1.0/11*. What initially appeared as benign changes in the allocation of domestic violence dollars is essentially a complete elimination of all state funding for domestic violence services. This, combined with the proposed consolidation of the NYS Office for the Prevention of Domestic Violence (OPDV) into the NYS Division of Criminal

Justice Services (DCJS), as well as the proposal for OPDV to operate the NYS Domestic & Sexual Violence Hotline, represents a significant devaluing of the issue of domestic violence in the State of New York.

The critical elements of the proposed budget that will dramatically impact the safety of victims of domestic violence in New York State include the:

- significant cost shift/reduction of Title XX money. The proposal increases the cap, and the
  domestic violence funding priority remains. However, this is actually a reduction of \$18
  million and the budget implications will vary throughout the state. All state funding will be
  eliminated leaving only federal and local dollars.
- elimination of the \$3M TANF (Temporary Assistance for Needy Families) money previously available for non-residential domestic violence services.
- elimination of state funding for the domestic violence/child protective service collaborations,
   leaving only limited federal funds available for their support.
- elimination of \$1.2 million in domestic violence funding from the Senate, which has gone to domestic violence programs and civil legal services programs that provide services to survivors.
- elimination of General Fund dollars allocated to domestic violence programs and services.
- elimination of the Supportive Housing for Families and Young Adults program (SHFYA)
  which provides critical funding for services for underserved homeless families headed by
  domestic violence survivors.

### As Domestic Violence Incidents Increase, Program Will Close: Who Will Fill the Void?

These cuts come at a time when New York State is experiencing an increase in domestic violence incidents and domestic violence service providers are seeing an increase in the number of people seeking services. According to the New York State Division of Criminal Justice Services, 91 intimate partner homicides were reported in 2008, an increase of 25% from 2007. Counties outside New York City reported a 45% increase, with 45 intimate partner homicides reported.

> Westchester County - My Sister's Place has seen a 46% increase in people seeking information and referrals between January 2009 - July 2009 compared to the same time the year before.

<sup>&</sup>lt;sup>1</sup> Fetzer, Matthew and Adriana Fernandenz-Lanier. 2009. "Domestic Homicide in New York State, 2008." Office of Research and Performance, New York State Division of Criminal Justice Services.

These cuts, in addition to reductions in funding last year, present a serious issue for service providers. To manage the 2009 budget cuts, programs have already laid staff off, reduced programming and services and eliminated any ancillary services. We have already heard from some programs that they will have to close if the proposed budget is implemented. Where will victims and their families find safety, support or shelter if the programs we tell them to utilize are closed?

- > <u>Kings County</u> HELP R.O.A.D.S located in East New York Brooklyn and serves Brownsville, Bushwick, Bedford Stuyvesant, Williamsburg and Green Point. Their services are bilingual and culturally sensitive and include: crisis intervention, counseling, support groups, parenting and domestic violence workshops, advocacy, referrals, aftercare, translation, children and teens services. The impact of these cuts would mean a loss of 2 Domestic Violence Counselors.
- > Richmond County The Seamen's Society for Children and Families is a non-residential domestic violence program; the only one like it on Staten Island. They provide long and short term DV counseling, advocacy and referrals to domestic violence survivors in Staten Island; both English and Spanish speaking. These cuts would result in the loss of at least 2 workers in the program, essentially causing the program to be unable to exist at all, as a caseload would be at least 50 clients a caseworker with the loss of the two staff persons.
- > Livingston County Chances & Changes, the only DV provider in the County, provides both residential and non-residential services to victims of domestic violence. These programs and services are funded by various sources, all of which are being reduced or eliminated in one way or another. The elimination or reduction of these funds will force them to cease providing many of the services that are mandated by the state for them to provide. Additionally, without being able to provide the mandated services, Chances & Changes will not be considered a licensed provider and not be allowed to provide services, including shelter even if they receive the per diem rate, because they no longer meet the requirement for licensure therefore eliminating all DV services to victims available in the County.
- > Orange County Safe Homes of Orange County is a comprehensive domestic violence program. With the elimination of the state funding for the CPS/DV collaboration project, the program will cease to exist and be a loss of two jobs. This collaborative assists victims and their children who have entered into the Child Protective Services Unit to have the support of a domestic violence advocate. These advocates are able to provide services, information and education to victims and complete comprehensive safety planning for the family.

In many communities domestic violence services are "the only game in town". They are the only place where victims can get assistance obtaining an order of protection, the only place providing support groups, the only place providing therapy to children who witness violence in their home, and the only place assisting victims with safety plans. Victims of domestic violence rely on that support. Without non-residential services where will families turn? Who will fill the void?

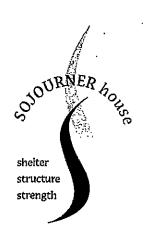
Furthermore, these cuts will result not just in an eradication of services, safety and support for victims and their families but if domestic violence agencies have to reduce programs or close altogether, there will be a significant job loss for the state. Advocates and support staff from these agencies will lose their jobs.

#### Conclusion

Without question the proposed 2010 – 2011 budget will close domestic violence programs, reduce services, cost jobs and most importantly, leave victims of domestic violence and their children without options. The budget also conveys the systematic devaluing of the issue of domestic violence and its impacts on our communities. These cuts will leave victims nowhere to turn except to the utilization of other more expensive public services that do not have the domestic violence expertise needed to provide a well-rounded response to victims and their families. The long-term costs to the state for these services far outweigh the money being saved from this elimination of state funding to domestic violence services.

The State of New York cannot and must not eliminate the state funding for domestic violence services and programs. In the past, both the Legislature and Governor Paterson have done much to aid victims of domestic violence and improve New York's response to domestic violence. NYSCADV is confident that neither would want to have that progress undermined, as it invariably would, as a result of the proposed budget cuts.

Thank you for this opportunity to testify on behalf of the countless survivors of domestic violence and the domestic violence programs that work with them everyday.





My name is Germaine Knapp and I am the President and CEO of Sojourner House at PathStone and a Board Member of Supportive Housing Network of New York (SHNNY). Sojourner House has served homeless and low-income families for over 28 years and was one of the first permanent supported housing projects funded through tax credits, which was in 1992.

On any given day, Sojourner House case managers support approximately 500 women and children who seek to become self-sufficient and lead more responsible and meaningful lives.

Nearly 80% of the heads of household that we support are chemically addicted, mentally ill and have low levels of education. Yet, those families have a vision: They want to succeed and so rely on supportive services funded by SHFYA through OTDA to help them succeed.

Of the families in Sojourner House permanent housing after one year:

- 96% remained in permanent housing
- 83% remained sober
- 94% maintained family unification and avoided new Child Protective referrals
- 65% completed or continued in an educational job training program
- 65% of those who are employable obtained employment after a long history of public assistance

Very likely, most of the 40 families we serve with SHFYA dollars would re-enter the emergency housing system and actually begin to cost the state and county more money. Further, living in emergency housing would make it far more difficult to obtain living wage employment, keep children in the same school and maintain stable lives.

Why cut funding that ultimately saves dollars, decreases unemployment, and helps children succeed in school? To do so, is short-sighted. Let's build a strong New York together and keep SHFYA funded.

For more information about the SHFYA-funded services at Sojourner House, please contact me at:

Sojourner House 30 Millbank Street Rochester, NY 14619 585-436-7100 ext. 102 gknapp@pathstone.org

Thank you for caring.

15C

#### **TESTIMONY**

#### **HUMAN SERVICES ISSUES**

**FEBRUARY 10, 2010** 

ON BEHALF OF

### NEW YORK STATE DISPLACED HOMEMAKER PROGRAM

Eleanor Moran (315) 793-9700 emoran46@centralny.twcbc.com

## NEW YORK STATE DISPLACED HOMEMAKER PROGRAM February 10, 2010 Human Services Issues 1:00 p.m.

Good afternoon. My name is Eleanor Moran. I am Executive Director of the Women's Employment & Resource Center in Utica. However, today I am here to represent the 22 centers that deliver the New York State Displaced Homemaker Program. As you all know, the Displaced Homemaker Program has successfully provided workforce development and training assistance to your constituents for 33 years....thanks to your ongoing support. It has been your voices that have enabled the voices of your neighbors, families and friends to resound with pride as they acquired employment that provided financial independence for them. It has been your voices that spoke on their behalf so they could overcome or avoid reliance on an already over-burdened welfare system. It has been your voices that helped the Displaced Homemaker Program bring employers and job-seekers together to build not only a stronger economy, but stronger families.

In his 2010-2011 proposed budget Governor Paterson has NOT funded this program. For 2009-2010 the centers were funded for \$7.8 million dollars, again, thanks to your advocacy and appreciation of the dollar-for-dollar value of the program as it relates to employment and to the greater economic picture. As always, we thank you for your appreciation of the value of this program and for your belief that we can make a difference to each family we assist and ultimately have an impact on the state-at-large.

This year we have two requests. First, we are asking you to restore the current level of funding at \$7.8 million for the 22 centers. This level of funding reflects additional services to recipients of Temporary Assistance to Needy Families. In-collaboration with our local Departments of Social Services, we have collectively moved 4217 families closer to financial independence or out of poverty. Second, we ask that you re-appropriate the Governor's proposed 25% reduction (\$550,000) in this year's funding (2009-2010) so we can continue to serve those women who do not meet the TANF criteria of having small children. These state monies are the only way in which we can serve this group. Based on last year's performance we show a Cost Per Individual Served of \$1,217 and a Cost Per Entered Employment of \$3,928, with a 60% retention rate of over 90 days. At a minimum wage this translates into a

return to the State of New York through earned taxable income of \$19,709,560.....and most of our women earn above minimum wage. Consequently, we have the potential of looking at a return of over \$30,000,000. A darn good return on your investment!

To quote Governor Paterson's State-of-the State Address, "We have a commitment to help New Yorkers raise themselves up". And, we couldn't agree more. These centers that offer displaced homemaker services succeed in doing just that....but in a far more significant sense. Our goal is to not only help these women reach financial independence, but to see their families become stronger; to watch their children as they follow a parent who is more focused, committed and confident; and to see the impact their financial independence has in each community. Our greater goal is to develop a job seeker who knows how to acquire the highest level of employment possible for them; to teach them how to demonstrate her value for advancement; and to show them the value of becoming a role model that will motivate their families so that they too will become viable and contributing members of their communities. So while we are clearly cost-effective from a financial perspective, we also have the ability to shape the direction the families in our communities....in YOUR communities....can have an opportunity to take.

We hear a lot of talk about "rebuilding trust in State government". To me and to the other center directors that implies a far greater concept than just a financial incentive. Money is but one force that drives us....and those we serve. What greater opportunity does this state have than to maintain a proven program such as the Displaced Homemaker Program which strives to build a stronger labor market by providing knowledge, training, motivation, connections to the labor market and ongoing support throughout the transition to paid work. Which State program has had a greater long-term impact than the Displaced Homemaker Program? We believe in this program as do the women who have been served and placed; as do the employers who have hired them; as YOU have each year by ensuring our funding is available. Our communities acknowledge and respect the services we provide because they are able to see, hear and feel the results.

Investing in a proven program that benefits individuals, communities and the State is one great investment.....and it is one opportunity that cannot be missed.

I have had the honor of addressing many of you over the past several years, but none have been as important as today. We cannot pick up a newspaper, watch the television, surf the internet, nor become involved in conversations without hearing the fear and frustration in the voices of our neighbors, our friends and our families. The severe impact of lost jobs, cuts in wages or benefits, plant closures, loss of homes, and so on are clearly overwhelming. Accompanying all of this is the likelihood that child support payments may end; bills may go unpaid; houses may be lost; and yes, often spouses vanish under the pressure. But do you realize that displaced homemakers are the most vulnerable? Divorced or separated they are at risk of falling onto the roles of welfare.....at a great expense to the state. They have few skills, little insight into current employer issues and expectations, and limited (if any) opportunities to acquire even the most basic technological skills needed to become employable. They are finding themselves more and more in a position where they will have the responsibility to financially keep their families going....somehow....someway. We need you to put them into a position of priority...them and their children....by helping us help them. Our centers are unique... we do not duplicate services....rather we complement those services that are not obtainable elsewhere in the system of state services. We are working partners in each of our respective communities. We are the "go to" agency when businesses seek prospective employees who have been given a solid understanding of today's workforce so they may move rapidly into employment. We have been YOUR partner for many years and are ready to again join forces with you to address the needs of our families and our State.

We all need to ask if what we are doing is right for the people of New York. We feel, as I am sure each of you feels as well, that our moral and ethical responsibility to work with families who are struggling to escape poverty should guide our decisions and all political decisions. We also feel that when we actively respond to the reality of the challenges we face today that there is hope for families to get to a better place. We want to continue to be part of that journey for women and their families. We want to continue to provide the support, direction and insight they need to bring their families to a better place. But we need you to help us accomplish that.

WE would again like the opportunity to be a part of the solution...as we have done successfully for 33 years. But for us to do so, we need YOUR support, your trust, and your

advocacy for the continuation of our funding. As you negotiate the 2010-2011 New York State Budget, we need you to again be our voice – the voice of the hundreds of thousands of displaced homemakers in New York State

It is with the greatest respect that I, on behalf of all of the displaced homemakers you represent, ask you to insure that this program continues to play a pivotal role in rebuilding New York State's economy by:

- supporting our presence in the 2010-2011 New York State budget at the current level of \$7.8 million.
- and by re-appropriating the proposed 25% reduction of this year's funding (25% of \$2,200,000 or \$550,000) to continue this year's work that we have already begun.

Why? Because when the Displaced Homemaker Program puts women to work:

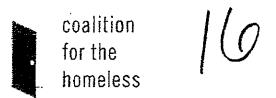
- Tax revenues go up
- Consumer spending goes up
- Welfare roles drop
- Families become stronger and more independent

It's a win-win all the way around. Thank you again for this opportunity. As always I appreciate your interest in the Displaced Homemaker Program, and your willingness to include us in this dialogue.

Make it a great day! I will be happy to field any questions you may have.

Respectfully submitted,

Eleanor A. Moran (315) 793-9700 Funding Committee NYS Displaced Homemaker Association



## **Testimony of Coalition for the Homeless**

presented by

### Shelly Nortz, Deputy Executive Director for Policy

before the Fiscal Committees of the NYS Legislature

on
The 2010=2011 Executive Budget Proposal for Human Services

February 10, 2010

#### Good Afternoon.

Thank you, Senator Kruger, Assemblyman Farrell, Senator Krueger, Senator Squadron, and Assemblyman Wright, for holding this important hearing and inviting me to share some insights with you regarding the Executive Budget proposal for Human Services.

My name is Shelly Nortz and I serve as the Deputy Executive Director for Policy with Coalition for the Homeless where I have been a public policy specialist for the last 22 years. As you all know, I have a thorough understanding of our welfare and human services systems,

Appended to my testimony is a narrative recounting one of the many visits our staff have made to the New York City shelters in the middle of the night this winter. I urge you to read it and all of the attachments because I believe you will better understand the magnitude of what I am about to say in the human terms that will make the numbers and the policy questions real for each of you.

I want you to hear just three vital messages about this budget.

First, as we look upon this spending plan, not only are we in fact, in the middle of the Great Recession, but we also have record homelessness rising in concert with rising unemployment, and these trends are showing no sign of abating.

Second, the Executive proposes to ELIMINATE \$88 million in appropriations used every year for the last three decades to pay the state share of operating the New York City shelter system for homeless men and women. The overall cut to services for homeless people is at least \$109 in appropriations authority and some of these cuts carry with them attendant costs that have, once again, not been accounted for in the Executive Budget calculations.

Third, the Executive proposes to ELIMINATE federal block grant funds for \$202 million in non-profit community based human service programs — including the \$2 million in Emergency Homeless Needs that helps support our own city-wide crisis intervention walk-in service.

We requested but did not receive 21-day amendments to restore these cuts, and so we now must ask that the Legislature make these restorations.

Even as we have more resources from Washington, the Paterson Administration proposes to give local social service districts even more federal funds with few strings, while eliminating funds for the true safety net at the community level. Far from rolling back failed Pataki era policies, or aggressively enforcing the social welfare commitments of our Constitution, as many of us had hoped and urged, this Administration has too often left the poorest of the poor and the organizations that help them to fend for ourselves.

Attached to my testimony are three documents in addition to the report of our court-appointed shelter monitors.

First, is our report from October showing that we had, for the first time, more than 39,000 homeless men, women, and children – including over 10,000 families with more than 16,500 children staying every night in New York City shelters.

Second, is my analysis of the Executive Budget which shows that, Governor Paterson proposes to cut, and in most cases eliminate more than \$109 million in appropriations and cash for nine different homeless service programs in the OTDA and OCFS budgets. As you can imagine, it is little comfort to our homeless clients to know that the Paterson Administration discounts these cuts by assuming that homeless men and women will pay New York City up to \$72 million in "contributions" from their SSI checks and earnings from jobs for the privilege of spending the night on a cot.

Last, I have attached a set of calculations – those made by the NYS Division of the Budget, the NYC Office of Management and Budget, those made by myself, and those made in connection with the emergency rulemaking that accompanied the regulation that the Administration relies on in advancing the proposal to eliminate the state appropriation for shelters for adults.

To boil it all down for you, the bottom line is this:

DOB assumes all homeless people will continue to receive shelter; all (or 90 percent, depending on who is offering the estimate) will qualify for public assistance, and some unstated number of them will fork over \$72 million in "shelter rent" payments, providing that same amount in State and City budget savings for their care.

DOB states that they are unable to tell us how many people they think will supply this \$76 million in "shelter rent" payments. And they report that they project adding 7,000 people to the welfare rolls as a result of this change in policy. However they were counting beds and were unaware that more than 29,000 different men and women pass through the shelters in a year. Our estimate is that more than 22,000 will be added to the public assistance rolls, and that, contrary to the estimates of DOB, this change in shelter financing will actually end up costing more than it will save.

The NYC Office of Management and Budget concludes that it will receive state reimbursement to operate its shelters of just under \$32 million for the 24 percent that receive public assistance, compared with the \$88 million in appropriations and \$93 million in cash that it receives under current law. It calculates a devastating cut of \$56 million to a system serving single adults that costs \$264 million per year, and for which New York State is supposed to share an equal responsibility.

My own calculation assumes that some additional homeless people might access public assistance – rising to one in three from fewer than one in four, but that the cut to New York City, paired with the cost of a growing public assistance caseload would still result in a cost to the City of over \$53 million per year.

If, as DOB assumes, *all* shelter occupants become public assistance recipients, my calculation shows that not only would the combined income loss and added expenses cost New York City at least \$74 million, but the added welfare costs would also wipe out the assumed \$36 million in state savings and actually cost us a few million dollars.

I would note for the benefit of your consideration, that when the Pataki Administration made final the regulation that the Paterson Administration wishes to enforce now in New York City after years of court battles and a totally chaotic attempt last year to collect shelter rent from homeless families, the fiscal note accompanying the regulation estimated that just two percent of single adult shelter occupants would pay shelter rents amounting to \$160,000. As I have pointed out the Division of the Budget, the disparity between the intent of the regulation and their present day so-called assumptions about collecting rent for shelter from homeless people in the tens of millions of dollars is more than stunning – it lacks all

credibility. It is the most irresponsible budget proposal I have ever seen in the 22 years I have been doing this work for homeless people — even the bad old entitlement cut proposals from past administration included some lame excuse for a fall back (or another) that might help people with no where else to turn. But here, we have no plan, just a bizarre and out of touch set of assumptions that betray how theoretical this whole budget really is. It offends me, and it should offend you. New York can do better, and I trust that you will see to it that we in fact do better.

I urge you to dig the money out of the mattresses where it has been stashed, fix tax rate inequities, spend money to restore vital programs instead of playing at year-end surplus fantasies, and make the homeless services budget whole.

Please restore \$109 million in homeless service program cuts as outlined in my attachment, and restore the \$202 million in TANF cuts to community based providers of vital services.

Thank you for your very kind interest and attention – we will certainly be pleased to answer any questions you have today and in the coming weeks.

#### Notes from shelter visits 1/27-28

#### Bellevue

(Three court-appointed monitors) arrived around 9:50 pm, went straight to the 7th floor where we counted

34 men in the waiting room - 2 of them were asleep

7 men in the hallway - but hard to count exactly, many men milling around

The scene was pretty chaotic, men seemed confused about where they should wait and what would happen note that DHS has NOT opened a second waiting room (for the "A" clients) as (city official) told us last week – but there was a fresh coat of paint

Among the clients I talked to over the next couple of hours (all had arrived before 10 pm):

client name

New entrant

client number

Entered shelter on Fri, got bed on 2nd flor, was out Sat night (see below), came back Sun and o/n-ever since

Was living in a 3/4 house at 275 Halsey St, was kicked out, went back Sat to get his belongings but couldn't get back to shelter in time

48 yrs old

Has hepatitis C

Attends methadone maintenance program

Has high blood pressure

client name

client number

Returnee

Entered shelter on Sun night, o/n each night

Gets out of work at 11 pm each night, hard for him to get to shelter before 10 pm but hasn't been able to get a late pass

Was evicted from his apartment in Brooklyn

client name

client number

Was at shelter since Augusut on 4th floor "TB" floor

Hac TR

Lost his bed on 1/7 and staff told him if he ever lost bed again he should never-come back

Was in Bellevue Hospital one night until yesterday treated for TB, showed me discharge papers listing his medications

Last night slept in the 1st floor bus WR

client name

Returnee

\*\* from Monday night, still getting o/n placements, Mon night he slept on the 1st floor bus waiting room (aka "refusers room"), last night he got a bed on 2nd floor around 1:30 am, he said they had offered beds at Fort Washington, Harlem I, and a place in the Bronx

He told me how the staff is now using an "A" and "B" priority, he has been labeled a "B" (Later he finally got a permanent bed)

#### client name

\*\* Met him Mon night, works at CUNY and goes to school, later I saw he was part of as group of clients who were going to be bussed to another shelter

#### client name

Returnee

\*\* a client I've seen ojn many previous visits, very meek, attends outpatient program, note: he was in the 1st floor bus WR when we returned after 2 am

#### client name

client number

Had lost bed after going to St Vincent's Hospital, where he stayed one night, discharge papers say he was treated for sever intoxication, he also suffers from asthma

client name

client number

Returnee

Was in shelter in Jan but left to stay with family on 1/19 but couldn't stay there, came back 1/25 and o/n ever since

Last night was sent to Harlem 1 shelter on 155th St, got only 3 hrs of sleep

#### client name

client number

Was overnighted for several nights then told to stay at Willow shelter, but Willow sent him back to Bellevue with a transfer notice that I saw saying he is "inappropriate for Next Step program" Waiting since 4 pm for a bed

#### client name

\*\* I've seen him on many previous nights, he used to work in Mississippi

I also noticed a Mandarin-speaking client who was very confused

10:05 pm, staff (Mr. xxxx) goes to 7th floor WR and calls names from several bus manifests and from several pages of "Pre-Curfew Arrival Log"

No answer for first 6 names

Tells clients who answer to go to hallway – one of them is client name, who I'd met Mon night Several clients later ask why their names were not called, said they had specifically gone to the office and given their names to staff

I walk down the hallway and notice one of the dorms was empty – room 7E-32, with beds #58-68 (11 beds) was completely empty, there had been a partial ceiling collapse, plaster from part of the ceiling adjacent to the outer wall had collapsed leaving a 2 or 3 ft long hole

\*\* Note that these beds were NOT listed as "offline" on last night's census report – all beds at Bellevue were shown occupied

10:40 pm, staff comes in WR and calls names, tells some men to line up in hallway

Later I see a staffer loudly talking to a client, yelling at points, saying "There are 5,000 clients before you on the lsit to get permanent beds, so you'll just have to wait, you get an overnight bed"

She then explained the A and B priority, saying he's a B, and the client responded "If a man's homeless he's homeless"

11:00 pm, I count

24 men in hallway

31 men in WR - same 2 men still sleeping, I never saw any staff wake them up to check on them

11:10 pm, staffer moves the long line of clients to another hallway on the other side of the office, she then calls several names in the WR and tells them to line up where the other men had been, I hear her tell another staffer "Three names no answer, I'm going to replace them with three other guys"

11:20 pm, staff sends the second (more recent) line of clients down to the 2nd floor for onvernight beds. The men in the first line appear to be getting permanent bed assignments (one of them is client name). I count

14 men still in WR, incl the 2 sleeping guys

11:25 pm, staffer tells another staffer to put the names of the men in the WR on a manifest, client name (who speaks only Spanish) asks her a question and she tells him to go away

12:00 midnight, I count

20 men in the WR, incl client name mentioned above

The men are incredibly frustrated

12:05 am, security guard tells all of the men to go down to the 1st floor and proceeds to close the WR

12:10 am, I go to 1st floor where I count:

13 men in bus WR, 4 asleep, but men are coming in from 7th floor - I see client name, client name

11 men in hallway (some from 7th floor)

4 men in triage

5 men in IVC, 3 asleep

Staff at entrance says only 16 curfew violators so far that night

12:15 am, We leave shelter

Pamoja House

We arrive at 12:50 am, a group of clients are standing by the metal detector with their belongings, they say they've just arrived on a bus from the Keener shelter

Many say they've had multiple o/n beds, most are returnees, among them

client name

client number

5 nights of o/n beds, was sent to Willow which rejected him and sent him back to keener

client name

client number

Seemed very disoriented, was talking in a very disoriented fashion, said he'd lost a bed at Keener

Staff tell us that 13 men had been sent from Keener

I then entered every dorm and counted how many empty beds (i.e., with bare mattresses) there were after the Keener men were bedded, I found 7 empty beds

1:10 am, we leave

Bedford-Atlantic Armory

We arrive at 1:30 am and find

26 men in WR by entrance, 11 asleep mostly laying on the floor

Among them

client name

client number

Returnee

Had a huge plastic bag of belongings he's been carrying around

Had been at Bed-Atlantic 10 mos ago, had moved to Alabama but had to return

5 nights of o/n beds

Was sent to Wards Island last night

Had surgery on his toe 3 wks ago and had a cane

client name

client number

New entrant

Slept on 2nd floor of Bellevue last night, had been waiting at Bed-Atlantic all day

Suffers from paranoid schizophrenia, has not taken meds in 3 mos

Has no Medicaid, had lost his disability benefits which he'd had in Florida

Was hit by a truck in 1976 and lost a kidney and spleen

Had come to CFTH and talked to employee name, had been a CFTH client back in the 1990s

We talk to supervisor who says that he's preparing manifests for "Porter" (Peter Jay Sharpe), Pamoja, and BELLEVUE – he says IVC had told him there were beds there

We leave around 1:45 am, see a bus waiting on the street, all of the men still in WR

#### Bellevue

We return to Bellevue at 2:20 am, I count

9 men in bus WR, most asleep – I see that several men were men we'd seen on 7th floor 12 men in triage 3 men in IVC

We go to 2nd floor, east wing, where beds are normally held in reserve, I entered every dorm and counted 10 empty beds with bare mattresses

As we leave, supervisor tells us a bus left for BRC Palace and Forbell earlier

We leave at 2:40 am



#### BRIEFING PAPER NYC Homeless Shelter Population Reaches All-Time High

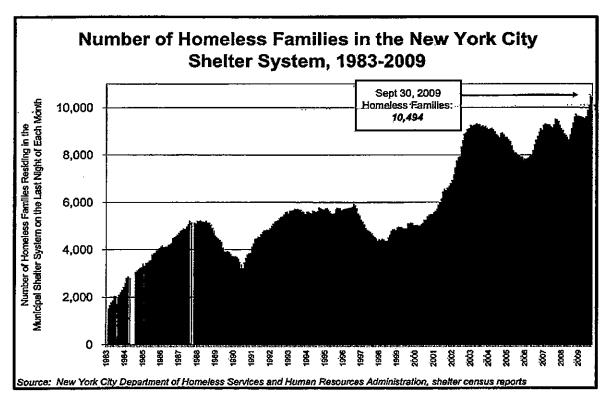
Over 39,000 Homeless People and 10,000 Homeless Families in Shelters Each Night; 45 Percent More New Yorkers Homeless Each Year Since Mayor Bloomberg Took Office

October 13, 2009

By Patrick Markee, Senior Policy Analyst, Coalition for the Homeless

Newly released data show that, for the first time ever, more than 39,000 homeless New Yorkers – including more than 10,000 homeless families, an all-time high — sleep in municipal shelters each night. City data also show that, since Mayor Bloomberg took office, 45 percent more New Yorkers sleep in municipal homeless shelters each year. All in all, the new City data confirm that the current year is the worst on record for New York City homelessness since the Great Depression of the 1930s. Following are the highlights:

- There are now more than 39,000 homeless adults and children sleeping in the New York City shelter system each night the first time ever the shelter population has reached this level.
- There are also more than 10,000 homeless families (with more than 16,500 children) sleeping each night in New York City shelters, an all-time record. Since last year the number of homeless families sleeping each night in municipal shelters has increased by 12 percent.
- During the recently-ended City fiscal year, more than 120,000 different New Yorkers (including nearly 44,000 children) slept in municipal homeless shelters. And since Mayor Bloomberg took office, 45 percent more New Yorkers sleep in municipal shelters each year.



By every available measure, homelessness in New York City has not only worsened dramatically over the past year, but also has risen to historically record levels.

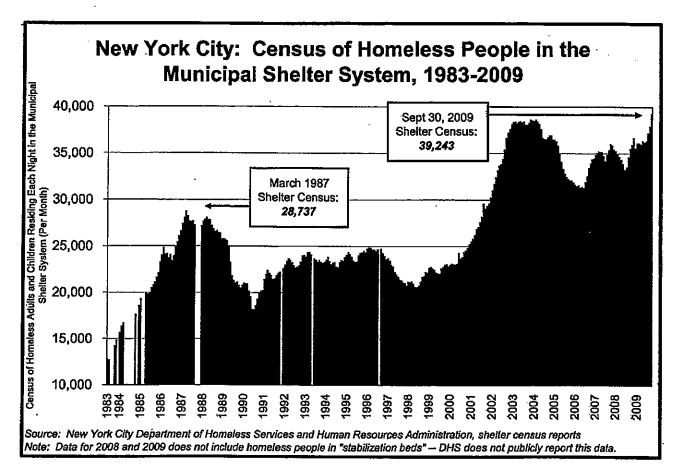
The new City data is further evidence for an immediate change in the Bloomberg administration's approach to homelessness. Mayor Bloomberg's 2004 five-year plan to reduce homelessness by two-thirds has failed, and homelessness in New York City is now worse than ever. The Bloomberg administration's central homeless policies must be reformed.

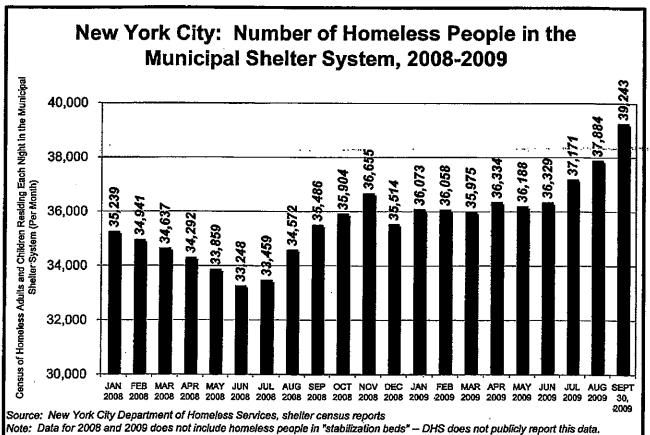
Coalition for the Homeless calls on the next New York City mayor to abandon the current approach to homelessness and instead to embrace proven, successful policies that will genuinely reduce homelessness. This includes providing long-term affordable housing assistance (including Federal housing aid) to homeless families and children, and providing permanent supportive housing for homeless people living with mental illness and other disabilities.

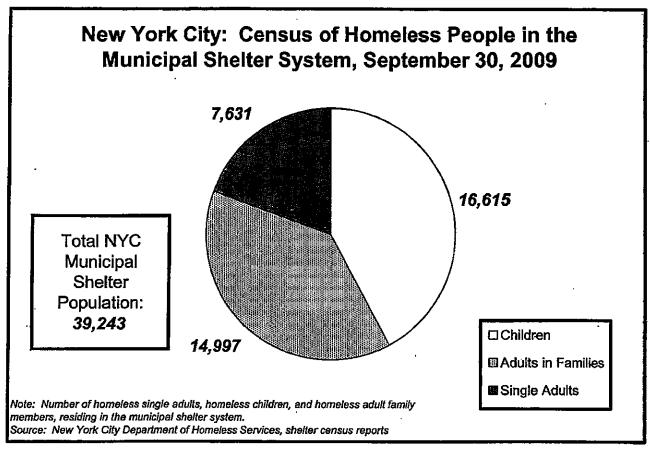
#### 1. All-Time Record New York City Homeless Shelter Population

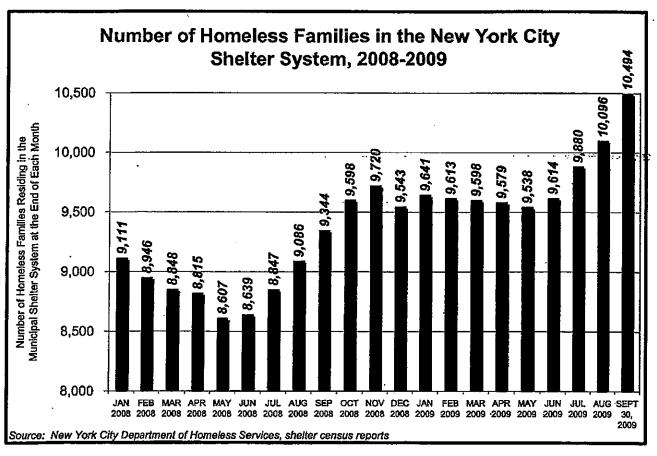
Amidst rising unemployment and the acute shortage of low-cost rental housing, the number of homeless people and the number of homeless families in New York City municipal shelters has reached all-time record highs. Following are highlights of recently released City data:

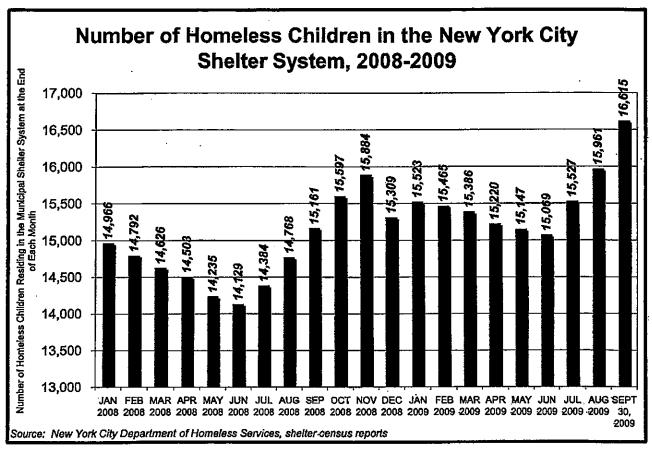
- At the end of September there were 39,243 homeless adults and children sleeping in New York City
  municipal shelters, an all-time record. This is the first time ever that the number of homeless people
  sleeping each night in the New York City shelter system has exceeded 39,000 people.
- Since last year, the number of homeless adults and children in New York City shelters each night has increased by 11 percent.
- At the end of September there were 10,494 homeless families sleeping in New York City municipal shelters, an all-time record.<sup>2</sup> In late August the number of homeless families in municipal shelters each night exceeded 10,000 families for the first time ever.
- Since last year, the number of homeless families in New York City shelters each night has increased by 12 percent.
- At the end of September there were 16,615 homeless children sleeping in municipal shelters.<sup>3</sup> Over the past year the number of homeless children in shelters has increased by 10 percent.
- The growing homeless family shelter population has been driven by historically high numbers of newly
  homeless families entering the municipal shelter system. In August, an all-time record 1,914 new
  homeless families entered the shelter system, and the past year has seen the largest number of new
  homeless families entering shelters since modern homelessness began.<sup>4</sup>
- As Coalition for the Homeless noted in a recent briefing paper, the number of homeless single adults
  has also increased significantly during the past year, and the municipal shelter system is currently
  on the verge of running out of beds for homeless single men and women.<sup>5</sup> At the end of
  September there were 7,631 homeless single adults in municipal shelters, an increase of 11
  percent from the previous year.<sup>6</sup>

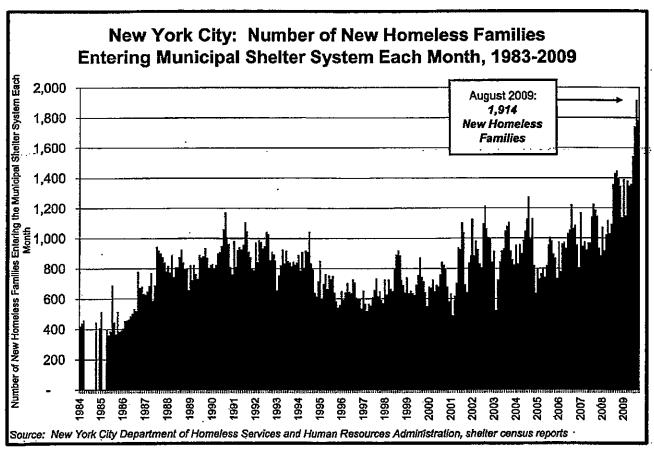


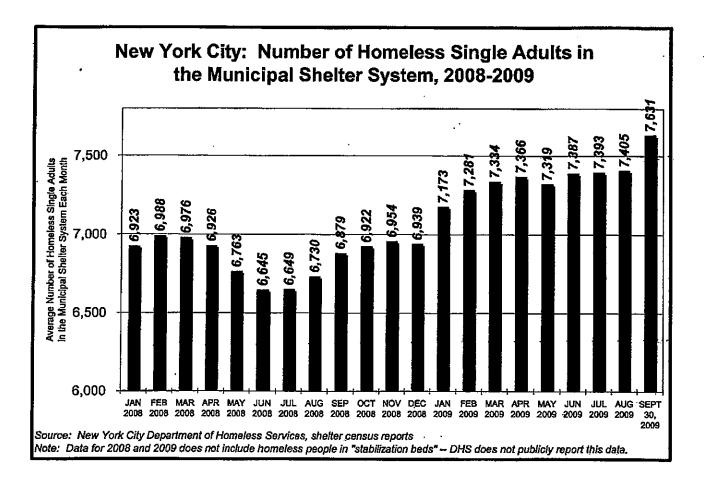










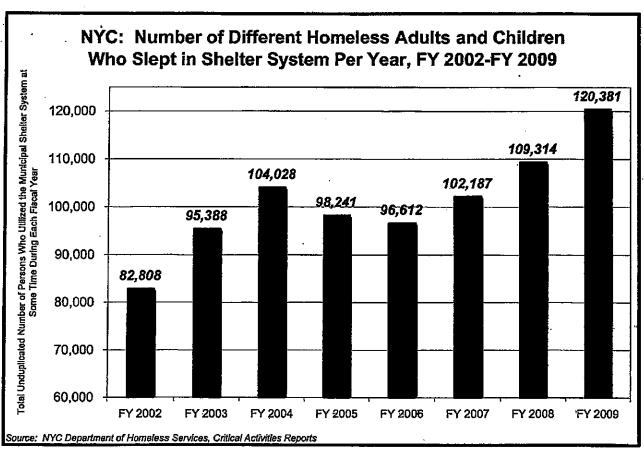


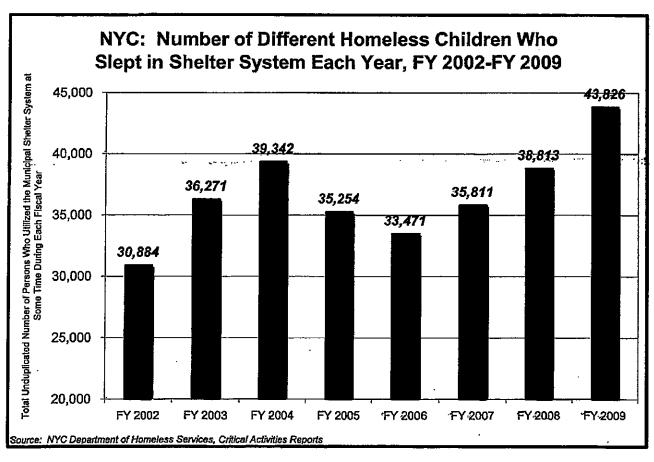
#### 2. More New Yorkers Experiencing Homelessness Each Year

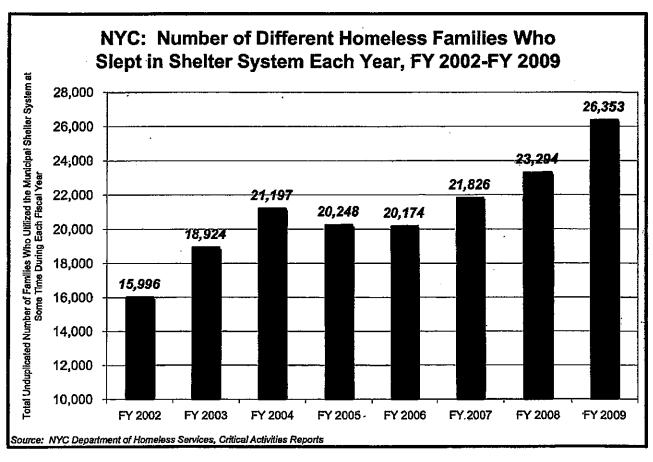
Recently released City data show that, during the past City fiscal year, 45 percent more New Yorkers slept in municipal shelters than when Mayor Bloomberg took office. Indeed, over the past year more New Yorkers – and more New York City families and children – experienced homelessness than at any time since the Great Depression of the 1930s. Following are highlights of the new City data:

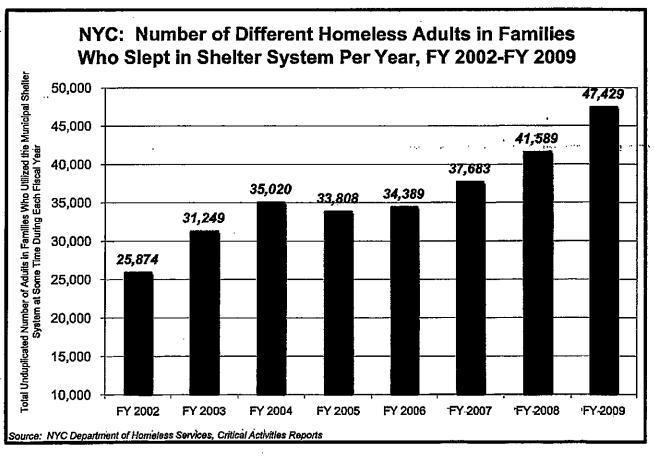
- During the recently-ended City fiscal year (FY 2009), an all-time record 120,381 different homeless men, women, and children slept in the New York City municipal shelter-system.
- The number of homeless New Yorkers sleeping in municipal shelters in FY 2009 was 10 percent higher than the previous fiscal year, and was 45 percent higher than FY 2002, when Mayor Bloomberg took office.
- During FY 2009, an all-time record 43,826 different homeless New York City children slept in the municipal shelter system. This was 13 percent more than the previous fiscal year, and 42 percent more than FY 2002, when Mayor Bloomberg took office.
- During FY 2009, an all-time record 26,353 homeless New York-City families slept in the municipal shelter system. This was 13 percent more than the previous fiscal year, and 65 percent more than FY 2002, when Mayor Bloomberg took office.
- During FY 2009, an all-time record 47,429 homeless New York City adults in families slept in the
  municipal shelter system. This was 14 percent more than the previous fiscal year, and 83 percent more
  than FY 2002, when Mayor Bloomberg took office.

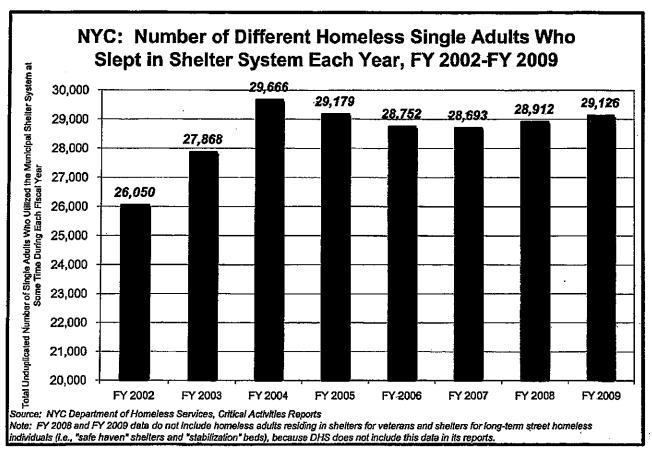
- During FY 2009, 29,126 homeless New York City single adults slept in the municipal shelter system.<sup>8</sup>
   This was 1 percent more than the previous fiscal year, and 12 percent more than FY 2002, when Mayor Bloomberg took office.
- Over the past year the cost of sheltering homeless families also increased significantly. According to the
  recently released "Mayor's Management Report," in FY 2009 the annual cost of sheltering a
  homeless family was \$38,405, which was a 5 percent increase from the previous fiscal year.<sup>8</sup>
- In FY 2009 the City of New York spent more on emergency shelter and services for homeless New Yorkers than at any time since modern homelessness began. According to the "Mayor's Management Report," in FY 2009 the NYC Department of Homeless Services' total expenditures were \$865.1 million, which was 10 percent (\$79.6 million) higher than the previous fiscal year and 60 percent (324.9 million) higher than in FY 2002, when Mayor Bloomberg took office.<sup>10</sup>

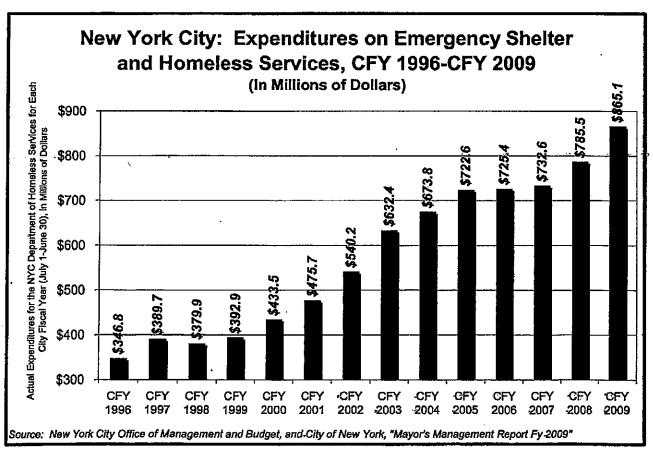


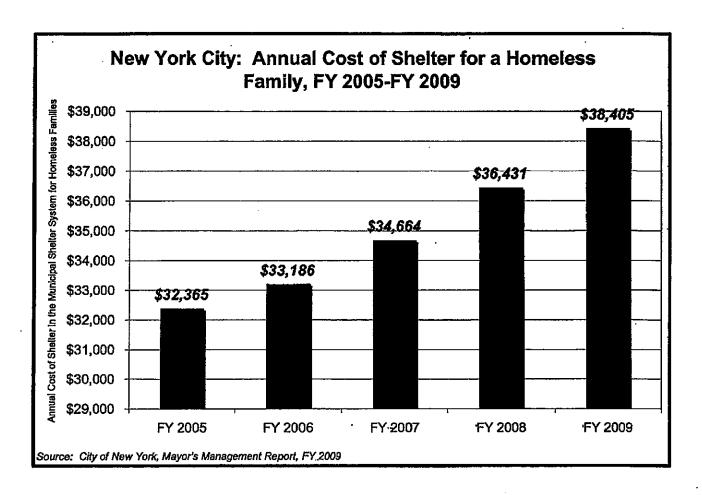












#### 3. Changing Course: The Need for Immediate and Long-term Action

Amidst rising unemployment and the ongoing shortage of affordable rental housing, New York City's next mayor must abandon the flawed policies that have led to all-time record homelessness. The Bloomberg administration's central homeless policies are: (1) cutting off homeless New Yorkers from Federal housing assistance; (2) replacing the proven Federal programs with flawed and untested temporary rent subsidies that create a revolving door back to shelter; and (3) relying on a discredited and punitive "behaviorist"-approach to homelessness.

Above all else, the next mayor must abandon these failed homeless policies that have dominated New York City for more than 15 years, during both the Giuliani and Bloomberg administrations. *Indeed, in the midst* of spiraling New York City homelessness and the worst economic downturn since the Great Depression, the only two major homeless policies introduced by Mayor Bloomberg this year were (1) rules to force working-poor homeless families to pay for the cost of shelter; and (2) rules allowing the City to eject homeless families and children from shelters to the streets for missing appointments or if their welfare cases are closed.

The time to change course has arrived. New York City's next mayor must embrace proven, successful policies that genuinely address the housing affordability crisis affecting growing numbers of New Yorkers. Following is a summary of immediate steps the next mayor can take to reduce homelessness in New York City:

#### a. Target Federal Housing Aid to Homeless New Yorkers:

 In 2005, the Bloomberg administration cut off homeless New Yorkers from longstanding priority for Federal housing programs, including Section 8 rental vouchers and public housing.

- This year the City will distribute more than 10,000 Section 8 vouchers and more than 5,000 public housing apartments will be available to rent – but virtually none to homeless people.
- Numerous studies show that Section 8 vouchers successfully reduce family homelessness. Indeed
  Section 8 vouchers and public housing were the primary, successful vehicles by which previous mayoral
  administrations moved the majority of homeless families from shelters to permanent housing.
- Reversing the Bloomberg administration's misguided policy will move thousands of homeless families to permanent housing and will save City taxpayer dollars spent on emergency shelter.

#### b. Accelerate Construction of Permanent Supportive Housing:

- In 2005, the City and State signed a ten-year agreement to provide permanent supportive housing for homeless people living with mental illness and other special needs. However, more than half of the newly-constructed supportive housing – 3,276 units of the planned 6,250 new units – will not be built until at least 2011.
- City and State officials should accelerate the development of supportive housing for homeless people with special needs.

#### c. Halt Referrals of Homeless Adults to Illegal Dwellings:

- The City has referred thousands of homeless adults including many living with mental illness to more than 120 unsafe, illegal boarding houses.
- City inspectors have issued vacate orders to at least 15 illegal boarding houses due to health and fire safety risks forcing the residents to return to shelters or the streets.
- City officials should halt referrals of homeless adults living with mental illness or other disabilities to illegal boarding houses.

#### d. Ensure Sufficient Shelter Capacity for Homeless New Yorkers This Winter:

- New York City's next mayor will take office while the number of homeless single adults is rising, both
  due to high unemployment and due to the seasonal, cold-weather rise in need for shelter.
- The NYC Department of Homeless Services must ensure that there are sufficient shelter beds in the municipal shelter system immediately to meet the rising need for shelter.

For more information, please visit www.coalitionforthehomeless.org.

All nightly shelter census data in this briefing paper is from reports produced by the NYC Department of Homeless-Services (DHS). The data in this briefing paper, which is consistent with City homelessness data reported for more than 25 years, is more comprehensive than the more limited data available on the DHS website. Since 2005 the DHS website has, for reasons that have never been explained publicly, excluded data on homeless families and individuals residing in several different types of municipal shelters. For this reason, currently the DHS website's homepage fails to include approximately 1,300 to 1,400 homeless people sleeping each night in municipal shelters, including approximately 200 families (with approximately 600 people) who reside in homeless shelters administered by the NYC Department of Housing Preservation and Development; approximately 370 people residing in DHS shelters for homeless veterans; and approximately 380 people residing each night in DHS "safe haven" shelters, which are restricted to chronically street homeless adults. (Note that the large majority of shelters for veterans and "safe haven" shelters were once included as part of DHS's daily adult shelter census report.) However, note that this briefing paper does not include data for homeless people sleeping in DHS "stabilization beds," which are also restricted to chronically street homeless adults; DHS has never publicly released this data, although currently there are approximately 150 to 200 homeless people in "stabilization beds" each night.

<sup>&</sup>lt;sup>2</sup> Data for homeless families is from DHS's "Emergency Housing Services for Homeless Families Monthly Report," which has been published by the City since the early 1980s. As noted above, this DHS monthly report includes approximately 200 families (with approximately 600 people) who reside in homeless shelters administered by the NYC Department of Housing Preservation and Development.

<sup>&</sup>lt;sup>3</sup> Data for homeless children is also from DHS's "Emergency Housing Services for Homeless Families Monthly 'Report."

<sup>4</sup> Data for new families entering the municipal shelter system – which includes families new to the shelter system and those returning after more than 30-days – is also from DHS's "Emergency Housing Services for Homeless Families Monthly Report."

<sup>5</sup> Coalition for the Homeless, "Capacity Crunch: The NYC Shelter System Risks Running Out of Shelter Beds for

Coalition for the Homeless, "Capacity Crunch: The NYC Shelter System Risks Running Out of Shelter Beds for the Rising Number of Homeless Single Adults," October 4, 2009, available at <a href="www.coalitionforthehomeless.org">www.coalitionforthehomeless.org</a>.

Data for homeless single adults in municipal shelters is from three sources: (1) DHS daily census reports for shelters for homeless single men and women, which have been produced daily by the City-since 1982; (2) DHS census reports for shelters for homeless veterans; and (3) DHS census reports for "safe haven" shelters, which are restricted to chronically street homeless adults. (Note that the large majority of shelters for veterans and "safe haven" shelters were once included as part of the DHS daily adult shelter census report. These shelters were "converted" to different service models beginning in 2007 and were then excluded, in various stages, from DHS daily adult shelter census report and from DHS's website.) As noted above, data for homeless single adults does not include data for homeless people sleeping in DHS "stabilization beds," which are also restricted to chronically street homeless adults; DHS has never publicly released this data, although currently there are approximately 150 to 200 homeless people in "stabilization beds" each night.

<sup>7</sup> Data on the (unduplicated) number of different homeless adults and children sleeping in municipal shelters during each City fiscal year is from the NYC Department of Homeless Services' "Critical Activities Reports," for FY 2002 through FY 2009, available on the DHS website, <a href="www.nyc.gov/dhs">www.nyc.gov/dhs</a>. (The City of New York fiscal year is from July 1st to June 30th.) Note that the "Critical Activities Reports" do not state whether the data for homeless single adults includes shelters for homeless veterans, "safe haven" shelters, and/or "stabilization beds." Therefore the reports may not include data for some homeless single adults who used municipal shelters in FY

2008 and FY 2009.

<sup>8</sup> As noted above, the DHS "Critical Activities Reports" do not state whether the data for homeless single adults includes shelters for homeless veterans, "safe haven" shelters, and/or "stabilization beds." Therefore the reports may not include data for some homeless single adults who used municipal shelters in FY 2008 and FY 2009.

<sup>9</sup> City of New York, Mayor's Office of Operations, "Mayor's Management Report FY 2009," available at

www.nyc.gov.

10 Data on NYC Department of Homeless Services expenditures is from the NYC Office of Management and Budget (budget documents for various City fiscal years) and the Mayor's Office of Operations, "Mayor's Management Report FY 2009," all available at <a href="https://www.nyc.gov">www.nyc.gov</a>.

| OTDA  | Appropriation<br>2009-2010<br>Enacted                          | ₹″ ₪               | Appropriation<br>2010-2011<br>Exec. Budget |                     | Reductions/<br>Eliminations            | Additions  | 48  |
|---|--|--------------------|--|---------------------|--|------------|-----|
| I ANF<br>Emergency Homeless Needs<br>Supplemental Homelessness Intervention Program<br>Supportive Housing for Homeless Families<br>Emergency Food Supplement - Food Banks | \$ 2,000,000<br>\$ 5,000,000<br>\$ 5,000,000                   | ↔                  | 0<br>0<br>0<br>10,000,000                  | <del>\$ \$ \$</del> | 2,000,000<br>5,000,000<br>5,000,000    | 10,000,000 | 000 |
| General Fund<br>SRO Support Services<br>Homelessness Intervention Program   | N  | <del>\$</del> \$   | 17,664,300<br>2,669,400                    | မှာ မှာ             | 2,735,700<br>1,015,600                 |            | ÷   |
| Eviction Prevention Program Adult Shelter Cap* Shelter Medical/Overcrowding Remediation Cap (Mixon) Operational Support for AIDS Housing NY/NY III                        | \$ 4,500,000<br>\$ 74,698,000<br>\$ 10,000,000<br>\$ 1,092,000 | <del>•</del> • • • | 4,500,000<br>0<br>0<br>982,800<br>625,000  | <del>↔ ↔ ↔</del>    | 78,000,000<br>10,000,000<br>109,200    | 625,000    | 000 |
| Fiduciary<br>Shelter Violations Witholding Reimbursement  | 000'006'6 \$   | <del>\$</del>      | 000'006'6                                  |                     |  |            |     |
| OCFS** General Fund Runaway and Homeless Youth NYNY III   | \$ 5,235,048<br>\$ 2,137,000                                   |                    | 4,711,600<br>2,137,000                     | ₩                   | 523,448                                |            | •   |
| Total Total accounting for cash adult shelter reimbursements.***  | ·  |                    |  | ₩                   | 104,383,948 <b>\$</b><br>\$109,383,948 | 10,625,000 | 000 |

Note: NYS DOB and NYC OMB disagree about the size of the cut in state funds due to the elimination of this appropriation. Total accounting for cash adult shelter reimbursements.\*\*\*

Attached are NYS DOB, NYC OMB and Coalition for the Homeless calculations. Some show cash of \$93 million in lieu of accrued or appropriated amounts.

<sup>\*\*</sup> Note that other changes to Title XX appropriations may result in additional cuts to reimbursements for shelter.

<sup>\*\*</sup>DOB calculated their cost impact using \$93 million to account for actual current state payments for adult shelter.

Analysis by Coalition for the Homeless, Shelly Nortz, Deputy Executive Director for Policy (518-436-5612)

# NYS DOB Calculation

- (\$2,700 per family per month/2 = \$1,350 per adult per month claimable net of client contribution)1. Assume shelter for adult claimable cost/month from public assistance = 1/2 of average homeless family claim/month net of "client contribution."
- (\$1,350 claimable/bed/ month x 7,000 beds x 12 months = \$113,400,000 claimable/ year from public assistance for adult shelter operations.) 2. Assume average 7,000 beds per month and that all homeless continue to be sheltered and all are eligible for public assistance.
- (\$113,400,000 claimable/ year \* .50 = \$56,700,000 state share from public assistance for adult shelter operations net of client contribution.) 3. Assume 50% state share.
- (\$93,000,000 \$56,700,000 state share claimable under public assistance = \$36,300,000 in state savings assumed to be paid to NYC in client 4. Actual current state payments to NYC for adult shelter operations including Mixon are \$93 million.

contributions from SSI and wages.)

# NYC OMB Calculation

- 1. Actual claimable expenses for NYC shelters for adults are \$264 million/year for 7000 beds (\$3,143/ bed per month, not \$1,350/ bed per month.)
- 2. Actual rate of receipt of public assistance by shelter for adults occupants is 24 percent, not 100 percent.

(\$264,000,000 \* .24 = \$63,360,000 in gross possible public assistance claims)

3. Assume 50% state share.

 $(\$63,360,000^{\circ}*.50=\$31,700,000$  in possible public assistance claims for occupants of shelters for adults.)

4. Current claims under cap are \$88 million.

(\$88,000,000-\$31,700,000=\$56,300,000 loss to NYC from NYS for operation of shelters for adults.)

# Coalition for the Homeless Calculation

- 1. Actual claimable expenses for NYC shelters for adults are \$264 million/year for 7000 beds (\$3,143/ bed per month, not \$1,350/ bed per month.)
- 2. Assume rate of receipt of public assistance by shelter for adults occupants will be one-third, up from 24 percent, not 100 percent as state assumes.

(\$264,000,000 \* .33 = \$87,120,000 in gross possible public assistance claims)

3. Assume 50% state share.

(\$87,120,000\*.50 = \$43,560,000 in possible public assistance claims for occupants of shelters for adults.)

4. Current cash payments including Mixon are \$93 million.

(\$93,000,000-\$43,560,000 = \$49,440,000 loss to NYC from NYS for operation of shelters for adults.)

5. Actual NYC shelter for adults admissions = 23,097. Assume 33 percent receive public assistance, up from 24 percent.

(7,699 adults receiving pa -5,543 already receiving pa =2,156 more adults receiving pa.)

- (2,156 \* \$45 \* 3 months = \$291,060 in new personal needs allowance costs \* .50 = \$145,530 new state cost; new city cost per year.) 6. Actual average length of stay in shelter = 3 months. Assume 3 months in shelter and \$45 per person per month in personal needs allowances.
- 7. Assume 9 months in housing on public assistance.

(2,156 more public assistance recipients \* \$366,10 in public assistance/ month \* 9 months = \$7,103,804 in new public assistance costs/ year.)

8. Assume 50 percent state and city shares.

(\$7,103,804 \* .50 = \$3,551,902 state and city shares of new costs in housing.)

9. Added State costs are \$3,551,902 + \$145,530 = \$3,697,432. Added city costs = \$3,697,432. (Total city and state added cost per year = \$7,394,864.)

10. NYC income loss plus new expenses = \$49,440,000 + \$3,697,432 = \$53,137,432.

# Logical Conclusion of DOB Assumptions

public assistance). These shelter occupants would qualify for \$2,988,360 in personal needs allowance payments for an average of three months, and Coalition for the Homeless calculations and those of OMB accept some but not all of the DOB assumptions – we do not assume that all will qualify equally by the city and state at \$37,962,133. This would not only fully offset the state's assumed \$36 million in savings, but it would actually result increased costs would include personal needs allowances and welfare benefits for 22,136 new recipients (above the 24 percent that already receive \$72,935,906 in added public assistance benefits over nine months once they move to housing. These new costs of \$75,924,266 would be shared for public assistance, for example. However, if 100 percent of shelter occupants qualify for public assistance as is assumed by DOB, then the in a net cost to the state of nearly \$2 million.

# Bottom Line:

City would be at least \$73,962,133 - far in excess of the projected \$36 million that NYS DOB unrealistically expects NYC to collect in shelter rent payments from SSI and wages of adult shelter occupants, and even well above the \$56 million in lost income projected by NYC OMB. If all shelter occupants become public assistance recipients as DOB assumes, the impact of lost revenue and increased costs to New York

Analysis by Coalition for the Homeless, Shelly Nortz, Deputy Executive Director for Policy (518-436-5612)

#### EMERGENCY/PROPOSED RULE MAKING NO HEARING(S) SCHEDULED

Temporary Housing Assistance I.D. No. SCS-47-95-00024-EP Filing No. 1927 Filing date: Nov. 6, 1995 Effective date: Nov. 6, 1995.

PURSUANT TO THE PROVISIONS OF THE State Administrative Procedure Act, NOTICE is hereby given of the following action: Action taken: Addition of section 352.35 to Title 18 NYCRR.

Statutory authority: Social Services Law, sections 20(3)(d), 34(3)(f),

131(1), 158(a) and 355(3)

Finding of necessity for emergency rule: Preservation of general welfare. Specific reasons underlying the finding of necessity: There is a critical need for temporary housing assistance for homeless families and individuals. The proposed regulations will ensure that temporary housing assistance is provided only to those persons who need such assistance. Subject: Temporary housing assistance for homeless families and indi-

Purpose: To set forth procedures for the provision of temporary hous-

Text of emergency/proposed rule: A new section 352.35 is added to read

352.35 Eligibility for temporary housing assistance for homeless per-

(a) Scope. This regulation governs the provision of temporary housing assistance to persons who are homeless. It sets forth the requirements with which an individual or family who applies for temporary housing must comply in order to be eligible for temporary housing assistance.

(b) Definitions.

(1) Assessment is the evaluation of an individual's or family's housing and housing-related public assistance and care needs including, but, not limited to, the availability of housing, the need for temporary housing assistance, employment and educational needs, the need for preventive or protective services, the ability to live independently, and the need for treatment of physical and mental health problems, including sub-

(2) Independent living plan is a plan developed and/or revised by a social services district and/or its designee, with the cooperation of an individual or family, which sets forth a strategy for meeting such individual's or family's housing-related public assistance and care needs as identified in an assessment and for obtaining housing other than temporary housing and which establishes such individual's or family's responsibilities during their receipt of temporary housing assistance and specifies the conditions upon which temporary housing assistance will be provided. An independent living plan also must specify the temporary housing facility, if any, to which the individual or family has been or will be referred, any requirements of such facility, and the expected duration of the individual's or family's receipt of temporary housing assişlence.

(3) Temporary housing includes family shelters and shelters for homeless pregnant women authorized by Parts 900 and 1000 of this Title and section 352.8(a).of this Part, room and board authorized by section 352.8(b) of this Part which is provided to a homeless person on a temporary basis, hotel/motel facilities authorized by section 352.3(e) of this Part and shellers for adults authorized by Part 491 of this Title.

(4) Temporary housing assistance is a public assistance benefit provided temporarily for an eligible homeless individual or family to meet

an immediate need for shelter.

(c) As a condition of eligibility for temporary housing assistance, individuals and families must comply with the requirements of this subdivision. Temporary housing assistance will be denied or discontinued under the conditions specified below. Temporary housing assistance will not be denied or discontinued for failure of the individual or family to comply with the requirements of this subdivision when such failure is due to the physical or mental impairment of the individual or family

(1) An individual or family must cooperate in and complete an assessment conducted by the social services district. When an individual or

family fails to cooperate in and complete the assessment, the social services district must deny the individual's or family's application for tem-

porary housing assistance.

. (2) An individual or family must cooperate with the social services district in developing, carrying out and completing an independent living plan, if the social services district, based on its assessment of the individual or family, has determined that such a plan will assist such individual or family to relocate to housing other than temporary housing. When an individual or family unreasonably fails to comply with the independent living plan requirements, the social services district must discontinue temporary housing assistance. When an individual or family unreasonably falls two or more times to comply with the independent living plan requirements, the social services district must discontinue temporary housing assistance and the individual or family is disqualified from receiving temporary housing assistance until the failure ceases or for 30 days, whichever period of time is longer.

(3) An individual or family must actively seek housing other than temporary housing, as required by the social services district; and not unreasonably refuse or fail to accept any such housing, including but not limited to, permanent housing, reunification with family or reloca-tion to other appropriate residential facility. When an individual or family fails to comply with these requirements, the social services district must discontinue temporary housing assistance until the failure ceases,

or for 30 days, whichever period is longer.

(4) An individual or family must refrain from engaging in acts which endanger the health or safety of oneself or others, or which substantially and repeatedly interferes with the orderly operation of a temporary housing facility. When an individual or family commits such acts, including but not limited to acts of violence, selling drugs, or repeated violations of the rules of a temporary housing facility, the social services district must discontinue temporary housing assistance until the failure ceases, or for 30 days, whichever period is longer.

(d) Prior to denying or discontinuing temporary housing assistance

pursuant to subsection (c) of this section, the social services district must evaluate the individual's or the family's need for protective services for adults, preventive services for children and protective services for chil-

dren and, if necessary, make an appropriate referral.

(e) A homeless individual or family applying for or receiving temporary housing assistance, pursuant to sections:352.3(e) or 352.8 of this Part or Parts 371 or 491 of this Title, also must comply with all other applicable public assistance and care requirements including, but not limited to:

(1) requirements for participation in employment and training programs, in accordance with part 385 of this title, including looking for work, engaging in training, accepting jobs and work assignments, and

participating in rehabilitative services;

(2) requirements for participation in rehabilitative services, as described in section 370.2(d)(7) of this Title and Part 385 of this Title;

(3) requirements for participation in the child support enforcement program, as described in sections 351.2(e)(2)(iv), 369.2(b) and 370.2(d) of this Title:

(4) requirements to apply for supplemental security income benefits, as described in sections 369.2(h) and 370.2(c)(5) of this Title;

(5) requirements for location of resources, as described in section 351.2(e) of this Title; and

(6) requirements for acceptance of the offer of a home, is described in section 370.2(c) of this Title.

Failure to comply with any public assistance and care requirements, including, but not limited to, those described above; will subject the

recipient of temporary housing assistance to the sunctions specified in

the applicable sections of this Title.

(f) A homeless individual or family applying for or receiving temporary housing assistance is subject to the income and resource requirements of this Title; and must cooperate with the social services district's efforts to determine available resources, and must apply for and use any benefits and resources that will reduce or eliminate the need for temporary housing assistance, in accordance with the provisions of this Title.

(g) A social services district must deny or discontinue a person's or family's temporary housing assistance if it determines that the person or family has other housing available, or if it determines, consistent with the regulations in this Title, that the person or family is required to, but

is not applying income and/or using available resources to reduce or eliminate the need for temporary housing assistance.

(h) Any individual or family whose application for temporary housing assistance is denied or whose temporary housing assistance is discontinued pursuant to subdivision (c) or (g) of this section, is entitled to a fair hearing, in accordance with subpart 358-3 of this Title.

This notice is intended to serve as both a notice of emergency adoption and a notice of proposed rule making. The emergency rule will expire February 3, 1996.

Text of rule and any required statements and analyses may be obtained from: Michael J. McNaughton, Policy Communications Unit, Department of Social Services, 40 N. Pearl St., Albany, NY 12243, (518) 473-6369

Data, views or arguments may be submitted to: Same as above.

Public comment will be received until: 45 days after publication of this police.

Régulatory Impact Statement

1. Statutory Authority:

These regulatory amendments are promulgated under the authority of sections 20(3)(d), 34(3)(f), 131(1), 158(a) and 355(3) of the Social Services Law (SSL): Sections 20(3)(d) and 34(3)(f) of the SSL authorize the Department of Social Services (Department) to establish rules; regulations and policies for the administration of public assistance and care within the State. Section 131(1) of the SSL requires the Department, insofar as funds are available, to provide assistance and care for persons unable to care for themselves. Section 158(a) of the SSL establishes the Home Relief (HR) Program under which any eligible person unable to care for himself or herself who is not receiving needed assistance and care under-other assistance programs is eligible for payments for support, maintenance and need. Section 355(3) of the SSL authorizes the Department to implement regulations to carry out the program of Aid to Dependent Children.

2. Legislative Objectives:

It was the intent of the Legislature in enacting the above statutes that the Department establish rules, regulations and policies so that people who are unable to provide for themselves can, whenever possible, be restored to a condition of self-support.

3. Néeds and Benefits:

The proposed regulations would add a new section 352.35 to 18 NYCRR which would set forth the requirements with which a homeless family or individual must comply in order to be eligible for temporary housing assistance. Temporary housing assistance is defined in the proposed regulations as a public assistance allowance provided temporarily, for eligible homeless individuals and families for housing.

There are currently no regulations that set forth specifically the responsibilities of homeless individuals and families who apply for temporary housing assistance. Procedures for reviewing applications for temporary housing assistance and providing such assistance differ among the social services districts. Sometimes, temporary housing assistance has been provided to homeless persons who have available housing or sufficient income and resources and no immediate need for temporary housing assistance. In addition, temporary housing assistance sometimes has been provided without regard to the ability of individuals or families to live independently, or without identifying their needs for housing-related assistance. As a result, available temporary housing assistance has been provided to persons who have other resources, or to persons who are reapplying for temporary housing many times because they have housingrelated needs which are not being met. These factors have created an excessive demand for temporary housing assistance and, in some social services districts, teduced the availability of temporary housing assistance. for the truly needy.

The need for temporary housing assistance for homeless families and individuals has become critical. It is necessary that action be taken immediately to protect the health and safety of such persons who have nowhere else to turn to obtain at least minimally acceptable temporary housing assistance.

Ensuring that temporary housing assistance is provided only to those persons who need it will help to relieve this crisis. This requires implementation of appropriate procedures in the social services districts to identify the needs and resources of applicants for and recipients of temporary housing assistance and, when possible, to assist homeless persons to obtain help to meet those needs, it also requires the cooperation of

the families and individuals who apply for temporary housing assistance. Procedures must be put in place to ensure that eligible homeless families and individuals accept temporary housing assistance and permanent housing that is available to them, remain in such housing, and cooperate in the process of determining and meeting their housing-related public assistance and care needs. In addition, social services districts must be able to deny or discontinue assistance to persons who disrupt the temporary housing system at the expense of the majority of homeless persons who need and cooperate in obtaining housing and available housing-related assistance:

The proposed regulations are intended to establish standards to enable social services districts to provide temporary housing assistance only to those who truly need it by establishing mechanisms to identify the housing related needs of persons who apply for assistance, and by ensuring that homeless persons cooperate in establishing their eligibility, obtain housing and cooperate with the social services districts in addressing their needs.

The proposed regulations define the assessment process and independent living plans for homeless persons. They require that applicants for temporary housing assistance cooperate in and complete assessments conducted by the social services districts and that they cooperate with the social services districts in establishing, carrying out and completing their independent living plans. They require social services districts to assess applicants for temporary housing assistance to determine their housing and housing-related needs, and to develop and complete independent living plans to meet those needs when the districts determine that such plans are necessary.

An assessment is the evaluation of an individual's or family's housingrelated public assistance and care needs, including, but not limited to, the availability of housing, the need for temporary housing, employment and educational needs, the ability to live independently and the need for treatment of physical and mental health problems, including substance abuse. Performing this assessment will help to ensure that temporary housing assistance is provided to persons who need it because they have no other available resources, and that the assistance provided to the applicant is appropriate. This assessment process cannot be accomplished without the cooperation of the homeless person.

An independent living plan is a plan that sets forth a strategy for meeting an individual's or family's housing-related public assistance and care needs. It specifies the conditions upon which the temporary housing assistance will be provided, the individual's or family's responsibilities during the receipt of temporary housing assistance, any requirements of the temporary housing relating to the responsibilities of residents, to which the individual or family is referred and the expected duration of the provision of temporary housing assistance. The temporary housing assistance of the individual or family would not be discontinued for failure to comply with the independent living plan if such persons, failure is as a result of the unavailability of necessary programs. Completion of an independent living plan will help facilitate an individual's or family's ability to live independently and avoid becoming homeless again.

The proposed regulations require that a homeless individual or family actively seek housing other than temporary housing (such as adult care facilities, permanent housing or reunification with family), and not unreasonably refuse or fail to accept any such housing. This requirement will help to make more temporary housing assistance available by requiring individuals and families to move from more expensive temporary housing as soon as possible.

The proposed regulations also require homeless persons to refrain from engaging in acts including, but not limited to, violence and selling drugs, which endanger the health or safety of such persons or others, or from engaging in acts which substantially and repeatedly interfere with the orderly operation of the temporary housing facility.

The proposed regulations provide sanctions for individuals or families who fail to comply with the above requirements or cooperate in the assessment process or with an independent living plan. If an individual or a family fails to cooperate with the assessment, the proposed regulations provide that the individual or family must be denied temporary housing estimators.

If the individual or family unreasonably fails to cooperate in veveloping or carrying out an independent living plan, the social services district must discontinue the temporary housing assistance. When an individual or family fails to cooperate with the assessment or fails to cooperate in developing or carrying out an independent living plan, the individual or family is not precluded from reapplying for temporary housing assistance. However, if the individual or family unreasonably fails two or more times to cooperate in carrying out an independent living plan, the social services district must discontinue the temporary housing assistance and the individual or family is disqualified from receiving such assistance until the failure ceases or for 30 days, whichever period of time is longer.

If an individual or family does not comply with the requirement to actively seek and not unreasonably fail to accept housing other than temporary housing, the proposed regulations provide that temporary housing assistance must be discontinued and the individual or family be disqualified from receiving temporary housing assistance until the failure

ceases or for 30 days, whichever period of time is-longer.

If an individual or family does not comply with the requirement to refrain from acts which endanger the health or safety of themselves or others including, but not limited to; violence and selling drugs, or which substantially and repeatedly interferes with the orderly operation of the temporary housing facility, the proposed regulations provide that temporary housing assistance must be discontinued and the individual or family be disqualified from receiving temporary housing assistance until the failure ceases or for 30 days, whichever period of time is longer.

In all cases, if the individual's or family's failure to comply with the

In all cases, if the individual's or family's failure to comply with the requirements is due to a physical or mental impairment of the individual or a member of the family, the temporary housing assistance may not be denied or discontinued on the basis of such failure. It is expected that these sanctions, will encourage homeless families and individuals to cooperate in the process of assisting them to obtain appropriate housing other than temporary housing as quickly as possible:

The proposed regulations require that before temporary housing assistance is denied or discontinued, the social services district evaluate the individual's or the family's need for protective services for adults, preventive services for children and protective services for children and, if

necessary, make an appropriate referral.

Finally, the proposed regulations provide that a homeless individual or family must comply with all other applicable requirements concerning eligibility for public assistance and care including, but not limited to, requirements for participation in employment and training in accordance with 18 NYCRR Part 385, including looking for work, engaging in training, accepting jobs and work assignments, and participating in rehabilitative services; requirements for participation in rehabilitative services as described in 18 NYCRR 370.2(d)(7) and 18 NYCRR Part 385; requirements for participation in the child support enforcement program, as described in 18 NYCRR 351.2(e)(2)(iv), 369.2(b) and 370.2(d); requirements to apply for supplemental security income benefits, as described in 18 NYCRR: 369.2(h) and 370.2(c)(5); requirements for location of resources, as described in 18 NYCRR 351.2(e); and requirements for acceptance of the offer of a home from a relative, as described in 18 NYCER 370.2(c). The regulations will clerify that the sanctions already established in law and regulation for the failure to comply with these requirements apply. These requirements are separate from and complement the requirements in the proposed regulations. Compliance with: them is integral to any plan to assist persons to become self-sufficient and to avoid homelessness.

4. Costs:

The requirement that the social services districts apply a temporary housing assistance recipient's income to the cost of such assistance should reduce the costs of providing temporary housing assistance to homeless single adults by \$320,000, \$160,000 of which is the State share and \$160,000 of which is the local share. This figure assumes that two percent of the homeless single adult population has a monthly average income of \$220 which is not currently being applied to the cost of the temporary housing assistance being provided.

There also is a projected savings of \$540,000; based on the expectation that some homeless families will leave temporary housing more quickly as a result of the proposed regulation which requires them to seek and accept housing other than temporary housing or become ineligible for temporary housing assistance. The State and local share of these savings will be \$135,000 each; the federal share of these savings will be \$270,000.

The remainder of the projected savings and costs are minimal. Therefore, these regulations should result in a net savings of \$869,700,

\$294,800 of which is the State and local shares.

51. Local Government Mandates:

Social services districts already assess the needs of applicants for public assistance and care, although the assessment process described in the proposed regulations might require more detailed assessments than are currently being conducted in some districts. An independent living plan is a new requirement in these proposed regulations. The social services districts will have discretion to determine when an independent living plan is needed and the terms and conditions of the plans will differ based on the circumstances of the individuals and families.

6. Additional Paperwork:

Social services districts will be required to prepare independent living plans for many homeless individuals and families. This preparation will require additional paperwork for the districts.

7. Duplication: .

The regulatory amendments, will not duplicate any federal or State requirements. They will clarify that homeless individuals and familiesmust comply with other requirements concerning eligibility for public assistance and care.

8. Alternatives:

The Department considered relying on existing regulations which generally require applicants for public assistance to cooperate in the application process, and to use available income and resources. However, it was determined that clarification and more specificity are necessary to ensure that the responsibilities of homeless persons who apply for temporary housing assistance are clearly stated, and to provide more specific consequences for families and individuals who do not cooperate in reducing their need for temporary housing assistance.

9. Federal Standards:

The regulatory amendments do not exceed federal minimum standards for the same subject.

10. Compliance Schedule:

Social services districts will be able to implement the provisions of the proposed amendments when the amendments become effective.

Regulatory Flexibility Analysis for Small Businesses

A regulatory flexibility analysis for small businesses of this proposed action is not required by section 202, a of the State Administrative Procedure Act. The proposed amendments would have no effect on any small business and there are no small business recordkeeping requirements, needed professional services, or compliance costs associated with these regulations. A regulatory flexibility analysis for small businesses is, therefore, not required:

Rural Area Flexibility Analysis

1. Types and estimated numbers of rural areas:

For purposes of the proposed regulations, "rural areas" are social services districts that are located in rural areas, as defined by the New York State Office for Rural Affairs. There are 44 social services districts which meet this definition of rural areas.

2. Reporting recordkeeping and other compliance requirements:

The proposed regulations would impose compliance requirements upon rural social services districts that provide temporary housing assistance to-homeless individuals or families.

Social services districts already assess the needs of applicants for public assistance and care, although the proposed regulations might require more detailed assessments than are currently being conducted in some districts. An independent living plan is a new requirement in these proposed regulations. The social services districts will have discretion to determine when such plans are needed and the terms and conditions of the plans will differ based on the circumstances of the individuals and

Social services districts will be required to prepare independent living plans for many homeless individuals and families. This preparation will require additional paperwork for the districts. However, there are very few homeless persons seeking temporary housing assistance from the social services districts in the rural areas.

3. Costs:

There are no capital costs associated with the proposed regulations.

The requirement that the social services districts apply a temporary housing assistance recipient's income to the cost of such assistance should reduce the costs of providing temporary-housing assistance to homeless single adults by \$320,000, \$160,000 of which is the State share and \$160,000 of which is the local share. This figure assumes that two percent of the homeless single adult population has a monthly average income

of \$220 which is not currently being applied to the cost of the temporary housing assistance being provided.

There also is a projected savings of \$540,000, based on the expectation that more homeless, families receiving temporary housing assistance will accept referrals to permanent housing, as a result of the proposed regulation which requires them to seek and accept permanent housing or become ineligible for temporary housing assistance. The State and local share of these savings will be \$135,000 each; the federal share of these savings will be \$270,000.

The remainder of the projected savings and costs are minimal. Therefore, these regulations should result in a net savings of \$869,700, \$294,800 of which is the State and local share,

4. Minimizing adverse impact:

The proposed regulations will have a minimal impact on the social services districts in rural areas because there are few homeless persons in such districts who are seeking temporary housing assistance. Furthermore, the social services districts will have to develop an independent living plan with recipients of temporary housing assistance only when the districts determine that such a plan-will assist the persons to obtain and maintain permanent housing.

5. Rural-area participation;

The proposed regulations were not provided to the social services districts in rural areas because their impact will be minimal in those areas, and because the social services districts are agents of the Department and will have an opportunity to comment on the proposed regulations, upon publication.

#### **EMERGENCY/PROPOSED RULE MAKING** NO HÉARING(S) SCHEDULED

Aid to Dependent Children I.D. No. SCS-47-95-00025-EP Filing No. 1928 Filing date: Nov. 7, 1995 Effective date: Nov. 7, 1995

PURSUANT TO THE PROVISIONS OF THE State Administrative Procedure Act, NOTICE is hereby given of the following action: Action taken: Amendment of sections 358-3.2, 358-5.2, 369.2(i). 369.3(a)(4) and 381.7 of Title 18 NYCRR:

Statutory authority: Social Services Law, sections 20(3)(d), 34(3)(f),

131(1), 131(6) and 355(3)

Finding of necessity for emergency rule: Preservation of general welfare. Specific reasons underlying the finding of necessity: Chapter 81 of the Laws of 1995 provides for the promulgation of regulations on an emergency basis to implement its provisions, including these requiring children to reside in an adult headed household as a condition of receiving Aid. to Dependent Children:

Subject: Living arrangements of families receiving Aid to Dependent Children in households headed by a person under the age of 18.

Purpose: To assure that minor parents in receipt of public assistance have the benefits of adult control and guidance.

Text of emergency/proposed rule: Subdivision (c) of section 358-3,2 is amended to read as follows:

(c) you are requesting a fair hearing concerning your food stainp beneffits and your household is planning to move away from the local social services district before the fair hearing decision would normally be is-

A.new subdivision (d) is added to section 358-3.2 to read as follows: (d) you have been denied assistance under the aid to dependent children program for yourself or your dependent child because:

(1) you are under the age of .18;

(2) you have never married;

(3) you either reside with and provide care for your dependent child or are pregnant;

(4) you are not residing in a place of residence maintained as a home by your parent, legal guardian or other adult relative or in an adultsupervised supportive living airangement; and.

(5) you have alleged that your physical or emotional health or safety or that of your dependent child would be jeopardized if you or such

child lived in the same residence with your parent or legal guardian and an investigation conducted in accordance with section 424 of the Social Services Law did not support your allegation.

Subdivision (c) of section 358-5.2 is amended to read as follows:

(c) When a hearing is requested pursuant to section 358-3,1(g) of this Part or has been given priority in accordance with section 358-3.2(d) of this Part, the hearing will be held within 30 days of the request, unless delayed by, or adjourned at the request of, the appellant.

Section 369.2 is amended to add a new paragraph (i) to read as follows: (i) Restriction, in payment to minor parents and pregnant minors. No individual who is under the age of 18 and has never married, who resides with and provides care for his or her dependent child (not including adoptive children) or is pregnant and otherwise entitled to ADC (a "minor parent"), shall receive ADC for himself, herself or any dependent child unless the individual and child or pregnant woman resides in the household of a parent, legal guardian, other relative of the individual who is over the age of 18 and is listed in paragraph (b) of section 369.1 of this Part or in an adult-supervised supportive living arrangement consisting of a private family setting or other living arrangement (not including public institutions, residential transitional independent living support programs for homeless youths operating pursuant to section 532d of the Executive Law or shelters for the homeless), which is maintained as a family setting, as evidenced by the assumption of responsibility in a parental capacity for the care and control of the minor parent and dependent child or the direct provision of supportive services, such as counseling, guidance or supervision unless:

(1) the minor parent has no living parent or legal guardian whose

ereabouts is known; or

(2) no living parent or legal guardian of the minor parent allows the

minor parent to live in his or her home; or,

(3) the minor parent lived apart from his or her own parent or legal guardian for a period of at least one year before either the birth of the dependent child or the minor parent's having made application for as-

(4) the physical or emotional health or safety of the minor parent or dependent child would be jeopardized if they resided in the same residence with the minor parent's parent or legal guardian; or,

(5) there is otherwise good cause for the minor parent and dependent child to receive assistance while living apart from the minor parent's parent, legal guardian, other adult relative or an adult-supervised supportive living arrangement. Good cause shall mean that the parent or guardian who offers a suitable home to the pregnant minor or minor parent will not extend the offer to the minor's child.

The opening language of paragraph (4) of subdivision (a) of Section

.369.3 is amended to read as follows:

(4) Grants to minors. Unless required to comply with the requirements specified in section 369.2(i) of this Part, a [A] minor 16 years of age or over may be designated as grantee on behalf of his or her own child or of his or her younger brothers and sisters; a child under 16 years of age cannot be designated the grantee. When pregnancy is verified and a deprivation factor is established, a minor 16 years of age or over may be designated as grantee of ADC benefits on her own behalf from the beginning of the sixth month of her medically verified pregnancy.

A new subdivision (d) is added to section 381.7 to read as follows: (d) Where possible, benefits to be paid on behalf of an individual, individual and child or pregnant woman, required under section 369,2(i). of this Title to reside with a parent, legal guardian, adult relative or in an adult supervised living situation, must be provided by the social-serv ices district to the parent, legal guardian or other relative with whom the individual, individual and child or pregnant woman resides.

This notice is intended to serve as both a notice of emergency adoption and a notice of proposed rule making. The emergency rule will expire

February 4, 1996.

Text of rule and any required statements and analyses may be obtained from: Michael J. McNaughton; Policy Communications Unit, Department of Social Services, 40 N. Pearl St., Albany, NY 12243, (S18) 473-

Data, views or arguments may be submitted to: Same as above. Public comment will be received until: 45 days after publication of this

This action was not under consideration at the time this agency's regu iatory sgenda was submitted. 🔝

# Hunger Action Network of New York State Human Services Budget Hearing Testimony Delivered by Andreas Kriefall, Upstate Director, Wednesday, February 10, 2010

Hunger Action Network of New York State is a statewide membership organization of direct food providers, advocates and other individuals whose goal is to end hunger and its root causes, including poverty, in New York State. The state's 3,000 emergency food programs help feed an estimated three million New Yorkers annually - a 50% increase in the last two years due to the recession.

The recession that began in December 2008 has been the steepest and longest since the Great Depression and will likely continue to get worse in New York. New York has lose 329,300 jobs since July 2008; in December 2009, 850,000 New Yorkers were unemployed. Food stamp usage has skyrocketed from 1.8 to 2.6 million.

Hunger Action Network feels a paramount concern of this budget should be fighting recession and creating jobs—fortunately this concern is also strategically in line with reforming NYS budget priorities and putting the state on a more sound fiscal footing. In the human services area, a major concern is the use of stimulus funds, whose purpose is precisely fighting recession and creating jobs.

Unfortunately, although we acknowledge the extraordinary difficulty of the state's choices in this context, we do not feel the Governor's proposed budget succeeds in making the best use of stimulus funds, and in fact makes some grave and consequential mistakes, mistakes we are looking to the legislature to rectify.

First, we urge the State legislature to restore the promised 2nd and 3rd year increase in the welfare grant to at least 10% a year. Putting money into the hands of extremely poor New York households is the best way to stimulate our economy. It is a mistake to save a very small amount of money (\$18 million) by cutting the welfare grant increase from 10 to 5%, especially at a time when the state is receiving an extra \$638 million in this budget cycle for such welfare expenditures (and an extra \$1.2 billion over 18 months).

After waiting 19 years for a raise in the basic grant, welfare recipients are being asked to wait again, to wait another three years to receive their promised increase. During their initial 19 years of waiting, welfare recipients already lost over 60% of the purchasing power of their grant for the barest necessities of life. Remember that more than half of welfare recipients are children. They are not waiting for salary bonuses or a new car, they are waiting for food, shelter, and clothing.

Every dime sent to these families goes straight into the local economy supporting small businesses and jobs. As government and academic and economists' studies have shown over and over—sending cash benefits to poor people vastly outranks tax breaks for the wealthy as a means of stimulating the economy in a recession because the money gets spent and circulates far more immediately and efficiently.

Hunger Action Network, and over 40 other signatories to our recent 21-day budget amendent letter to Governor Paterson on this issue, urge the legislature to remedy this terrible, unjust, and economically unsound mistake: the welfare grant should be 10%, as promised. Do not make welfare recipients wait still longer for relief, and do not diminish the state's effort to help New Yorkers hit hardest by recession to survive their economic hardship and experience opportunity on the other side of this downturn.

Second, with \$1.2 billion in TANF contingency and stimulus contingency money, New York State must do better in creating jobs: where the Governor proposes \$18 million for jobs in the welfare budget - a cut of more than \$50 million - we seek \$100 million.

Like so many across this country in the Great Recession, New Yorkers are waiting for jobs, good jobs that will enable families to sustain themselves without further government assistance. Using federal funding well means laying the groundwork now for the recovery, not resorting to short-term fixes.

And yet, in a stunning set of budget choices, Governor Paterson's budget actually chooses to cut the beginnings of new jobs programs from the welfare budget. At this time of joblessness and economic hardship, and in this moment of unprecedented federal aid—I repeat \$1.2 billion dollars of new money over two years, with the prime directive of job creation—the Governor's budget cuts back on jobs programs, which had received a boost to \$70 million last year, to a bare bones \$18 million this year.

As Hunger Action Network, many advocates and the federal Health and Human Services have documented, New York State has done poorly, much worse than other states. The Legislature needs to insist that the State and local welfare district do a better job of moving people from welfare to work. Helping to reduce the number of people receiving public assistance by finding them jobs and moving them out of poverty a goal on which all political parties, and all taxpayers, can surely agree. New York's poor performance in welfare to work has left many eligible New Yorkers not receiving the assistance they need and to which they are legally entitled to, while also dramatically shifting the welfare caseload from the federal TANF program to the state-county funded Safety Net program. The state- and locally-funded state safety net will be \$1.4 billion in the coming year, considerably larger than the federally supported TANF welfare program.

OTDA and local social service districts have pursued a "work-first" and a punitive, sanctions-oriented approach that has been shown to fail in making the welfare to work transition. One of the reasons the "work-first" approach fails is that OTDA and local districts do not have in place programs to effectively connect welfare participants with job training and education once they do manage to find a job. The districts have not done enough to increase the employability of welfare participants, and even those who do manage to find a job often end up back on welfare. While welfare rolls have decreased by significant percentages, these statistics mask several realities on the ground:

- The rate of "churn," of people moving in and out of welfare, has dramatically increased.
- Studies following individuals who have left welfare find them largely trapped in low-wage jobs and forced to rely on emergency food, Medicaid and other public assistance to support their families.
- Food Stamp and emergency food provider usage has been on the rise for years, and now is increasing
  even more dramatically since the recession. By far the largest percentage of new people in these
  programs are working poor, families with children who have work but cannot make ends meet.

Thanks in large measure to legislative add-ons and unexpected stimulus funding, NYS finally took a more innovative approach to job creation in mid-09-10, with \$70 million in jobs programs that have shown strong promise at providing better help to those seeking to enter the workforce.

But the Governor's proposed budget cuts the heart out of these promising new programs, scaling them back to \$18 million and missing another opportunity for the right kind of stimulus impact in New York State. In the simplest and starkest terms, out of 1,200 million dollars in job creation money available from the feds to NYS in 09-10 and 10-11, the Governor is proposing over two years only 90 million dollars for jobs, scarcely 7.4% for jobs.

Meanwhile, \$175 million dollars has been set aside to pay in advance the three years of counties' full share of the grant increase, even though it is virtually certain the economy will be stronger three years from now. In addition, Governor Paterson is proposing that the state divert \$261 million of stimulus money intended to assist

welfare participants in to general budget relief, lightening its share of paying the Earned Income Tax Credit, an obligation that needs to be paid with or without the stimulus and which creates no new jobs. Meanwhile, he is proposed no cuts in the \$964 million of surplus funds that the state had turned into a block grant for the counties (Flexible Fund for Family Services), a significant portion of which is diverted to providing fiscal relief to the counties. These budget lines represent worthy programs, but underlying them is the final grim choice: at a time when they are already bearing the brunt of the recession, the poorest people are being asked to subsidize the state's deficit, a deficit they themselves did nothing to create.

Hunger Action Network asks the state Legislature to do what the Governor has not done: use federal stimulus money wisely, create jobs while we can, and create a stronger basis for recovery.

Hunger Action is also opposed to the numerous other cuts that the Governor is proposing for TANF and the state's safety net, including the elimination of \$35 million in funding for summer youth employment, \$10 million for Career Pathways; and the more than \$100 million in cuts to various homeless prevention programs (e.g., Homeless Prevention Program; Homeless Intervention Program; Single Room Occupancy; Supportive Housing for Homeless Families.)

#### APPENDIX

# Soda and Stock Transfer Tax, Medicaid. Housing and Single Payer Health Care

Since this is the only testimony Hunger Action will be submitting on the budget, we wanted to comment on a few additional points.

We support the Governor's proposal for an excise tax on soda, but the proceeds should be more clearly earmarked to support anti-obesity, nutrition and health care programs. A soda tax is a critical step in the effort to reduce obesity, especially among children, and to promote better nutrition. Prior public opinion polls have shown strong support for the soda tax — if it is clearly linked to anti-obesity and children's health initiatives, as the NYS Department of Health itself admits. In New York, 52% of adults support a tax on soft drinks. If revenue from the tax is used to help prevent obesity among children and adults, 72% of New Yorkers would support such a tax. We do not feel that saying the funds will go to HCRA clearly establishes the linkage to anti-obesity programs needed to develop broader support.

Hunger Action supports using the proceeds both to increase anti-obesity programs and to reduce the regressive nature of the tax, which will hit low-income consumers the hardest. Options supported by Hunger Action include using the funds to increase state subsidies for the school meal program; fund Farm to School initiatives; support programs to bring affordable fresh fruits and vegetables to low-income neighborhoods; increase funding for emergency food programs (HPNAP); and, fund programs to increase purchases at farmers markets, including doubling the value of food stamps (SNAP) used at such markets. The group also supports a state supplement to the food stamp program.

Sugary soft drinks have been pinpointed repeatedly in medical studies as the biggest contributors to our obesity epidemic, which is impacting one in four New Yorkers. Obesity is linked to higher rates of many preventable illnesses such as diabetes, heart disease, cancer, asthma and hypertension. High sugary soft drink consumption increases the risk of diabetes by 83 percent in women according to a study in the Journal of the American Medical Association.

Nearly 25 percent of New York's children and 67 percent of adults are overweight or obese, costing \$7.6 billion a year to treat diabetes, heart disease and other obesity-related problems. Eighty-one percent of those medical costs are already born by the taxpayer through Medicaid and Medicare payments.

The calories from sugar-sweetened beverages are fundamentally different in the body than those from food. The main sweetener in soda — high-fructose corn syrup — can increase fats in the blood called triglycerides, which raises the risk of heart problems, diabetes and other health woes. This sweetener also doesn't spur production of insulin to make the body "process" calories, nor does it spur leptin, a substance that tamps down appetite, as other carbohydrates do.

Hunger Action supports the Empire State Housing Alliance campaign to win a \$500 million affordable

housing fund, with at least 10% going to rent subsidies. Too many low-income families are forced to spend 60 to 70% or more of their income on housing. That is unsustainable.

On revenue items, we support the positions of the Better Choice Budget Campaign, especially the antispeculation stock transfer tax and the tax on plastic bags.

New York's system of local and state taxes is regressive, with low-income New Yorkers paying twice as much of their income in state and local taxes as wealthy taxpayers such as Donald Trump. We favor restoring higher income taxes on millionaires, as well as a property tax circuit breaker to reduce the fiscal hit of local taxes on low and middle income residents.

The state presently collects a few pennies from each stock transfer but then rebates the proceeds – now \$16 billion – to traders. We support keeping at least a portion of the stock transfer tax as an anti-speculation measure following the recent meltdown of the financial markets. Such a tax can begin to check the systemic flaws and rampant greed of the financial markets.

In recent decades, New York has greatly flattened its once progressive personal income tax system, providing annual cuts of over \$15 billion primarily to wealthy taxpayers. The cuts in the state income tax rate have forced increases in the more regressive local sales and property taxes. Instead of oppressing low and middle income New Yorkers with higher local taxes, lawmakers need to shift more of the burden to wealthy people at the state level. It is clear that the \$30 billion in tax rebates and cuts is not sustainable.

On health care, we endorse the positions of Medicaid Matters NY.

Hunger Action supports making the Medicaid application and renewal processes as streamlined as possible. We support the proposals by the Governor to reduce documentation for individuals enrolled in community-based long term care and the elimination of the documentation for interest income (as long as the amount does not make the person ineligible for coverage). We support the three proposals that authorize the state to take advantage of cross-agency data matching for children and adolescents.

Hunger Action opposes elimination of the Medicaid and EPIC wraparound protection to Medicare Part D. Hunger Action supports the Governor's proposal to create 100 new slots for the Doctors Across New York program. We support the Governor's proposal to fund hospital charity care 100% based on units of service to the uninsured, but oppose the overall cut to charity care funding.

Hunger Action opposes the Governor's proposed to cap personal care and consumer-directed services at 12 hours per day. Anyone needing more than 12 hours per day would be required to switch to another option. Targeting people with the most significant needs who are already being served in the best, most cost-effective way does not make sense.

Finally, we urge the state legislature to cuts health care expenditures by enacting a state single payer health care system.

The rising cost of health care is a major concern for all segments of New York. Inadequate coverage, even among persons who are insured, has become a major cause of personal bankruptcies. An estimated 2.7 million New Yorkers are uninsured. Unfortunately, the recent Congressional effort to achieve universal health care from the very beginning fell far short of what was needed.

Hunger Action supports a universal health care system to provide quality, comprehensive health care service to all New Yorkers. The most common sense solution is a single payer financing system, similar to Medicare for All. (A2356/S2370) This system, used by almost all of the other industrial countries, eliminates the huge waste and paperwork of the private health insurance system.

In 2007 the State Legislature agreed to provide funding for an impartial cost-benefit analysis of the best way to provide health care to all New Yorkers. The report by the Urban Institute, released in July 2009, found that single payer was the best. Savings from single payer substantially increase over time. By 2019, single payer would save \$20 billion annually based on the report's projected 6% annual increase in baseline health care cost (\$130 billion for single payer vs. \$150.25 billion for present system). Single payer would cost \$28 billion less annually than the 18 public-private hybrids studied (i.e., expanding public programs like Medicaid, a small public option, and a mandate to obtain insurance, or in other words, the model Congress has pursued). A copy of the report is at <a href="http://www.partnership4coverage.ny.gov/">http://www.partnership4coverage.ny.gov/</a>).

Whatever universal health care system that is adopted by New York should lower rather than increase costs; administrative overhead should be reduced to less than 10% and a single form for doctor reimbursement should be instituted. Patients' care, not profits, should be the focus of our health care system. The health care system should be paid for in an equitable way: those with higher incomes should pay a higher proportion of their incomes than those with less. We define universal health care coverage to mean that 100% of residents are covered; requiring even modest premiums and co-pays will prevent many moderate income families from accessing health care.



# The Senate Finance and Assembly Ways and Means Committees Joint Legislative Hearing on Human Services in the 2010-2011 Executive Budget

February 10, 2010
Hearing Room B, Legislative Office Building

Prepared by:
Saima Akhtar, Staff Attorney
Susan Antos, Senior Staff Attorney
Kristin Brown Lilley, Director of Legislative Advocacy
Don Friedman, Senior Staff Attorney
Cathy Roberts, Senior Paralegal
Louise Tarantino, Senior Staff Attorney
Barbara Weiner, Senior Staff Attorney

Presented by:

Kristin Brown Lilley and Saima Akhtar

## I. Introduction

Thank you for the opportunity to testify today. My name is Kristin Brown Lilley and I am the Director of Legislative Advocacy for the Empire Justice Center and with me is Saima Akhtar, a Staff Attorney from our Albany office. Empire Justice Center is a statewide legal services organization with offices in Albany, Rochester, White Plains and Central Islip (Long Island). Empire Justice provides support and training to legal services and other community-based organizations, undertakes policy research and analysis, and engages in legislative and administrative advocacy. We also represent low-income individuals, as well as classes of New Yorkers, in a wide range of poverty law areas including public benefits, child care, child support, health, domestic violence, immigrant access to benefits, housing, employment, consumer, disability and civil rights.

We will be addressing the following topics today:

- TANF and Public Assistance:
  - Implement the Public Assistance Grant Increase as Scheduled
  - Restore Funding for the Disability Advocacy Program
  - Restore Funding for Non-residential Domestic Violence Services
- Child Care:
  - Increase Funding for Child Care in Order to Increase Parents Access to **Work During Difficult Economic Times**
  - Create Statewide Standards for the Administration of Child Care **Assistance Program**
- Citizenship Initiatives
- **Medicare Part D Counseling and Appeals**
- State Administration of SSI Supplement
- Access to Justice: Restore State Funding for Civil Legal Services

#### II. TANF and Public Assistance:

Before moving into this section, we must express our frustration with the numerous cuts in TANF funding for critical programs and services for poor and low income New Yorkers. TANF is an essential federal funding stream that is intended to be used for these benefits and services. The Contingency Fund and Emergency Contingency fund dollars provided by the federal government were crafted in a way that was meant to encourage states to maintain and invest in these types of services in recognition of the impact that the recession would have on low wage earners, job loss, and those who are unable to work or to find work. To see TANF funded programs cut, long awaited benefits increases delayed and desperately needed new investments, such

as child care assistance not materialize in a truly meaningful way in favor of general fund offsets is truly dismaying. We are cognizant of the financial pressures and cash flow problems facing the state. Indeed, as a nonprofit providing state funded services, we are suffering similar cash flow problems due to substantial delays in our state contracts. However, we strongly urge the legislature to work with the Governor to pursue other ways of finding savings or even better, identifying new revenue rather than diverting TANF dollars away from poverty prevention and work supports and into the general fund.

# a. Implement the Public Assistance Grant Increase as Scheduled.

In proposing a modest increase in the welfare grant in his 2009-10 budget, Governor Paterson said, "Since 1990, the world has changed dramatically, but the basic welfare grant has stayed the same, and the challenges facing the needlest among us have only increased. Though our resources are limited, this is a much needed investment to help assist vulnerable New Yorkers who are suffering as a result of the current economic crisis, far too many of whom are children."

His words are no less fitting today. Although the first incremental increase in the grant did take place, the increase raised the monthly basic allowance for a household of three from \$291 to only \$321. This represents a single 10% increase in the twenty years since 1990, a period during which the cost of living increased by more than 65%. Even if the remainder of the grant increase were implemented today, families in need would receive a grant that had lost half of its purchasing power relative to 1990. Clearly, doubling the time required for the phase-in will intensify the hardship faced by some of our state's poorest households.

At \$14 million, the cost of retaining the current grant increase schedule is relatively modest, particularly in light of the 68% decrease in the welfare caseload since 1994. The greatly diminished cost of cash assistance over time freed up substantial state and federal dollars for other purposes. Despite the financial difficulties the state is now in the midst of, the state simply cannot justify any attempt to wring yet more savings from New York's needlest by delaying implementation of this very modest increase in aid, particularly when other critical benefit programs are also being cut.

Virtually since its inception, public assistance has played a counter-cyclical role; when the economy is strong, fewer people need this aid, and when the economy is weak, need increases and the caseload increases, as the welfare system provides a modest buffer against destitution for those living in poverty. In the current recession, New York's Food Stamps program has performed in precisely this way, with the number of recipients increasing 40% from December 2007 through July of 2009. In glaring contrast, public assistance rolls increased by less than 6%. There can little doubt that

this unresponsiveness of the system has little to do with the level of need and more to do with rules and procedures that create insurmountable obstacles to families in need, As with the proposed delay in implementing the grant increase, shredding the safety net for poor New Yorkers by creating hurdles to accessing critical assistance is not a fair or ethical way to address the current budget shortfall.

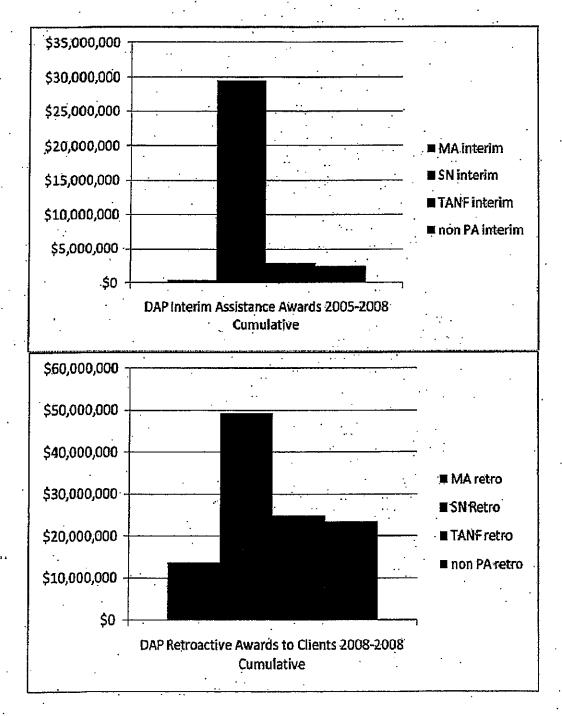
> We urge the legislature to restore maintain the welfare grant increase as scheduled under current law.

# b. Restore Funding for the Disability Advocacy Program (DAP).

Through the DAP program, legal services providers in every region of the state provide low income disabled New Yorkers with legal assistance when their SSI/SSD applications have been denied or their benefits terminated. Many of the clients represented receive welfare benefits while they await a decision about their application. For each successful case, the Social Security Administration provides a retroactive award to the client for benefits they would have received, beginning from the time of initial application and reimbursement to state and local governments for the benefits provided. With a success rate of 83% in 2007, well above the national average, the DAP program consistently generates federal reimbursement money for the state that far exceeds the state funding used to provide the services. Over the course of the past six years, the DAP program generated a total of over \$152 million in retroactive awards to clients to be spent in communities around the state and just under \$47 million in interim assistance paid to state and local governments.

OTDA estimates that \$3,180 in annual savings is generated for each Safety Net recipient able to secure Disability benefits with the assistance of DAP advocates. Again, according to OTDA, for each TANF recipient DAP providers successfully help, \$831 in annual savings is generated. In 2008 alone, DAP secured disability benefits for 996 Safety Net recipients, and 388 TANF recipients generating almost \$3.5 million in ongoing annual savings which compounds year after year, as these individuals stay off of state and local funded benefits and DAP helps more clients secure disability benefits.

Unfortunately, the ability of DAP providers to continue to generate this type of savings is being eroded - from almost fifteen years of flat funding combined with recent cuts in the general funding that allows providers to assist those who are in the 100% state and local funded Safety Net program. As you can see from the imbedded charts, the majority of interim awards and retroactive benefits are generated from Safety Net cases.



General funding for the Disability Advocacy Program in the 2010-11 Executive Budget proposal is slated for a 10% reduction, on top of the 8% cut enacted in the 2009-10 State Budget. TANF funding of \$1 million has been eliminated and replaced with \$2.5 million from the TANF Emergency Contingency Fund (ECF) – federal stimulus dollars that must be spent by September 30<sup>th</sup> 2010 and are available to provide "short term, non recurrent" services.

We certainly appreciate efforts to provide much needed funding to the DAP program through the ECF. However, the general fund dollars are essential to our ability to bring in the substantial savings state and local governments expect from the program. If the general funding cuts are adopted, we anticipate a substantial reduction in our ability to generate savings for the state if we are forced to reduce the number of Safety Net cases we open so that we have them in the pipeline for interim assistance and retroactive awards in the future.

Even before the funding reductions, providers have had to increasingly turn clients, and thus potential savings for state and local government, away due to lack of resources. This lack of resources has resulted in a reduction in the number of cases programs can close. Between 2004 and 2007, DAP saw an approximate 25% reduction in the number of cases closed, while maintaining the same high level of "wins"— over 80%.

An informal survey of DAP providers conducted by Empire Justice in early December 2009 found that, despite high demand, providers have had to utilize strategies such as waiting lists, scheduling appointments months into the future, severely limited intake of new cases, and even temporarily shutting down intake so that advocates can catch up. One program reported that they had an active case list of over 800 cases. Empire Justice only does intake two days a week for two hours because we are unable to meet the need. Of those who responded, 80% of programs indicated that flat funding has resulted in being able to serve fewer clients and thus generate less savings for the state. Many have had to jeopardize the quality of services because they are unable to hire experienced staff. Most have stopped doing any form of outreach or education about their services, as they simply cannot encourage people to call for assistance.

To help maintain the ability to generate the ongoing savings the DAP program produces for both the state and local governments the DAP program, we urge:

- Restoration of DAP General Fund Support at \$5.74 million the level it was funded at from 1995 until 2007. Because the program is funded at 50% state and 50% local cost, this restoration would cost the state \$493,000.
- Restoration of DAP TANF funding at \$1 million the same level it has been at since its inception.
- Maintenance of TANF ECF funding at a reduced level of \$1.5 million

#### c. Restore Funding for Non-residential Domestic Violence Services.

Empire Justice Center joins with our colleagues in the community of domestic violence service providers to express our deep concern for the loss of funding for services to victims of domestic violence. The elimination of \$3 million in TANF dollars designated for use in non-residential domestic violence services will undermine numerous critical supports to the vulnerable low income victims of violence most in need of safety and support.

As will be discussed in the civil legal services portion of our testimony, the Governor also eliminates \$1.2 million in funds for the provision of legal assistance to victims of domestic violence, thus undermining the ability to obtain critically needed representation in life and death situations.

In recognition of the nature of the services that will be eliminated or curbed as a result of these and other funding changes that will impact domestic violence services, we urge you to restore the two funding streams above and work with the domestic violence community to ensure that the financial problems the state is experiencing in no way impede domestic violence victims ability to seek safety from an abuser.

#### III. Child Care

a. Increase Funding for Child Care in Order to Increase Parents Access to Work During Difficult Economic Times.

At the outset, we thank the Governor for not including child care funding in the Flex Fund this year and for transferring \$393 million of federal TANF money directly in to the New York State Child Care Block Grant (NYCCBG). This transfer brings the NYCCBG to just over \$900 million with Federal Child Care Development Funds (CCDF) making up \$300.8 million, \$137.4 million from the state general fund and \$68.3 million in maintenance of effort funding. In addition, the budget includes \$42.5 million in stimulus funding for child care which is re-appropriated from last year.

Although this is a significant commitment to child care, it is not-enough. If our commitment to low income families working their way out of poverty is real, we must increase the amount of TANF funding that is transferred to the child care block grant and allow parents to work when and where they are able. Federal law allows New York: State to transfer 30% of its \$2.44 billion annual TANF appropriation into the child care block grant. Up to 1/3 of that 30% can be transferred to New York's Title XX Block

Grant.¹ Currently, New York's TANF transfer is only 16% of the amount allowed. The transfer of just an additional 2% from TANF into the NYCCBG would make nearly \$50 million more dollars available for child care, and would leave the full 10% available for transfer to Title XX. This \$50 million is critically needed so that the working families of New York can maintain their employment in this economic crisis and take advantage of the many new subsidized jobs programs that are part of this year's budget.

Moreover, the addition of either TANF or general fund dollars to the NYCCBG will stimulate the economy. The business of child care is a multi-million dollar segment of our economy which employs over 100,000 New Yorkers. Expanding child care means that jobs will be created throughout the state that will benefit both the workers and the families able to access care. Quality child care also supports our most vulnerable—young children—not only keeping them safe and cared for while their parents work, but also developing young minds in a way that research now shows is critical for later learning.

The proposed budget would allocate \$10 million dollars of TANF funding to Transitional Jobs, \$5 million to Health Care Jobs and \$3 million to Green Jobs. In addition, the Office of Temporary and Disability Assistance will be encouraging local districts to use the \$41.5 million of TANF funds in the budget described as the Local Family Support Fund to create subsidized jobs. Because these jobs will be created with TANF funding, only families with children who are under 200% of poverty will be eligible to be placed in these jobs. These families will need child care in order to remain employed in these subsidized jobs, and this need for additional child care is coming at a time when local districts already lack enough funding sufficient to serve all eligible families. Erie County recently discontinued subsidies for 1,100 children and reduced the overall eligibility level to 125% of poverty. In September, Steuben County reduced eligibility to 120% of poverty resulting in 300 children losing their subsidies.

New York State must invest in child care to keep low income wage earners employed. Without a commitment to provide child care to all eligible working families, the subsidized jobs programs funded with federal American Recovery and Reinvestment Act funds will fail while low income parents who already have jobs find that their ability to keep them is in jeopardy. We urge the legislature to ensure that child care subsidies

<sup>&</sup>lt;sup>1</sup> The proposed budget leaves the decision of whether to transfer TANF into Title XX up to each social services district as part of the Flexible Fund for Family Services:

<sup>&</sup>lt;sup>2</sup> M. Warner, Putting Child Care in the Regional Economy: Empirical and Conceptual Challenges and Economic Development Prospects. Community Development: Journal of the Community Development Society, Vol. 37, No. 2 Summer 2006).

<sup>&</sup>lt;sup>3</sup> M. Spina, "Working-poor Families Losing Subsidies," Buffalo News, February 9, 2010.

The Corning Leader, August 29, 2009.

are protected from further decline and to allocate \$50 million in additional funding for child care slots in this year's budget.

### b. Create Statewide Standards for the Administration of Child Care Funding

Against the backdrop of limited funding is New York's archaic system of allowing eligibility rules and parent fees to be determined on a local basis. Although more than 81% of child care funding is federally and state driven, with less than 10% of the cost paid with local funding, the cost of a child care subsidy and many eligibility rules are determined at a local level. These locally driven policies are listed by each social services district in a plan that is filed biennially with the Office of Children and Family Services. These rules mean that the child care subsidy program is administered differently all over the state.

For example, the cost of child care for similarly situated families varies dramatically depending upon the county where they live. Recipients of child care subsidies with incomes over the poverty level pay a parental co-payment for their child care that is some percentage of the portion of their income exceeding the poverty level. That co-payment percentage is chosen by the county. In Schenectady County a family of three at 200% of poverty pays 35% of its income over the poverty level or \$6408 per year (\$123 per week) for a child care slot; in Albany County the same family would pay 15% of its income over the poverty level - \$2746 per year or \$52 per week.

Providers get paid for absences in some counties but not others (53 counties pay for absences; 4 do not); parents with young children who work nights can get a subsidy to pay for child care while they sleep during the day in 47 districts (but not all pay for eight hours of sleep); the income of 18 and 19 year olds is counted towards eligibility for a subsidy in some counties when determining household eligibility and not in others (23 social services districts count teen income only if it benefits the family; others don't count it or count regardless of its effect on eligibility). <sup>5</sup>

To make matters more confusing, counties can change their rules by simply amending their plans. This means that parents are not able to budget and plan properly. From year to year, their co-payments and their very eligibility may change at any time — as we have seen recently in Erie and Steuben Counties. It would increase the economic stability of low income working families and provide a safe nurturing

S. Akhlar and S. Antos, Mending the Patchwork: A Report Examining county by county inequities in Child Care Administration in New York State, January, 2010. Available on line at: <a href="http://www.empirejustice.org/assets/pdf/publications/reports/mending-the-patchwork-1.pdf">http://www.empirejustice.org/assets/pdf/publications/reports/mending-the-patchwork-1.pdf</a>

foundation for the next generation if New York State established statewide standards for the rules of its child care subsidy programs. Sufficient money should be set aside in this year's budget to assure a smooth transition to a fair and equitable subsidy system. A proposed three year plan is set forth at the conclusion of the Mending the Patchwork Report, which is available on our website at <a href="https://www.empirejustice.org">www.empirejustice.org</a>.

# IV. Restore Citizenship Initiatives

The Empire Justice Center joins in the call of the New York Immigration Coalition and other immigrant advocacy organizations to restore funding for the citizenship program. This vital program provides funding to non-profit organizations that assist lawful permanent residents who are eligible to apply for citizenship. The estimate is that there are currently one million citizenship-eligible permanent residents. Aside from the advantages of a citizenship program for immigrants, who thereby receive critical assistance in navigating the citizenship process, the State of New York also reaps a benefit. Each immigrant who naturalizes is one additional New Yorker whose voice counts in our political system. In addition, low income elderly or disabled immigrants who currently receive state welfare benefits will become eligible for benefits under the federal Supplemental Security Income program once they become citizens, bringing needed federal funds into the state.

# V. Medicare Part D Counseling and Appeals

The Executive Budget proposal maintains level funding for the Managed Care Consumer Assistance Program (MCCAP), a statewide initiative run through the New York State Office for the Aging (NYSOFA). MCCAP consists of seven partner agencies that help elderly and disabled Medicare beneficiaries navigate the complicated world of Medicare Part, D, as well as other related health care access issues.

We deeply appreciate the Governor's recognition of MCCAP as a critical safety net for our elderly and disabled Medicare populations during an exceptionally challenging funding cycle. Many of the MCCAP agencies are civil legal services providers who face substantial shortages in other sources of funding. Maintaining MCCAP will help ensure that these agencies can continue to serve low and moderate income Medicare beneficiaries.

# VI. State Administration of SSI Supplement

The executive budget allows New York's Office of Temporary and Disability
Assistance (OTDA) to assume administrative responsibility for the Supplemental Security
Income (SSI) state supplement. Currently, New York pays the Social Security
Administration (SSA) to determine eligibility for, and issue payment of the state
supplement. OTDA has estimated that New York State could save a substantial amount
of money once implemented (\$60 million annually) by administration of its own state
supplement.

While the Empire Justice Center is sensitive to the State's need to reduce costs, and recognizes that this proposal may achieve significant cost savings without reducing client benefits, we do have some concerns about this proposal. State administration of the state supplement to SSI involves a major restructuring that has many implications for SSI applicants and recipients, as well many of the agencies with whom recipients interact such as Local Social Services Districts, Department of Health, Office of Mental Health, Office of Mental Retardation and Developmental Disabilities, Office for Alcoholism and Substance Abuse Services, and local Offices for the Aging.

Currently, SSA functions as a "one stop shop" for clients in terms of assessing disability, determining the individual's living arrangement, providing the federal SSI benefit and then both determining the amount and providing the state supplement. SSA issues the state supplement along with the person's federal SSI benefit, either through direct deposit or via check. SSA is also responsible for providing beneficiary data on a regular basis to the State Department of Health so that Medicaid and Medicare Savings Program coverage can be activated.

Under the executive budget proposal, OTDA would assume responsibility for determining living arrangements for all state supplement recipients and issuing the state supplement payment. Clients whose income exceeds federal SSI eligibility and who are not eligible for Social Security Disability or Retirement Income would lose access to a federal administrative forum for determining disability; OTDA would need to take over these administrative hearings in addition to their other responsibilities in issuing the state supplement payments. The state would bear responsibility for all notices, appeals and issues regarding overpayments. In addition, it appears likely that OTDA would al become responsible for communicating beneficiary information to the Department of Health.

It is critical that all of these implications are carefully thought through in order to minimize the disruption to clients during and after the transition process. Because multiple agencies are involved, we recommend that a formal, inter-agency implementation workgroup be convened in order to ensure that OTDA receives the input of all affected partners. Client advocates also must be at the table as members of the workgroup to present the consumer viewpoint and ensure that the protections

currently in place for SSI recipients, who are currently receiving their state supplement through SSA, will remain available to clients after the changeover.

Additionally, we wish to emphasize that the payment levels for the state supplement should not be affected in any way by this proposal. OTDA must continue meeting federal maintenance of effort requirements.

We urge the Legislature to add language to the executive budget creating an inter-agency implementation workgroup with advocacy representation to oversee the implementation process if New York is to move forward with the proposed takeover of the SSI state supplement administration.

# VII. Access to Justice: Restore State Funding for Civil Legal Services

Empire Justice Center has a long history of working with the Legislature to ensure that the state provides at least a basic level of support for civil legal services and we incredibly appreciative of the leadership that many of you have provided in restoring our funding to the budget year after year when the Executive takes it out. We are here today to tell you that this year is not just another year where we come to you pleading our cause. We believe that this year is the most critical year we have ever faced in terms of access to justice and the support needed by the legal services delivery system.

Most years we confront the need to restore state funding to the budget. This year we confront that and so much more. Civil legal services providers face potential devastation and massive loss of services for low and moderate income clients should the state fail to act to address following circumstances.

- All \$13.2 million in state funding that was in the 2009-10 budget has been eliminated.
- An anticipated 70% decline in funding from our primary state funding source, the Interest on Lawyer Account (IOLA) fund.
- An unrelenting increase in people desperately seeking legal assistance as the
  economy continues to strip them of the ability to hold onto their jobs, homes
  and their economic stability.

#### a. Background:

As most of you well know, civil legal services are entwined in the human services delivery system in a complex and unique way. Helping people stay in their homes and out of shelter by stopping evictions, negotiating loan modifications, helping to ensure

that people in need receive the government benefits they are entitled to, working with victims, disabled individuals and veterans to ensure that they are being treated properly under the law.

The law in general is complicated, dynamic and ever changing. The areas of law that most impact poor, low and moderate income households are exceedingly complex. The laws governing unemployment benefits, disability assistance, public assistance, immigration, domestic violence, consumer protections, evictions, foreclosures, public housing and family law are incredibly complex.

As Chief Judge Jonathan Lippman noted last month in his testimony before the joint Senate and Assembly hearings on the IOLA crisis:

"Many of us cannot even begin to imagine what it would be like to have to fight for life's most basic necessities — shelter, personal safety, food, income, health services — much less to have to go it alone, without the help of someone with legal training. For these vulnerable New Yorkers, civil legal services are the ultimate safety net- often the only means by which they can keep their lives afloat."

## b. The Cost-Effectiveness of Legal Services

Not only are legal services part of our social safety net, not only do they address one of our core values by ensuring some access to justice, they are also cost-effective for the state as an investment.

- Client Benefits: In 2006 civil legal services generated \$131 million in benefits for their clients, a return of 93 cents on the dollar. The majority of the benefits flow almost immediately into state and local economies resulting in sales tax revenues and business income to state and local businesses.
- Increasing Child Support Payments: legal services programs generated a total of \$12,391,387 in child support payments to clients in 2006, increasing family resources and thus decreasing the need for publicly funded benefits including public assistance and child care subsidies.
- Maximizing SSI/SSD payments to clients and to state and local government:
  - In 2007 DAP advocates generated \$24,494,483 in retroactive awards for their clients and \$7,620,771 in interim assistance for benefits provided for the State.

<sup>&</sup>lt;sup>6</sup> Testimony of Chief Judge Jonathan Lippman at the January 7, 2010 Senate and Assembly Hearings on IOLA and Civil Legal Services.

- According to the Office of Temporary and Disability Assistance's most recent Biennial Report to the Legislature, it is estimated that in 2005 DAP generated \$10.5 million in public assistance cost reduction, resulting in a net gain of \$14.6 million for the state and localities, more than twice the initial investment.
- Maximizing Food Stamps For every family of three who receives Food Stamps, as much as \$5,556 in federal dollars is generated in nutritional support and subsequent expenditure in the local economy.
- Avoiding the High Cost of Homelessness: In 1999 legal services providers helped a
  total of 48,014 adults and children avoid homelessness. We estimate that for each
  family in New York City that avoids eviction as a result of civil legal services
  representation, \$31,215 in savings is generated. Savings around the state will vary,
  but are still substantial. One study estimates a \$4 savings for every \$1 invested.
- Averting Foster Care Costs: For every child a legal services program is able help keep out of the system, government will save an average of \$16,200, at bare minimum. For many children, the savings would be much higher - as much as \$48,600 for children without special needs, and much more for those who have disabilities or need therapeutic care.

# c. New York's Approach to Ensuring Access to Justice

In the best of times, across this country and here in New York we have barely met 15% to 20% of the legal needs of the poor. Add to this now the growing need for legal assistance among more moderate income households as they confront the legal morass of foreclosures or perhaps their first denial of needed benefits.

For far too long, New York's commitment to ensuring access to justice has been a legislative commitment only. Almost every year the Governor strips all funding out of the budget as he prepares the Executive Budget; each time the legislature restores these critical funds.<sup>7</sup> Despite the clear and desperate need, this year is no exception. As you will see below, even the scant \$1 million that Governor Paterson had in his Executive Budget last year has been eliminated.

EXECUTIVE BUDGET: Over \$13 Million - All of Last Year's Funding for Civil Legal Services - Eliminated:

- \$4.2 million, Department of State, Assembly add
- \$4.4 million, Department of State, most targeted to civil, new Senate funds

<sup>&</sup>lt;sup>7</sup> Governor Spitzer included base funding for civil legal services in his first Executive Budget and then eliminated all general state funding from his Executive Budget the following year.

- \$2.4 million Legal Services Assistance Fund, Division of Criminal Justice Services, Assembly add
- \$1.2 million for Domestic Violence Legal Services, Senate and Assembly
- \$1 million Legal Services Assistance Fund, Governor

We urge the Legislature to restore these crucial access to justice funds.

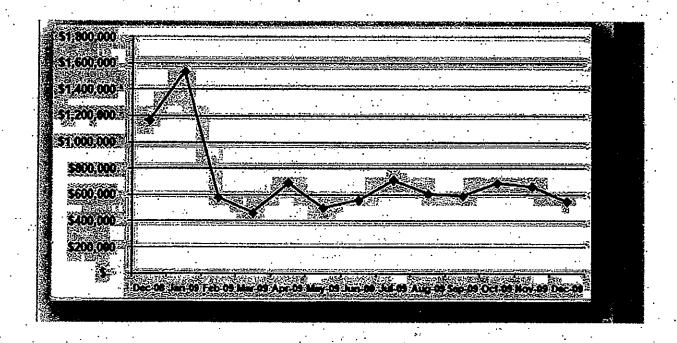
# d. The Looming Crisis in IOLA

Created in 1983, the Interest on Lawyer Account Fund (IOLA) "requires attorneys to deposit funds received from clients either in interest bearing accounts for the benefit of the clients or in interest bearing IOLA accounts, in accordance with the provision of the statute (<u>Judiciary Law §497</u>). The interest on IOLA accounts is pooled and provides the money for grants made by the Board of Trustees of the IOLA Fund to non-profit civil legal services providers across the state."

The interest earned on these pooled funds provides a critical source of support for civil legal services. Unfortunately, with interest rates hovering near zero since 2008, IOLA's earnings — and therefore its grant-making capacity — are down dramatically. Last year, IOLA made \$24.8 million in annualized grants to legal services programs across the state. IOLA revenue is projected to drop to approximately \$6.5 million for the period April 1, 2010 through December 31, 2010.

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<sup>&</sup>lt;sup>8</sup> About IOLA: http://www.iola.org/about.html



# e. The Response of the Unified Court System and the Office of Court Administration

In response to this looming crisis, Chief Judge Lippman included a \$15 million appropriation in the Unified Court System's budget for 2010-11. These funds, already included as part of the Executive budget submission and therefore already accounted for in the underlying financial plan, will be sub-allocated to IOLA, allowing the Fund to maintain current grant levels in the coming year. Without this rescue, there will be a complete meltdown in the delivery system

It is critical that the Legislature maintain this appropriation in the final budget.

# Recommendations:

- Avert massive staffing reductions, office closures and elimination of services by maintaining the \$15 million in the OCA budget to offset IOLA losses.
- Restore \$12.2 in state funding for legal services providers made available through the efforts of the Senate and Assembly in 2009-2010. Without simultaneous restoration of these funds, this will be a zero sum game where funding is provided to IOLA to avert disaster and reductions in other critical funding-create another crisis.
- Create a Permanent Infrastructure for civil legal services. We must create a more stable permanent funding stream for legal services. We cannot continue with the

"wipe out and restore" process we go through every year. We know this will require support from the Governor but it will also depend on your leadership and we look forward to working with you and your colleagues to make this happen.

Thank you once again for the opportunity to testify today. Please feel free to contact us at **518.462.6831** should you have any questions.

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# Remarks for the Joint Legislative Hearing on the Executive Budget February 10, 2010

Ira L. Mandelker, Ph.D.
Executive Director
Homeless and Travelers Aid Society (HATAS)

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I am Ira Mandelker, Executive Director of the Homeless and Travelers Aid Society in Albany. Other advocates and services providers will surely be talking about the state-wide impact of human services budget cuts, but just as "all politics are local" so are State budget implications. I will be talking local.

First, an introduction: The Homeless and Travelers Aid Society's (HATAS) is the central intake, assessment, and shelter referral point for Albany County's emergency homeless shelter system. We have had this role, under various State, Federal, and now county contracts, for over 25 years. We also provide homelessness prevention services, mental health programs, and rental subsidies and support services for over 60 apartments where formerly homeless people with disabling conditions, both individuals and families, have permanent housing.

We are certainly sensitive to the budget and financial challenges facing New York State but the proposed Executive Budget cuts will inflict great damage to low-income households. The Homelessness Intervention Program is slated for a 27:5% cut, SRO Support Services will be clipped by 13%, Operational Support for AIDS Housing gets a 10% trim, and the Supplemental Homeless Intervention Program and the Supported Housing for Families and Young Adults programs are abandoned altogether. The consequences of these proposals and other cuts to homeless and housing-related programs are so significant and far-reaching that they cannot all be addressed in a short public statement. They cut across all homeless and at-risk subpopulations including veterans, those with disabilities, addictions, and HIV/AIDS, and will likely increase and shift costs to other State funded and mandated programs. I will focus on HIP/SHIP and scratch the surface of the impact these cuts would have on homelessness in Albany County.

HATAS is part of an Albany County homelessness prevention collaborative that is unique to New York State. Along with United Tenants of Albany, the Legal Aid Society of Northeastern New York, and the Interfaith Partnership, this one project provides legal representation for tenants facing eviction, landlord-tenant mediation, tenant advocacy, tenant training, housing retention and relocation services, and case management. Federal funds are also used in circumstances where, but for rent or mortgage arrears, the household has the resources to maintain their housing. We are all sub-grantees of an Albany-County Department of Social Services Homelessness Intervention Program and Supplemental Homeless Intervention Program Grant from the Office of Temporary and Disability Assistance. For well over a decade this collaborative has prevented thousands of evictions, relocated households to more affordable housing, and rehoused homeless individuals and families. This vital and effective community program is on the chopping block.

#### The Need

Homelessness and the need for affordable housing, especially among families, have grown significantly in Albany County. In the last ten years, there has never been a year when there have been fewer episodes of homelessness than at the beginning of the decade. Local homelessness rose with recessions, and remained high during periods of economic growth. Our recent, deep recession started impacting local shelter demand in 2008 and last year, HATAS served 672 homeless families and teen parents, and 2,129 homeless single adults and unaccompanied youth (see attached report). New episodes of homelessness among single adults were 20% higher than in 2000, but annual new episodes of family homelessness tripled during the decade. These figures only include those who came to HATAS for shelter. We suspect that the uncounted "unofficial" homeless population - the "doubled-up," the "squatters," and "couch-surfers" - is rising dramatically as well. The character of family homelessness is also changing. Prior to the recession, approximately 5% of homeless families seeking shelter were two-parent households. Now, two-parent households comprise approximately 15% of the families seeking shelter. The change reflects the impact of the recession on low- and extremely low- income households. Parents have lost jobs or are working fewer hours and, together, are no longer able to cover their family's basic needs.

This is just one county. I am certain there are 56 other similar stories around the State. The proposed Executive budget cuts to the Homelessness Intervention Program and Supplemental Homeless Intervention Program will nearly eradicate an effective program for preventing homelessness and will likely push hundreds of Albany County households into homelessness. Rather than reducing cost, cutting HIP/SHIP will surely increase net costs to the State and its taxpayers.

The NYS Office of Temporary and Disability Assistance spends approximately \$439,000 in combined HIP/SHIP funds in Albany County. Nearly \$105,000 of SHIP funds supports programs preventing homelessness for at least 50 families facing eviction. In the absence of SHIP funding, these families would likely become homeless. If these families had just an average length of stay in our local family shelter (62 nights), their shelter costs alone would exceed \$417,000. This figure, incidentally, is only \$20,000 short of NYS OTDA's total annual Albany County spending on HIP/SHIP – an investment that serves over 300 families and individuals. Even if Albany County opts for less expensive motel stays (without the support and relocation services of a Tier 2 Family Shelter), the shelter costs alone would be more than double. But this is just the "down payment" on new family homelessness. It does not include any of the common costs to rehouse the family - initial rent and security, utility deposits, and storage or replacement of furnishings and household items. You can add to this another important item - the cost of many of these new families on public assistance. Some explain that SHIP funds need to be diverted to address the growing TANF rolls. Many of the families that could have remained housed through SHIP will be on the TANF rolls!

If some are thinking that federal stimulus funds will be able to carry the homelessness prevention weight, they should think again. In January, the City of Albany's Homelessness Prevention and Rapid Rehousing Program spent over \$23,000 on rental assistance to keep 40 households from becoming homeless. That same month, HATAS sheltered 222 homeless households, 43 more than in January 2009, when there were no stimulus funds available.

Although this is just one program in one locale, the story is no different in Erie, Monroe, Oneida, or any other Upstate County. Please consider the serious damage done to families and communities by failing to prevent homelessness. Cutting homeless prevention and housing services will likely raise the amplitude of the current wave of homelessness and increase, not decrease the deficit.