



Testimony of Susan Herman

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New York City Council Committee on Mental Health, Disabilities and Addiction

Oversight – ThriveNYC, a Three Year Update

Good afternoon Chair Ayala and members of the Committee on Mental Health, Disabilities and Addiction. My name is Susan Herman and I am the Senior Advisor to the Mayor, Office of ThriveNYC. I am joined today by Dr. Hillary Kunins, Acting Executive Deputy Commissioner at the Department of Health and Mental Hygiene and colleagues from Thrive and several other agencies.

Introduction

In 2015, First Lady Chirlane McCray decided to embrace a big challenge: to change New York City's entire approach to mental health.

Working with the Department of Health and Mental Hygiene, she set out to identify key ways the City government could foster more widespread ownership of this issue and address many of the problems she was hearing about across the City — that there was too much stigma associated with mental illness for people to seek help, that even when people — especially people in underserved neighborhoods — decided to seek help, it was hard to find it, and that there were enormous gaps in services to address mental health problems. And this was true for people of all ages and circumstances. There were also far too many missed opportunities for prevention.



A team of people, with tremendous community input, created a realistic, but ambitious agenda. Then, with the Mayor's support, all of City government and all parts of the City came to the table, to promote mental health and address mental illness in a way that is commensurate with the powerful and deep impact these issues have on all of our lives.

Clear and compelling goals were established from the outset: overcoming the stigma of mental illness so that New Yorkers would both recognize problems and seek help to address them; increasing wellness and resilience among New Yorkers; ensuring that mental health care could be found where people live, work, and learn. As a City, we were going to actually face mental illness and address it, rather than simply putting a Band-Aid over its symptoms.

Since its inception, this work has been inspired by the vision of First Lady Chirlane McCray who has an unwavering commitment to promoting mental health for all New Yorkers. She called this new approach ThriveNYC. And ThriveNYC has become one of the Mayor's top priorities.

Guiding Principles

As you know, ThriveNYC has been guided by 6 principles that underpin our initiatives. These principles have been in place since Thrive's inception and continue to focus and ground our work. They are:

1. Change the Culture
2. Act Early
3. Close Treatment Gaps

4. Partner with Communities
5. Use Data Better
6. Strengthen Government's Ability to Lead

With significant resources and evidence-based strategies, informed by dozens of listening sessions, town halls, and focus groups with hundreds of New Yorkers, ThriveNYC set out to change the way New York City approaches mental health. Just over three years later, change is starting to take hold. Thrive has dismantled some of the barriers that prevent people from getting help. To date — even without counting all the callers to NYC Well or students now served in schools — ThriveNYC has served over three quarters of a million people through discrete interventions, and touched the lives of countless more.

The Thrive Approach

In the first phase of our work, we took a hard look across the mental health system and expanded our understanding of **who** is best fit to provide support and treatment; **where** services can and should be delivered; and **what** mental health support could look like. We sought the best opportunities to change our cultural understanding of mental health, create new pathways to care, close particular gaps in services, and enable more people outside of the formal treatment system to be helpful. This kind of innovative, comprehensive approach enabled us to develop community-based mental health solutions that address the diverse needs of New Yorkers.



The second phase focused on the implementation of these strategies. A larger team was created and Thrive began to grow.

We partnered with every sector of society to develop programs and services that put the Thrive approach into practice. New Yorkers can now see and experience the benefits of Thrive all over the City – on the subways and buses, in Pre-K to 12th grade classrooms, in homeless shelters and health clinics, in police stations, social service agencies, and in houses of worship.

Structure

I joined ThriveNYC as Senior Advisor to the Mayor in February, having been asked to oversee the third phase of the implementation of Thrive. I'm pleased to join a strong team working with over 20 City agencies to implement dozens of Thrive initiatives. We will continue to increase access to care and move beyond traditional interventions to make sure every New Yorker can have the care they need, when and where they need it.

The new Mayoral Office of ThriveNYC reinforces the Administration's commitment to embed mental health across City government. The Department of Health and Mental Hygiene will continue to serve as the key technical advisor as we develop, implement, and manage ThriveNYC. The Health Department also oversees the majority of the Thrive initiatives, including NYC Well and Mental Health First Aid.



The Office of ThriveNYC works collaboratively with City agencies and partners to deliver mental health services to everyone, but particularly to vulnerable and traditionally underserved populations including immigrants, victims of crime, young people, homeless people, and seniors. We work to ensure agencies are able to maximize the potential of their work. Performance management and cross agency collaboration are necessary tools to achieve this goal. Additionally, we develop public awareness campaigns, work with strategic partners to advance the work of Thrive, and implement outreach efforts to ensure New Yorkers are aware of the range of services available to them. As we work to maximize capacity, we also strive to ensure program sustainability.

In a very short time, Thrive has grown from a great idea to an ambitious initiative. In the next phase of this work, our goal is to strengthen the interventions, evaluate key initiatives and move towards sustainability so that New Yorkers will continue to benefit from this work. As we build out our capacity, we are mindful of the need for both accountability and transparency. As you know, we have a chapter in the Mayor's Management Report and are held to the same budget standards and oversight as other Mayoral Offices and initiatives. To further ensure proper oversight and evaluation of this work, we are collaborating with experts at City agencies and academic institutions to continue to assess the progress of these initiatives. It is essential that there are tools in place to measure the short, medium, and long term impact of our work.



Thrive Success

Thrive now has a presence across the City. While New York has always provided behavioral health services, Thrive has both re-imagined how mental health can be promoted and how care can be delivered.

I'd like to take a few moments to describe some of the good work Thrive has undertaken thus far. Let's begin with:

Mental Health First Aid, taught by Health Department trainers, is changing the New York culture by teaching people skills to be mental health first responders. The Mental Health First Aid training is modeled on training which began in Australia and is offered in many jurisdictions across our country.

Over the past three years, we have trained more than 100,000 New Yorkers in **Mental Health First Aid**, including nearly 48,000 front-line City workers. This means 100,000 New Yorkers are now more comfortable talking about mental health, listening to others, and helping point people in need to relevant services. Going forward, the Department of Homeless Services has now mandated this training for all homeless shelter staff. We have also made it easy to find a Mental Health First Aid workshop in any neighborhood throughout the City. All you have to do is go on the ThriveNYC website, and you can select a training when and where it's convenient for you. If you are interested in a class taught in Mandarin or Spanish, we offer them twice a week. With Mental Health First Aid, everyone can learn how to better support their co-workers, their neighbors, and their loved ones.



As you know, our goal is to train 250,000 New Yorkers by 2020, a figure comparable to the number of New Yorkers trained in CPR, and we're on track to meeting that goal.

NYC Well builds on LifeNet, the City's former crisis line. NYC Well provides a free, central point of entry to local behavioral health services. Available by call, text or online chat, NYC Well is a safe and easy way for New Yorkers to quickly get connected to care no matter where they are, what emotional state they are in, or what signs and symptoms they express. Our counselors strive to provide the least invasive intervention possible by supporting callers through safety planning, teaching coping skills and connecting them to resources.

In 2016, LifeNet, which only handled immediate crisis calls, answered 92,000 calls. With support from ThriveNYC, in 2018, NYC Well answered 256,000 calls, texts, and chats from people who were seeking help, including those in crisis. To date, NYC Well has had more than half a million interactions with New Yorkers.

Runaway and Homeless Youth often struggle with mental health challenges. With ThriveNYC's support, more than 3,700 evaluations have been conducted for youth served by runaway and homeless youth drop-in centers, crisis service programs and transitional independent living programs, increasing opportunities for young people to be connected to mental health support.

Schools are another place to reach children in need. Many schools lack capacity or expertise to develop comprehensive mental health plans to address these needs. With ThriveNYC, over 50% of New York City public schools have access to



professional **mental health experts** to build the capacity of school staff through training, and customized mental health plans. These experts also connect schools to a range of mental health resources to benefit individual students in need. Now, all public schools in New York City have access to mental health support.

Homeless Shelters serve some of New York’s most vulnerable families. Before ThriveNYC, families residing in shelter did not have ready access to staff specifically focused on providing social work services. With ThriveNYC’s support, the Department of Homeless Services (DHS) has placed 312 licensed social workers (LMSWs) in shelters for families with children. Since the inception of the program in 2016, these social workers have served thousands of families in need consisting of more than 9,850 New Yorkers.

Crime Victims have often been forgotten, and their mental health challenges are quite real. Before Thrive, three police precincts had one on-site victim advocate each. Now, with the **Crime Victim Assistance Program** or **CVAP**, each of the City’s 77 precincts has two victim advocates — one specializing in domestic violence and one for every other crime category — except in 6 precincts where one advocate manages both roles. With Thrive support, CVAP advocates have served nearly 100,000 victims of crime, mitigating their trauma, and connecting them to critical resources and services.

Maternal Depression is common. Before Thrive, however, a large percentage of new and expecting mothers in New York were not screened for maternal depression before and after the birth of their children. We partnered with 29 public



and private hospitals, and within only about 6 months after this new **Maternal Depression Collaborative** launched in Spring of 2016, almost 63% of women in these hospitals were screened at prenatal visits. Last month, 86% of women in these hospitals were screened, and the percentage continues to increase. The City's public hospitals are leading the way here. Last month, they screened 98% of new patients in prenatal clinics.

The Department of Health's Newborn Home Visiting Program previously did not serve mothers in homeless shelters and did not conduct post-partum maternal depression screenings. As a result of Thrive, the **Newborn Home Visiting Program** has expanded and has been able to provide health education, resources, and maternal depression screening services to over **3,800** mothers residing in DHS shelters and has conducted over **3,100 maternal depression screenings**. It's worth noting that these resources and services were offered to all new mothers in shelter.

Connections to Care is changing how social service providers do business. Before Thrive, mental health was primarily seen as the responsibility of clinical mental health providers, who didn't always have the reach, capacity, or cultural competencies to meet the City's tremendous need. As a result of ThriveNYC, **Connections to Care** has demonstrated that we can augment our traditional mental health system with mental health supports — out of clinics and in communities. Since 2016, C2C community-based organizations and their mental health providers have trained more than 1,400 CBO staff to recognize mental health problems in clients and engage them in a way that promotes conversation and, when appropriate, helpful referrals to care.



Older Adults often suffer in silence. Prior to ThriveNYC, the City did not fund services for homebound older adults at risk of profound social isolation and loneliness. Now, the Department for the Aging's **Friendly Visiting Program** supports 15 sites across all 5 boroughs. Volunteers have made over 35,000 visits to seniors' homes, donating more than 52,000 hours of service.

In addition, prior to ThriveNYC, DFTA did not have an on-going mental health program embedding licensed mental health professionals in senior centers. Now, DFTA's **Geriatric Mental Health Program** offers mental health services in 25 senior centers, and to date they have served over 20,000 seniors.

Substance Misuse is often associated with mental health challenges. Before ThriveNYC, **Assertive Community Treatment Teams, or ACT teams**, did not have the expertise to assess clients with substance use needs. As a result of ThriveNYC, a master's level Substance Use Specialist was added to each of the 40 ACT teams, which together serve more than 2,700 individuals annually. These clinicians enhanced ACT teams' ability to serve people with co-occurring disorders.

Conclusion

These are only a few of the many examples of Thrive's work on the ground. In the last three years, Thrive has sown the seeds for a new citywide approach to mental health and long-lasting change. But radically re-imagining mental health is a job for everyone: every City agency, every service provider, every community-based organization, every school, and every family.



In the years ahead, we must work together to acknowledge the importance of our individual and collective well-being. We must also work together to address barriers to accessing mental health care and promoting the mental well-being of all New Yorkers. These barriers include stigma, poverty, homelessness, racism, and violence — and an inadequate mental health workforce.

This is our chance to build the culture and infrastructure we need to support healthy communities. Thrive has initiated a seismic shift in our culture and in our mental health system. We appreciate First Lady McCray's guidance in this endeavor and the sincere collaboration of so many agencies who do this work every day. We also appreciate the support and strong partnership we have had with City Council. And now, I would be happy to answer any questions you may have.