

**Senate Standing Committee on Social Services
Senate Standing Committee on Women's Issues
Joint Public Hearing on Human Services Programs
for Domestic Violence Survivors
Tuesday, October 3, 2023, 10:00 AM
Testimony of Suzanne Miles-Gustave, Esq., Acting Commissioner
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Good morning, Chair Persaud, Chair Webb, and distinguished members of the Senate Social Services and Women's Issues Committees. I am Suzanne Miles-Gustave, Acting Commissioner of the New York State Office of Children and Family Services (OCFS). Thank you for convening today's hearing and for the opportunity to discuss this sometimes unknown, yet critical body of our work that is crucial to fulfilling our mission to promote the safety, permanency and well-being of New York's children, families, and communities.

Recognizing that survivors of domestic violence and their children need and deserve specialized supports, New York enacted the Domestic Violence Prevention Act in 1987. As a result, local departments of social services across the state must provide temporary emergency shelter and services to survivors. OCFS is proud to support and oversee these programs. Our responsibilities include licensing and monitoring all residential domestic violence programs and setting per diem rates for these programs, administering federal Family Violence Prevention Services Act (FVPSA) funds to providers across the state, reviewing and offering technical assistance regarding best practices for local districts, and reviewing the provision of non-residential services in each local district.

New York's domestic violence service system is comprised of public and private partnerships, both formal and informal, and includes funding for three categories of programs:

- Non-residential programs are offered by nonprofit partners or public agencies and provide telephone hotline assistance, information, referral, counseling, advocacy, community education and outreach services.
- There are also several types of residential programs, including domestic violence shelters (both dedicated to survivors of domestic violence and mixed occupancy, where up to 30% of residents may be other than survivors of domestic violence); safe dwellings, which are self-contained units of nine beds or fewer for survivors of domestic violence and their children only; and safe home networks, which are clusters of private homes providing emergency services and shelter to survivors of domestic violence coordinated by a nonprofit organization.
- Additionally, there are transitional housing programs that address the longer-term housing and service needs of survivors of domestic violence after they leave emergency residential programs, which fall under the purview of our sister agency, the Office of Temporary and Disability Assistance (OTDA).

There are currently 88 separate nonprofit or municipal agencies licensed or recognized by OCFS to provide domestic violence services across the state. There are currently a total of 183 residential facilities across the state, with a total bed capacity of 3,274. For our most recent federal reporting period, October 1, 2021, through September 30, 2022, more than 48,000 people overall received domestic violence services. This includes more than 11,000 survivors served in shelter, and nearly 37,000 served by non-residential programs. Of those service recipients who responded to surveys provided by DV programs, a total of 92% reporting knowing more about available community services, and 95% reporting knowing more ways to plan for safety, after receiving domestic violence services.

All the service provisions are grounded in the principles of being trauma-informed and survivor-centered. Simply put, it means that services are voluntary on the part of the survivor and that providers take their lead from the survivor on services based on needs identified by them. By design, the service provision is set up to believe survivors. It starts with the first contact which is typically via a local DV hotline. Providers listen, and let the survivor tell them their story. From there, providers will work with the survivor to help them plan for their safety and the safety of their children and provide assistance with meeting basic needs such as food, transportation, and shelter/housing.

For most, there's also a lot of work to help the survivor navigate systems. This runs the gambit from working with law enforcement, the District Attorney's office, and criminal courts, to working with multiple agencies to apply for and obtain housing assistance/services, to navigating the family court system, working with social services for temporary assistance services (including family offense waivers for certain program requirements for temporary assistance, such as employment requirements or not forcing a survivor to seek child support if such action would endanger them) and helping survivors involved with child welfare.

That said, there are numerous challenges faced by both survivors and DV providers, and I'd like to highlight a few:

- **Financial abuse.**
 - Most survivors lack any financial means of their own. This can be due to their abuser preventing them from working, sabotaging their employment, and/or controlling finances. It can also include controlling access to the survivor's vital documents, such as their birth certificate, driver's license or immigration documentation, making it impossible for the survivor to apply for a job or open a bank account.
 - There are tools available for survivors, such as last year's legislation that requires the release of individuals from utility, phone, and TV contracts in instances of domestic violence.
 - In 2020, the Allstate Foundation provided a grant to the New York State Coalition Against Domestic Violence (NYSCADV) to develop a financial empowerment curriculum to help DV and financial abuse survivors. OCFS commends the work NYSCADV has been doing in this arena.

- **Access to affordable and safe housing.**
 - This issue is very complex as there are several issues at play. On the top of the list is a lack of affordable housing stock across the state. Even when available, challenges remain to determine whether the housing unit itself meets health and safety standards, that the location is safe for the survivor, and it is accessible to services.
 - Lack of public transportation, particularly in rural areas, makes some housing literally out of reach for the survivor.
 - Then there's the challenge of financial help. Although there's an influx of funding made available to help survivors secure housing, it's not designed for long-term assistance.
 - OCFS would like to highlight the work of New York City Human Resources Administration (HRA) in their work to increase more transitional housing programs (Tier II shelters) for DV survivors and their families.
 - This has helped the NYC DV emergency shelters to accommodate the ebb and flow of DV survivors entering their system.
 - As noted, transitional housing programs such as this fall under the purview of OTDA, and OCFS welcomes an opportunity to partner with them and OPDV to explore ways to create more transitional housing opportunities in other parts of the state.

- **Access to legal services.**
 - Although DV program are required to provide legal advocacy, this service is more about helping survivors understand their legal options, how the legal system works, assisting survivors in completing applications for Orders of Protection, and simply accompanying survivors to court for emotional support. It is not providing actual legal advice or representation.
 - The cost of these services is a significant barrier for both survivors and DV programs that try to connect survivors to legal representation.

- **Assessing and providing support for trauma and mental health wellbeing.**
 - DV programs are required to provide counseling services though, in this context, it is more about crisis intervention, emotional support and empowering survivors with information so that they can become self-sufficient. It may include access to mental health professionals.
 - There is a requirement to assist survivors who request mental health counseling to be referred/connected to such services, but there's not a requirement for DV programs to have mental health professionals on staff. Survivors also face a significant shortage in available mental health services for adults, and more so for children.
 - OCFS has taken multiple steps to support DV providers in providing survivor-centered, culturally responsive, and trauma-informed services.

- As the state administrator of FVPSA funds, OCFS has contracted with NYSCADV to provide technical assistance and trainings to all FVPSA recipients.
 - NYSCADV has provided several trainings with this funding, including a training series for new DV advocates, a training series for hotline staff, and training to support DV programs on examining and responding to secondary trauma, including self-care strategies for their staff.
 - OCFS has modified its oversight and monitoring tools to review that services provided are voluntary, culturally responsive, survivor-centered and trauma informed.
 - OCFS worked with NYSCADV and Prevent Child Abuse New York to develop a computer-based training on Adverse Childhood Experiences (ACES) and trauma-informed practices for DV shelter staff.
 - In addition, OCFS has recently revised the Mandated Reporter training to include training in ACES and implicit bias.
- **Hotline services.**
 - In addition to the statewide domestic violence and sexual assault hotline operated by OPDV, every residential and non-residential DV program operates a hotline. New York City also operates a city-wide hotline. Hotline calls tend to be the first avenue that a survivor in crisis will utilize to reach out for help.
 - In partnership with OPDV and the Department of Health (DOH), OCFS has been working on a joint hotline workgroup that also includes staff from local and state hotlines.
 - The workgroup focuses on a variety of topics, including improving coordination between local hotlines and the state hotline, examining the top requests for help from callers, challenges and issues hotline staff face, and providing technical assistance to the hotlines.
 - A few of the top challenges for hotlines include callers confusing geography (Fulton County, New York getting calls from survivors in Fulton County, Georgia, for example), callers whose native language is not English, and simply recruiting and training hotline workers so that there can be adequate coverage.
 - There are remarkable emerging practices coming from the hotlines, such as training staff and modifying protocols to be more trauma informed, use of emerging technologies including text and online chat features, and the tremendous and creative ends hotline staff will go to build a catalog of available community resources (even if that means finding a DV program in Fulton County, Georgia).

Beyond our direct responsibilities, OCFS participates in multiple workgroups, committees, and meetings with various stakeholders to collaborate toward overall system improvement. These collaborations include with our sister state agencies the

Office for the Prevention of Domestic Violence (OPDV), as well as the Office of Victim Services (OVS), Division of Criminal Justice Services (DCJS), Office of Addiction Services and Supports (OASAS), DOH, and OTDA – and other stakeholders, including the New York State Coalition Against Domestic Violence (NYSCADV), the New York State Coalition Against Sexual Assault (NYSCASA), advocates, providers, and most importantly, survivors.

One such area of collaboration that I would like to highlight is the ongoing implementation of the Safe & Together™ Model. We know that 40-60% of New York's child welfare cases include an element of domestic violence. Safe & Together™, which is field-tested and based on best practices, focuses on holding persons who cause harm to children accountable for their actions while remaining child and survivor-centered and strength-based. The model's behavioral focus highlights practical and concrete changes in four key areas of case practice: assessment, interviewing, documenting and case planning. The framework integrates and supports the major child welfare practice models, such as Signs of Safety and Family Assessment Response (FAR) and other initiatives like trauma-informed practice change, and will help improve identification, assessment, documentation, case-planning, decision making and cross-systems collaboration for families affected by domestic violence.

OCFS has partnered with the Safe & Together Institute and OPDV to prepare certified trainers to lead the effort. OCFS plans to train all LDSS child welfare staff in Safe & Together™ and, in January 2022, incorporated it into the Child Welfare Foundation training for all child welfare workers. OCFS trainers have partnered with several LDSS staff and DV service providers in multiple training deliveries, information sessions and coaching calls. So far, 21 local districts have begun the implementation process with their DV programs and regional office staff, there are six local districts in active coaching, and we have 18 certified Safe & Together™ trainers.

Supporting survivors and ending the scourge of domestic and gender-based violence are deeply personal matters to Governor Hochul and are among the highest priorities of her administration. OCFS is proud to be a leader in this critical work, but we acknowledge that our current service delivery system was created in a different time. We always welcome collaborations such as these aimed at strengthening and improving New York's service delivery model and are available as a resource to you in your deliberations.

Thank you again for convening today's hearing. With your partnership, we have made New York State a national leader in addressing domestic and gender-based violence, but we know there is always more we can do. I appreciate this invitation to testify before you today and I welcome any questions or comments you may have.