

# 2021 Public Policy Agenda

**Families Together in New York State** is a family-run organization that represents families of children with social, emotional, behavioral health and cross-systems challenges. Our goal is to ensure that *ALL* families and youth have the support they need in order to succeed. We represent thousands of families from across the state whose children have been involved in many systems including mental health, substance abuse, special education, juvenile justice, and foster care. Our board and staff are made up primarily of family members and youth who have been involved in these systems.

Families Together 2021 Policy Agenda is created by families of children and youth with social, emotional, behavioral and cross-systems challenges.

<u>Crisis Upon Crisis: A Pandemic of Childhood Trauma, Mental Health and Addiction Collides with</u> COVID-19 and Economic Recession.

Evidence is clear that exposure to childhood traumas, known as Adverse Childhood Experiences (ACEs), can lead to poor health and socio-economic outcomes later in life. The prevalence of childhood trauma is greatest among children growing up in environments that lack the resources to meet their needs. In previous years, we've sounded alarms regarding this ongoing public health crisis as a driving factor of other crises such increased rates of mental health and addiction challenges.

It was beyond our imagination that this situation could become even more dire. Yet we are facing an unprecedented historical moment of gross racial and social inequity, ongoing public health and economic crises, and brutal austerity.

Before the COVID-19 pandemic, New York families struggled with alarming increases in mental health emergencies among young people. From 2009 to 2017, reported suicide attempts by students increased by over 30%, and this has been the second-leading cause of death among youth aged 15 to 19 and the third-leading cause among kids aged 9 to 14 for years.

Today, the crisis has only deepened. While the state weighs cutting services as much as 20% if no federal relief comes, the upward trajectory of behavioral health issues are at an all-time high.

Our families and children are under, new tremendous burdens and have already endured the most hardship before and during this crisis. They should not suffer additional devastating effects of losing services that are lifelines for their health, well-being, and socio-economic security.

Anything short of bold investments in services that help families and children through this crisis is unconscionable, but cutting these services is unforgivable.

#### Address the Children's Behavioral Health Crisis

<u>GOAL</u>: All children, youth and their families must have timely, affordable access to appropriate children's behavioral health services within their community regardless of their insurance status.

- **Restore the 5% across the board cuts** behavioral health, child welfare, juvenile justice, education and developmental disabilities, place a moratorium on any new cuts, and preserve enhanced rates for CFTSS services.
- Invest a significant portion of new federal funding, marijuana revenue, new tax revenue, and opioid settlement funding into behavioral health programs serving children and families:
  - COVID and Opioid Child Victim Care Coordination/Family Care Coordination
    Program. Expand Non-Medicaid care coordination funding so FPAs and YPAs can offer time-limited care coordination effort to respond to the unique needs of the family unit.
  - **Emergency and Crisis Response designed for Youth & Families.** Expand funding for mobile crisis teams so they can have a family peer and/or youth peer advocate.
  - Add to existing, effective community-based services and supports for additional family peer and youth peer services and training, flexible funds for child and family activities, youth and young adult clubhouses and safe spaces
  - o Fund school-based supports that are not billable.
  - Prioritize investment in Evidence Based Practice Capacity such as Functional Family Therapy, Multidimensional Family Therapy, Multisystemic Family Therapy, and Common Sense Parenting and 4Rs & 2Ss
  - Establish a Revolving Start-up Grant Program for School Based Satellite Clinics to support the anticipated need for school-based service delivery expansion.
- Reinvest state psychiatric bed closure savings into behavioral health community-based organizations.
- Amend telehealth reforms to include all peers and ensure telehealth rate parity between audio, audio- video, and in-person.
- **Invest in school-based mental health to** promote trauma-informed care, restorative practices, and wrap-around care:
  - o Increase the number of school-based mental health clinics by 10% per year,
  - o Triple the number of Community Schools, and
  - o Double State Education Department investment in school-based behavioral supports.
  - These increases should promote trauma-informed care, restorative practices, and wraparound care.
- **Provide a 3% COLA for the workforce and a 3% increase in contracts and rates** for the human services sector for 5 years.
- Expand Children and Family Treatment and Support Services (CFTSS) into Child Health Plus (CHP) (A303A/ S2539).

## **Achieve Youth Justice**

<u>GOAL:</u> A system that is restorative in nature which emphasizes developmentally appropriate approaches to holding young people accountable:

- Stop the criminalization of childhood by ending the arrest and prosecution of children under 12 (S4051)
- Prohibit the Use of Chemical Agents by Police Against Minors (\$4002).
- Strengthen and expand protections for court-involved youth up to age 25, including retroactive sealing of records after 5 years (S282)
- Reinvest funding from juvenile justice facility closures and expand Supervision/Treatment Services for Juvenile Program funding.
- Establish state and regional councils and response units for mental health emergencies that do not rely on police by passing Daniel's Law (A4697/S4814).

Pass the Humane Alternatives to Long-Term (HALT) Solitary Confinement Act.

#### **Put Families First in Child Welfare**

<u>GOAL:</u> A "family first" system that recognizes the value of keeping families together when possible and ensures that, when necessary, children are placed with well-supported relatives or foster families.

- Restore 5% cuts to prevention, foster care, kinship, and adoption funding streams.
- Support access to timely and high quality parental legal representation statewide.
- Pass a Miranda Bill of Rights for parents under CPS investigation.
- Expand primary prevention and define eligibility for preventive services as broadly as possible.
- Maintain the Family First Transition Fund to strengthen family-based foster care.
- Significantly reduce congregate care placements of children, especially those under 13 years of age.
- Create a pilot project to reduce the number of children in residential care by transitioning youth from congregate care to families with essential supports.
- Merge KinGAP with the open-ended funding adoption subsidy.
- Restore and expand funding for local kinship caregiver programs.
- Establish an Ombudsman for birth parents, foster parents, kin, and children in care.
- Issue a moratorium on "aging out" of foster care, including expedited reentry to care, for at least until 180 days after the pandemic state of emergency has been lifted.
- Pass the Child Poverty Reduction Act (S.2755/A.1160) so New York publicly commits to a plan to cut child poverty by half in ten years.

## **Promote Safe and Supportive Schools**

<u>GOAL</u>: End the school-to-prison pipeline and ensure that schools are safe and supportive environments for all students:

- Pass the Solutions Not Suspensions Act (A5197).
- Expand alternative discipline, restorative practice training, and mental health programming in schools.
- Support the School Mental Health Resource Training Center.
- Develop multiple pathways to a high school diploma beyond high stakes testing.

**Empowering Families. Coordinating Systems.**