



**Joint Senate/Assembly Budget Hearing on Mental Hygiene Testimony of Sebrina Barrett
Executive Director of the Association for Community Living
February 5, 2021**

My name is Sebrina Barrett, and I am the executive director for the Association for Community Living. Thank you to Senator Krueger, Assemblywoman Weinstein, and the chairs and members of the Senate and Assembly Mental Health committees for this opportunity to testify. ACL's members provide a home and path to recovery for about 40,000 New Yorkers with severe and persistent mental illness.

Before the pandemic, before the tragic loss of life, before the state's fiscal crisis materialized: Just one year ago, mental health housing faced a \$180 million shortfall. This is because the funding model—created 30 to 40 years ago—has not kept pace with inflation and the changing demands of the community. For example, employee health insurance premiums have risen 740% since 1984. The monthly premium risen from \$183 a month in 1999 to more than \$600 a month today. Current reimbursement rates for all fringe costs aren't enough to cover health insurance, let alone workers' comp, FICA and unemployment benefits.

More than 30 years ago, our staff made \$6-7/hour, double the then-minimum hourly wage. Today, they make just at minimum wage, leaving them unable to afford childcare and health insurance for dependents. We are losing staff to fast food restaurants and retail, which can pay them more. Plus, over time, these jobs have become harder—as residents' mental and physical needs have grown. Today staff manage more than a dozen medications, rather than one or two when these programs started.

And, due to the pandemic, the situation has become much worse.

We are facing a staffing crisis. A survey showed that there is a 25-30% staff unavailability rate—vacancies that cannot be filled due to low pay; staff who must stay home to care children; staff who themselves are ill or have to quarantine. No one is applying for our jobs. Even when unemployment was at its highest levels—people needed jobs, but no one wanted our jobs.

We are on the frontlines of COVID. Because our residents have co-occurring medical conditions, of those who became ill, more than 45% required hospitalization, and more than 15% died.

Exacerbating our finances, we have incurred new costs that are not included in our budgets—such as personal protective equipment and extra cleaning supplies.

Recognizing the need for new funding, New York's FY 2020-21 enacted budget included \$20 million for mental health housing. However, due to the fiscal crisis, these dollars were not allocated this past year. We are pleased to see that these dollars are included in the FY 2021-22 budget, and we urge that they remain and be allocated as soon as possible. We know New York faces a difficult budget year; but the \$180 million gap remains. Thus, we hope that, over the next 3 to 5 years, continued investment in existing mental health housing will be made to eliminate the funding shortfall.

In addition, we are pleased that the proposed budget includes \$250 million for the development of new supportive housing. During this uncertain fiscal climate, we are

encouraged to see this funding for year six of New York's 15-year initiative to develop 20,000 units of supportive housing.

This funding is crucial for New York to be able to live up to its obligation to care for our neighbors, our families and our friends by promoting integrated care with strong mental health housing programs. Mental health housing is not only the right thing to do — it is fiscally smart. It is much less expensive than hospitals, prisons, jail and homeless shelters. We save lives, and we save money. Thank you.