



**NEW YORK STATE  
PUBLIC HEALTH ASSOCIATION**

Envisioning Healthy People in Healthy Places

Mission: The mission of NYSPHA is to promote and protect the public's health through professional development, networking, advocacy, and education.

Vision: Strengthening public health and taking action to make New York the healthiest state.

**Testimony Submitted on Behalf of the  
Board of Directors and the Membership of the  
New York State Public Health Association  
(NYSPHA)**

by

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to

**The Joint Legislative Budget Hearing on Mental Hygiene  
Monday, February 14, 2022**

I appreciate this opportunity to provide testimony on the Mental Hygiene Budget for 2022 on behalf of the New York State Public Health Association (NYSPHA). NYSPHA is the New York State affiliate of the American Public Health Association (APHA) and serves as the statewide organization for members from all disciplines across the spectrum of public health professionals, organizations, academia, and students pursuing careers in public health. Our mission is to improve the public's health through advocacy, education, networking, professional development, and public health practice.

**A primary goal of NYSPHA is to address the mental health needs of New Yorkers, as mental health is closely connected to physical health.** The COVID-19 pandemic has taken a toll on mental health, and the mental health impact of the pandemic is likely to far outlast the pandemic. Depression, anxiety, substance use, opioid overdose, and suicide risk have been increasing since the beginning of the pandemic.

**To promote mental wellbeing among New Yorkers, New York's mental health infrastructure needs significant support.** At the core of New York State's mental health infrastructure are the Local Governmental Units (LGUs), led by the Directors of Community Services (DCS), who allocate state funding and oversee the substance use, mental health, and developmental disability initiatives within their counties. Even before the COVID-19 pandemic, LGUs were on the front lines of many mental health issues. Many local mental hygiene departments were operating on shoestring budgets before the pandemic. After two years of battling COVID while trying to maintain other essential functions, their financial and staffing resources are depleted.

**LGUs need increased funding for staff to support and maintain the essential services they provide their county residents.** The LGUs have stepped up during the pandemic to ensure their county residents were able to access essential mental health services. They instituted widespread use of telehealth and worked in creative ways to make contact with those who are socially isolated. They have been key communicators and trusted sources of information at the local level. They need additional funding to respond to the opioid crisis, mental health challenges, and risk of suicide. *Specifically, a full-time mental health and suicide prevention coordinator is critical to support the suicide prevention coalitions within each New York county.* While substance use and opioid taskforces receive federal funding, there is no federal funding available for suicide prevention coalitions. Individuals who participate on these coalitions do this work outside of their day jobs. Though they are passionate and extremely dedicated, this is challenging work, and a full-time coordinator is needed to ensure the best outcomes for county residents.

**Rural LGUs are in need of additional support considering the disproportionate risk of opioid overdose and suicide and limited resource availability.** For the year and a half between March 2020 and September 2021, I led a mental health listening tour of rural New York State, talking with almost 300 residents and professional stakeholders within 16 rural counties. These counties face significant challenges, yet they draw upon their strengths and assets to best serve their residents. They told us that they struggle significantly due to lack of funding, because the state allocates funding based on population size rather than need. In addition, serving individuals with significant needs and within multiple service systems, they struggle to meet service quotas because these patients require more time to achieve positive outcomes. *The state should consider revising its funding allocation and quota requirements to take into account needs within resource-limited rural areas.*

**Given the significant needs related to opioid overdose and suicide, it is critical that New York invest in prevention and early intervention.** For opioid overdose, this includes the implementation of Screening, Brief Intervention, and Referral to Treatment (SBIRT) for alcohol and other drug use in schools and primary care settings so that risk is identified across a continuum, and brief intervention is provided to reduce risk before consequences become more severe. For suicide, this includes making Question, Persuade, Refer (QPR) training readily available free-of-charge across the state, providing universal screening and brief intervention for depression and suicide risk in primary care settings, and ensuring county and organizational leadership have the information and tools they need to develop and implement a comprehensive approach to suicide prevention.

**Schools are in significant need of funding to support the mental health of students following their return to in-person schooling in the wake of the COVID-19 pandemic.** The U.S. Surgeon General declared a mental health crisis among youth; youth are struggling after losing almost a year and a half of in-person schooling and connections with their peers and school staff. Bills in the U.S. Senate support funding for schools to provide mental health services to students. Bills in the New York State Assembly support a psychologist and social worker in each school (A5019), universal screening for mental health issues (A6636), and mental health parity for student insured through CHIP (A343). NYSPHA strongly supports these bills. In addition, NYSPHA strongly supports funding to schools to implement depression and suicide risk screening and intervention and the evidence-based Sources of Strength program to build trust between students and adults, promote help-seeking, create a positive school climate, and prevent suicide.

**NYSPHA also urges the state to provide more guidance to schools on its mental health laws around mental health education in schools and training for school staff.** First, mental health is as important as physical health, so mental health education should be provided at the same level as standard health classes, not only one class. Second, schools should be provided guidance on specific evidence-based mental health and suicide prevention trainings rather than choosing any education or training they can find so that the time spent actually equips school staff to meet the increasing mental health needs of students. These trainings include Youth Mental Health First Aid; Question, Persuade, Refer (QPR); Applied Suicide Intervention Skills Training (ASIST); Suicide Safety Training for School Staff (SST); and Helping Students At-Risk for Suicide (HSAR).

**Medical examiner and county coroners' offices need additional funding for timely and accurate identification and reporting of deaths by opioid overdose and suicide and for creating and implementing processes to use this information for prevention.** The Suicide Prevention Center of New York received New York State Health Foundation funding to pilot a novel suicide fatality review system in four New York counties. As Principal Investigator of this project, my team and I worked with county medical examiners to implement a comprehensive data collection tool for medical death investigators and assembled suicide fatality review committees to review up to five deaths per quarter for which consent from next of kin was received. The goal of this process was to use timely and accurate data to inform suicide prevention efforts at the local level so that counties could make best use of limited resources and achieve the best outcomes for residents. *State funding is needed to continue to support the four counties after the grant ends and to fund the remaining counties so that they can implement a similar process.*

Additionally, NYSPHA supports the New York State Association of County Health Officials (NYSACHO) proposals contained in the PREPARE Act. This includes providing state reimbursement of 50% for pathology and toxicology services provided by county medical

examiners. This work is critical for suicide investigations, however the state currently contributes nothing to fund this effort.

The COVID pandemic and resulting mental health challenges have tested all of us. We urge you to use this extraordinary moment to use the budget process to support the needs and efforts outlined in this testimony. We respectfully ask you to **support the health and mental health of all New Yorkers** by including these recommendations in the FY 2022-2023 enacted New York State Budget.

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