

# New York Lawyers for the Public Interest, Inc.

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## Testimony of Justin Wood, Director of Policy at New York Lawyers for the Public Interest to the Joint Legislative Budget Hearing on Public Protection

Thank you Chair Krueger, Chair Pretlow, and members of the committees for the opportunity to submit testimony to the Joint Legislative Budget Hearing on Public Protection.

Since New York Lawyers for the Public Interest (NYLPI) was established nearly 50 years ago, we have advocated on behalf of marginalized and disadvantaged communities across New York City and State including individuals with disabilities, immigrant New Yorkers with serious health conditions, and residents of environmental justice communities bearing the greatest burdens of pollution and the climate crisis. Our client communities are routinely harmed by current systems of policing, immigration enforcement, incarceration and by lack of access to legal representation, and health care including mental health services.

We offer the following recommendations on how the FY2025-2026 budget can best address issues of public protection:

#### Full Funding for IOLA is a Critical Support for Civil and Pro Bono Legal Services

Too often, low-income New Yorkers, including our client communities, lack access to legal representation and justice. This "justice gap" is in large part related to disparities in staff compensation. Lawyers and other staff are leaving legal services agencies for government jobs at an alarming rate because civil legal services organizations statewide are unable to achieve pay parity with those attorney counterparts working in government positions, such as the New York State Attorney General's Office. The combination of higher salaries and a government pension is difficult to compete against, particularly for mid-career attorneys.

New York State must continue to address the "justice gap" for disadvantaged and marginalized residents of our state with a direct investment from New York State in civil legal services, and through the preservation of one of its core funders, the Interest on Lawyer Account Fund of the State of New York ("IOLA").

Every day, NYLPI's attorneys, social workers, advocates, and community organizers rely on this support to provide direct legal services, train community members, and engage pro bono attorneys and staff from nearly 80 law firms who provide thousands of hours of free legal counsel to community and nonprofit organizations.

IOLA currently provides funding to eighty-one different providers of civil legal services to low-

income New Yorkers. Thankfully, the FY 2025-2026 Executive Budget provides the necessary funding for the first year of a five-year IOLA contract, which includes increases to providers, and correctly recognizes IOLA as a fiduciary fund. However, missing from the Executive Budget is \$2.5 million that IOLA requested for their Infrastructure Project, a historic investment in grantees which promises to improve the consistency, efficiency, and coordination of the legal services delivery system. We urge full funding of the IOLA request of \$80 million.

Additionally, the Judiciary Budget includes a \$45.5 million increase for Judiciary Civil Legal Services. The legal services community is grateful for this significant investment in access to justice, and we know that the Chief Judge and his staff understand the difficulties facing low-income litigants in New York State.

#### **Protecting Immigrant Health**

Alarmingly, the Governor's budget proposal makes no commitment to defend immigrant New Yorkers, who make up over 20% of the state's population, from a new federal administration promising mass deportation, mass detention, and seeking to end birthright citizenship.

We call on Legislature and Governor to immediately pass the NY For All Act (S2235/A5686) which protect residents of our state and their families. The NY For All Act will mitigate the chilling and harmful effects of federal anti-immigrant policies on communities and fund programs that will preserve and expand all New Yorkers' access to comprehensive health care regardless of immigration status.

When noncitizen New Yorkers are arrested and detained by Immigration and Customs Enforcement (ICE), they lose access to healthcare in their communities. At the same time, their children and other family members of those detained frequently experience worsening physical and psychological health outcomes with the removal of their primary caretakers or providers.

Moreover, when immigrant New Yorkers lack confidence that state and local agencies and their representatives won't communicate and collude with ICE, mistrust and fear cause serious and irreparable harm. A January 2022 report found that fear and other barriers often prevent immigrants from accessing public services they are eligible for. When immigration policies worsened under the first Trump administration, this perpetuated fear of accessing services - fears that have persisted, such as access to public benefits, access to health services and access to law enforcement and the courts. Some immigrants are hesitant to call the police, report crimes or testify in court out of fear of exposing themselves to immigration enforcement. However, when strong state and local policies are in place that clearly protect against localities communicating and colluding with ICE, domestic violence and other crimes are more likely to be reported. At NYLPI, we have heard repeatedly from our immigrant clients that they are hesitant to access healthcare at local medical facilities and hospitals due to a fear of immigrant enforcement. This

<sup>&</sup>lt;sup>1</sup>Alulema, Daniela and Pavilon, Jacquelyn, "Immigrants' Use of New York City Programs, Services and Benefits: Examining the Impact of Fear and Other Barriers to Access.: (January 31, 2022) https://cmsny.org/publications/nyc-programs-services-and-benefits-report-013122/.

chilling effect was well documented during the first Trump administration<sup>2</sup> and has taken root again.

ICE also causes direct and irreparable harm by separating families, disrupting communities, and putting people in cages simply because they were not born in this country. ICE detention in New York State is inhumane. For example, most people who are arrested by ICE in New York City are detained at Orange County Jail in Goshen, NY, a notoriously dangerous and abusive facility. In previous public hearings before the New York City Council, directly impacted New Yorkers testified about the conditions in the jail. People reported unsanitary conditions, exceedingly cold temperatures, inedible and inadequate food.<sup>3</sup> Testimony and legal claims have also highlighted that officers at Orange County jail are abusive: they make xenophobic and racist comments, including using the N word; scream at detainees for not speaking in English; threaten to put detainees in solitary confinement for wearing a sweater in freezing temperatures; and regularly fail to provide appropriate meals and prayer spaces. There are widespread reports of physical violence and excessive force by Orange County Jail officers, including pepper spraying, kicking, and punching people involved in nonviolent protest.

#### **Protecting Gender Affirming Care for Patients and Providers**

NYLPI's UndocuCare TGNCI+ program strives to ensure that immigrant New Yorkers who are transgender, gender-nonconforming, intersex (TGNCI), or who are living with HIV can obtain and sustain access to gender-affirming healthcare, HIV care, and housing through immigration legal advocacy. A significant number of the immigrant LGBTQ+ New Yorkers we work with at NYLPI are seeking asylum and have survived extraordinary violence and persecution in their lives merely for expressing their true gender or sexuality. Those in need of gender-affirming healthcare in their home countries often did not have the opportunity to seek this lifesaving care due to safety concerns, or it was simply unavailable to them; and those in need of HIV medication frequently encountered discriminatory denials of treatment. The violence asylum seekers have endured in their lives often leaves them with trauma related symptoms such as posttraumatic stress disorder (PTSD), Major Depressive Disorder (MDD), and anxiety. The rights and dignity of transgender and nonbinary individuals are now under assault by the federal government, and several New York health institutions are denying medically appropriate care to patients. We urge legislators to immediately pass legislation addressing critical gaps in protections and safeguarding New Yorkers' rights to receive and provide genderaffirming care.4

<sup>&</sup>lt;sup>2</sup> See American Journal of Community Psychology, "Statement on the Effects of Deportation and Forced Separation on Immigrants, their Families, and Communities" (July 31, 2018), available at: https://onlinelibrary.wiley.com/doi/10.1002/ajcp.12256.

<sup>&</sup>lt;sup>3</sup>Daniel Parra, "City Council Hearing Probes Conditions for ICE Detainees in New York," City Limits (February 28, 2022) See: https://citylimits.org/2022/02/28/city-council-hearing-probes-conditions-for-ice-detainees-in-new-york/

<sup>&</sup>lt;sup>4</sup> Such legislation was introduced last year as S7506-A / A7687-A.

#### **Protecting New Yorkers with Mental Health Conditions**

We hail those aspects of the Governor's budget proposal that invest in our citizens with mental health conditions. We appreciate the proposal to increase spending on housing, services for youth, and such community-based programs as Intensive and Sustained Engagement Treatment (INSET), Peer Bridgers and Clubhouses. We are particularly pleased with the recommendation to expand the INSET program, which we have long touted as an exemplary model of voluntary mental health service delivery which is driven by "peers" (individuals with lived mental health experience) and which serves as a much-needed alternative to forced outpatient commitment. However, NYLPI urges the Legislature and the Governor to allocate even greater funding to these community-based programs and implores allocating funding for additional voluntary programs which we set forth in our testimony before the Joint Legislative Budget Hearing on Mental Health.

**Critically, we strongly oppose the proposed expansion of involuntary inpatient and outpatient commitment initiatives.** To be clear, we do not in any way support the failed policies of our broken mental health care system that leave at-risk individuals in unacceptable states of distress and deterioration. But forced treatment – if it even can be called treatment – is not responsive to the issue of public safety to which the Governor consistently ties it. In fact, people with mental health diagnoses are no more likely to be violent than individuals without such a diagnosis.<sup>5</sup> Inpatient hospitalization provides short-term care that, at best, temporarily stabilizes an individual. It does not connect them to, or provide, the mental health services and housing that are necessary for the individual to succeed in the community. In fact, all too often, involuntary inpatient and outpatient services traumatize individuals, erode trust in the system, and divert critical resources away from solutions that work. In- and out-patient commitment must not be the default services for individuals with serious mental illness.

In addition to harm caused by forced commitment, the Legislature and the Governor must take note of the ignoble fact that people of color are subject to highly disproportionate numbers of involuntary treatment measures. Most notably, the Office of Mental Health's own statistics as of January 10, 2025, demonstrate that over three out of five Involuntary Outpatient Commitment orders statewide, and over four out of five Involuntary Outpatient Commitment orders downstate, involve people of color.<sup>6</sup> There is no clearer evidence of the failure of our public mental health system to successfully serve people of color. Addressing this failure must be a priority for the government and our provider systems. Moreover, as the New York State Comptroller has clearly stated, even if it were in New York's best interest to increase forced commitments, hospitals greatly lack the capacity to accommodate current need, let alone the increased use of involuntary commitments that have been proposed.

Thank you for your consideration of these comments. Please contact me at jwood@nylpi.org

<sup>&</sup>lt;sup>5</sup> U.S. Substance Abuse and Mental Health Services Administration, "Mental Health: Get the Facts," https://www.samhsa.gov/mental-health/myths-and-

facts#:~:text=Myth%3A%20People%20with%20mental%20health,with%20a%20serious%20mental%20illness.

<sup>&</sup>lt;sup>6</sup> New York State Office of Mental Health, "Characteristics of Recipients: Demographics." See: https://my.omh.ny.gov/analytics/saw.dll?PortalPages&PortalPath=%2Fshared%2FAOTLP%2F\_portal%2FAssisted% 20Outpatient%20Treatment%20Reports&Page=home#reports

with any questions. We look forward to working with legislators to enact a budget that advances justice for all New Yorkers.

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### **About New York Lawyers for the Public Interest**

For nearly 50 years, NYLPI has been a leading civil rights advocate for New Yorkers marginalized by race, poverty, disability, and immigration status. Through our community lawyering model, we bridge the gap between traditional civil legal services and civil rights, building strength and capacity for both individual solutions and long-term impact. Our work integrates the power of individual representation, impact litigation, and comprehensive organizing and policy campaigns. Guided by the priorities of our communities, we strive to achieve equality of opportunity and self-determination for people with disabilities, create equal access to health care, ensure immigrant opportunity, strengthen local nonprofits, and secure environmental justice for low-income communities of color.

For more information please visit: www.nylpi.org.