

Transcript of the Public Meeting of the
CHARTER REVISION COMMITTEE
held on Wednesday, August 15, 2001
at City College, 138th Street
Borough of The Bronx

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Meeting convened at 8:00 p.m.

P R E S E N T

RANDY M. MASTRO
Chairman

COMMISSIONERS:

JONATHAN BALLAN

AMALIA BETANZOS

ROSA GIL

LISA LEHR

YVONNE LIU

CLAUDE MILLMAN

VINCENT ROBERTS

HERBERT RUBIN

TOSANO J. SIMONETTI

MARTA VARELA

HOWARD WILSON

MR. MASTRO: The next speaker this evening as we begin this portion of the public hearing is Dr. Jennifer Havens.

DR. HAVENS: Thank you for the opportunity to testify in support of the proposal to merge New York City's Department of Health and Mental Health into an integrated Department of Public Health.

As a child psychiatrist with a strong commitment to providing high quality mental health care to high risk children and families and an active participant since 1992 in the Ryan White Title I Mental Health Planning process, I support attempts to move towards a more integrated and coherent approach to service planning and delivery.

The arbitrary institutional, regulatory and clinical separations between health, mental health and substance abuse treatment services are significant barriers to the effectiveness of our work, particularly with the highest risk patients and their families.

For eight years, I directed a mental health program for HIV affected families co-located with medical services that provided coordinated mental health care for children and adults family members in one clinical site.

In this setting, the integration of mental health services with medical services was an essential element in the successful engagement and retention of patients in mental health services.

As the past chair of the Mental Health Work Group of the Mayor's HIV Health and Human Services Planning Council, I have been particularly active in developing innovative service models that integrate health and mental health services and increase access to mental health services through creative co-location strategies.

Currently, I direct the Child and Adolescent Clinical Services at the Children's Hospital of New York Presbyterian Hospital.

We provide mental health services to almost 3,000 children and family members yearly from the communities of Washington Heights and Inwood.

Demand for mental health services clearly outpaces our capacity and we have been working to get state approval for the out-stationing of mental health professionals in community based primary care sites serving children and families.

This would allow us to increase the identification and assessment of children and adolescents presenting in the primary care sites who require mental health services.

Children and adolescents with severe or complicated mental health problems would be

triaged to our mental health clinics; children with simpler problems would be managed in a comanagement model with primary care practitioners.

We believe this is an essential model for meeting for the demand for mental health services our stressed, under-resourced community presents.

I am in full support of your efforts to consolidate health and mental health services under the rubric of the new Department of Public Health. I believe the separation between mental health and health service delivery systems acts to marginalize and stigmatize mental health problems, many of which we now know are clearly biological in nature.

In addition, this separation has clearly been associated with tremendous disparities in funding and access between health and mental health services.

It is time to re-think our traditional ways of organizing services on the clinical, administrative and regulatory levels.

Patients don't present with their mental health and health problems in separate boxes; service systems and regulatory agencies need to get out of their traditional boxes.

Thank you.

MR. MASTRO: Thank you.

William Witherspoon, please.

MR. WITHERSPOON: Chairperson and members of the Commission, thank you for this opportunity to allow me to appear before you on the proposed merger between the New York City Department of Health and the New York City Department of Mental Health, Mental Retardation/Development Disabilities and Alcoholism Services.

This is a very significant proposed change to the City's charter.

My name is Bill Witherspoon and I am the executive director of the Upper Manhattan Mental Health Center, also known as the Emma L. Bowen Community Service Center, which is a not for profit, community based organization.

Our agency has been in existence since 1969 and has been a lead agency in northern Manhattan since 1976 in providing outpatient and day treatment services to children, adults and senior citizens who experience emotional, psychiatric and substance abuse disorders.

Over the years, the New York City Department of Mental Health has been of great assistance in planning, coordinating and funding needed mental health services, through our agency and others, in the northern Manhattan communities.

Imagining that Department of Mental Health will be merged with another entity naturally causes me and others concern especially when that entity is much larger.

As such, I initially felt that the merger would dilute the mental hygiene component as well as reverse the growing success that the mental health field has had, in recent years, in combating stigma and providing needed resources in the community

However, I have had an opportunity to review the preliminary recommendations for the Charter Revision, which includes testimony by Commissioner Neal Cohen.

I am convinced that over the last three years, when the proposed merger was introduced, much attention and input from the public has been incorporated into the revision, assuring me that the merger to an interdisciplinary model of public health care services would greatly benefit the residents of New York City as it has in several other states and cities.

Therefore, I stand here tonight in support of the proposed charter revision to create a new agency called the Department of Public Health.

In closing, I offer the following recommendation for inclusion in the Charter Revision; that the qualifications of the commissioner require experience both in physical and behavioral health.

This does not mean that the person should be a psychiatrist, but at least the person should have administrative and executive experience from working in an integrative system of physical and behavioral health care services.

Thank you.

MR. MASTRO: Thank you.

Mark Appel.

MR. APPEL: Mr. Chairman, honored members of the Commission, I am Mark Appel, ex-president of the CHAPS organization, a non-profit organization serving developmentally delayed children and their families.

I would like to thank the chair for giving me this opportunity to testify this evening in strong support of the commission's recommendation to merge the New York City Department of Mental Health Retardation and Alcoholism Services with the New York City Department of Health into a new Department of Public Health.

The merger of these two agencies will insure the integration and collaboration of public health and mental health services in the DDMR populations.

The merger of these two agencies will assure better comprehensive coordinated services, and better managed care by eliminating duplication and overlapping of services.

In the next decade we will be facing new challenges in public health policy and in the way we deliver health and mental health services to our communities.

Under the strong leadership of Commissioner Cohen, the New York City Department of Mental Health has emerged as a leader in developing integrated models for the DD and MR populations, the department has initiated strong case management programs, New York City early intervention provides these services in a most comprehensive model by providing family support health services in conjunction with rehabilitation services.

Some of these services are being provided by various different agencies. In a new department of public health agency these services will be integrated and make the early intervention program an even a greater success in New York.

This would be a first step in our moral and professional responsibility to provide the most comprehensive and integrated care to our mental health and disabled population.

In the past few months, many advocates have strongly urged that this merger between these two agencies into a new department of public health be made permanent.

Under Dr. Neil Cohen's leadership, New York City has become a leader as we face new challenges in the public and mental health.

I would like to add that Dr. Cohen's approach has been lauded by every major health care and public advocate group.

The leadership as a department with first deputy commissioner Dan Still, Elsie DeCampo, Dimtra Risuero as well as Carlos Diaz has made his team a winning team.

The respect of the department has helped in a dialogue and action plan that has and continued to contribute to the success story of this administration.

As an advocate and recipient agency who has benefited from these services, I strongly urge this commission to endorse this proposal.

This commission will establish an historical achievement which will establish a profound and lasting impact on public health policy in New York City.

Once again, thank you very much for the opportunity to address this commission.

MR. MASTRO: Thank you.

Arnold Birenbaum.
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DR. BIRENBAUM: Thank you. I'm Dr. Birenbaum, professor of Pediatrics and Rehabilitation Medicine.

I'm speaking for Dr. Herbert Cohen, director of the children's evaluation and rehabilitation Center.

I am a developmental pediatrician who specializes in the care and treatment of children with developmental disabilities. I am the director of the largest diagnostic and treatment center for children with developmental disabilities in New York City and one of the largest and best known centers in the United States.

I have worked at this center for the past 37 years and have been the director for over 25 years.

Our center serves over 8,000 children, adolescents and adults and their families each year.

Last year, we provided over 58,000 direct services.

For most of my 37 years as a service provider for children with developmental disabilities, I have shared the concerns of both consumers and providers of services that the developmentally disabled have not received sufficient attention from the government agencies responsible for creating, coordinating and supporting needed services.

But this situation has clearly improved since the state of New York changed its priority from the support of large institutions to the expansion of a wide range of community services.

New York City never directly provided financial support for institutional care, and for the past 40 years, has used state aid local assistance funding and its own tax levy dollars, often matched by those provided voluntary agencies, to offer a growing range of community services for the developmentally disabled.

This effort has had some success, but has not yet resulted in completely achieving its goal.

As a pediatrician concerned about children with special needs and as a professional who has a particular interest in prevention, I believe that the separation of the health services system from the mental health and mental retardation/developmental disabilities care systems has made little sense.

It has promoted inadequate and disjointed coordination of health care and nonmedical services.

There have been major problems getting mental health services for children with a chronic illness.

In the past, there has also been insufficient attention to prevention.

I believe that the consolidation of health, mental health and MR/DD services under a single commissioner, with the proper leadership, will offer greater opportunities to improve coordination of services to also fill some of the gaps that have been created by the artificial divisions created by separate departmental responsibilities.

Thank you.

MR. MASTRO: Thank you.

Carrie Sackett, please.

MS. SACKETT: Good evening, Mr. Chairman and members of the Commission. My name is Carrie Sackett. I am the campaign manager for Dr. Jessie Fields, independent party candidate for Manhattan borough president.

I am representing Dr. Fields tonight and want to speak about what the Charter Revision Commission should place nonpartisan elections on the ballot this fall.

I would like to outline how nonpartisan elections could remove some of the obstacles that independents face.

For example, Dr. Jessie Fields is running against an incumbent Democrat who for four years has received regular news coverage, has sent out newsletters to constituents at public expense and has appointed hundreds of community board members throughout the borough.

Clearly, Dr. Fields starts out with a significant handicap in terms of public recognition.

One way to combat this is to spend money. Her campaign has qualified for the campaign finance board's matching funds program, which ideally would allow us to spend money all summer long promoting her campaign.

However, because Dr. Fields does not face a primary opponent, the CFB is withholding her matching funds until after the September 11th primary election.

This leaves the campaign less than two months to overcome her opponent's built in advantages.

Non-partisan elections would eliminate the perception in elections that the Democratic party candidates are the only ones that count and that the Democratic party primary is where the actions is.

You may be asking well, why doesn't the independence party just hold primaries?

The answer lies in the ballot access laws, another partisan hurdle enacted by Democrats and Republicans, which penalizes independents. The election law requires that a candidate for borough president must obtain the number of signatures equivalent to the lesser of two criteria; 5 percent of the party's registrants in the borough or 4,000 signatures.

A Democratic party candidate collects the 4,000 signatures or 6 percent of its party registrants.

Thus it's possible for several candidates to petition door to door or on the street.

The independence party of Manhattan, with 16,338 registrants, must collect 817 signatures or 5 percent of party registrants.

These signatures require two labor hours each and an appointment to meet members at their homes.

In conclusion, non-partisan elections would eliminate the built in advantages for Democratic candidates and level the playing field.

All candidates would collect the same number of signatures from registered voters of any political affiliation, all candidates would obtain funding at the same time and all candidates would compete directly for each and every voter's support.

Thank you for allowing me to testify on this issue.

MR. MASTRO: Thank you for your testimony.

Michelle McCleary.

MS. McCLEARY: Good evening. My name is Michelle McCleary and I am a member of the state committee of the independence party representing Harlem.

I am also the independence party candidate for the City Council in the 9th District.

I am glad to have the opportunity this evening to speak to the Commission about the issue of nonpartisan elections.

I was glad to read in your preliminary report that you support this important reform to our election process, but disappointed that it is not on the table for consideration by the voters this November.

Tonight I wanted to speak about the positive impact nonpartisan elections would have for the African American community.

I believe very strongly that the African American community must diversity its political

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options.

I believe that our vote is taken for granted by the Democratic party. I don't believe any community is well served by a monopoly over the election process like the monopoly enjoyed by the Democratic party.

The Democratic party's control over the process is interwoven with their control over social service programs, a patronage network and the apparatus of the elections themselves.

It is very difficult to break into that control, even in the context of term limits and an excellent campaign finance program.

The primary system is one of the main ways the Democratic party exercises control.

Party lawyers and operatives regularly challenge the petitions of insurgent candidates and make use of New York's restrictive and technical allot access laws to remove insurgents from the ballot. Moreover, the outcome of primary elections are usually determined by a core of prime voter, with little outreach to young or new voters.

In a one party borough like Manhattan, the winner of the Democratic primary is the winner of the elections.

So our elected officials are chosen by a very small percentage of eligible voters.

Candidates who win the support of the party's machine are not chosen on the basis of merit or accomplishment but on the basis of loyal service to the party, that is by actively working to insure the continuation of partisan control.

This leads to elected officials who are more responsive to the Democratic party than to the voters.

It also tends to discourage many talented members of our community from running for public office.

And it turns our young people away from the electoral process altogether.

The voter turnout among African American youth ranges between the single digits and the teens.

Eliminating partisan elections would liberate voters in the African American community to make choices based on the merit and worth of a candidate and not based on party label.

Many talented citizens might consider running for public office, who now are discouraged by the high price you must pay to earn the support of the party apparatus of the (516) 741-5342 AR-TI RECORDING COMPANY (212) 349-9692

Democratic party.

I believe we would have a far more lively debate on the public policy issues that we face in Harlem if elections were nonpartisan and all voters were eligible to participate.

MR. MASTRO: Thank you.

Allen Cox.

MR. COX: Thank you for the opportunity to testify before you this evening.

My name is Allen Cox and I am the independence party candidate for City Council in the 7th District.

I am speaking tonight in support of nonpartisan elections.

I have read the Commission's preliminary recommendations and I applaud your support for nonpartisan elections for citywide office and respectfully urge you to extend this reform to include borough wide and local races as well.

In many respects it is in local races where partisan control and manipulation is most corrosive.

I also encourage you to include nonpartisan elections in your final recommendations to the voters.

In City Council races, many voters in the general election know little or nothing about the candidates themselves. Instead they vote party line.

This enables party leaders to put forward persons of mediocre talent for those offices, rewarding loyalty to the party organization, not to the constituencies that they represent.

Candidates focus on getting votes from core constituencies, largely older voters, rather than garnering support from new uncommitted voters.

In the Harlem community where I am running, for example, as in many black communities across the country, young black voters are increasingly choosing to not identify themselves with a party label.

A recent poll conducted by the joint center for political and economic studies found that 42.6 percent of African Americans between the ages of 18 and 25 view themselves as politically independent.

Young black voters interests are not represented in a partisan election where a local Democratic party machine dominates.

This situation is particularly troubling in a district like mine because it means that more
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and more potential voters will become disillusioned with the voting process and pull out altogether.

In 1999, only 20 percent of eligible voters cast their ballots for a City Council candidate.

Furthermore, the partisan primary structure reinforces the total control of the Democratic party.

In Manhattan, we have a one party town where the winner of the Democratic party is the defacto winner in November.

To the extent that there are debates and press coverages of the City Counsel races, the coverage centers on the DP primary and excludes other candidates.

Moving to nonpartisan elections would give all the voters the opportunity to see all their choices.

There would be a more level laying field for debates and media coverage.

Most importantly, all the voters would have the opportunity to consider their choices based on the merits of the candidates, not on a candidates's connection to a tightly-controlled patronage mill.

Nonpartisan elections, for the first time, would lead to a system in which public policy decisions are made based on an assessment of what is best for our city and a process that is open to all the voters.

MR. MASTRO: Thank you.

Francis Paris.

MR. PARIS: I am Francis Paris, and I would like to present the statement of the president of the New York Academy of Medicine, Dr. Jeremiah Barondess.

I am glad to respond to your request for an expression of my opinions concerning merging the functions of the Department of Mental Health, Mental Retardation and Alcoholism Services with the Department of Health.

As you are aware, I have previously expressed myself as believing that the benefits of such a consolidation would outweigh any visible potential disadvantages.

Although three years have passed since this idea was first broached, my opinion has not changed.

There are four grounds that seems to be particularly important in this regard:
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Medical progress and the growth of clinical sophistication in recent decades have developed and fortified the view that the separation of mental and physical disorders is artificial and runs counter to clinical experience and a great deal of clinical research that demonstrates the tight interactions between the two.

Indeed, very few physically based diseases are without their emotional and behavioral components and many disorders thought to fall primarily within the field of mental health have important physical repercussions.

While these crosscurrents are particularly obvious in patients whose psychological or behavioral characteristics have led to physical disease, such as individuals infected with the HIV virus as a result of intravenous drug use, or patients with difficulty controlled diabetes related to dietary indiscretions and obesity, such connections also appear in instances in which physical disease leads directly or indirectly to emotional disorders.

Examples include the impact of juvenile diabetes on the emotional development and mental health of these young patients or somewhat later in life, the impact of undiscovered or poorly controlled hypertension on the risk of dementia.

A second area of compelling interest has to do with epidemiologic research and surveillance.

Investigating causes, risk factors, trends and the impacts of comorbidities or of socioeconomic status on any aspect of health requires an integrated view of the person as a complex biological, psychological and social entity.

The richness of epidemiologic investigations is enhanced by such a unified view of the nature of human health, and the utility of epidemiologic studies is enhanced by recognition of these complexities and interactions.

A third consideration has to do with the difficulties patients have in navigating our increasingly complex healthcare system and the associated social support agencies and systems that bear on a variety of disorders and various levels of disability.

Such navigation problems are of enormous importance throughout the healthcare system, and are perhaps especially important for individuals with disorders of concern to the two agencies involved.

In a variety of ways we have learned that complex systems present enormous gradients to efforts to access care and to follow treatment regimens of a variety of kinds.

Coordinated efforts are clearly an immense advantage under these circumstances, and unified navigational help as these patients seek to intersect with the system is an urgent need.

Finally, I believe that streamlining, merging and coordinating the efforts of these two agencies will enhance the effectiveness of programs in both by affording integrated programming, coherent clinical care and linked services.

The patients at issue urgently require that the efforts of the system be effective, a wish shared, of course, by everyone involved.

For the reasons I have outlined, I continue to feel that a unified Department of Public Health with a broadened mandate, and preferably with a newly charged Board of Health integrally involved would be eminently in the public interest.

Thank you.

MR. MASTRO: Thank you very much.

Jim Lescynski.

MR. LESCYNYSKI: My name is Jim Lescynski and I'm a Libertarian candidate for City Council.

There are two aspects of the proposed changes to the City Charter that I find troubling. Both of them pertain to our inalienable human right to self defense, which means an inalienable right to immense advantage under these circumstances, and unified navigational help as these patients seek to intersect with the system is an urgent need.

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Council.

There are two aspects of the proposed changes to the City Charter that I find troubling. Both of them pertain to our inalienable human right to self defense, which means an inalienable right to keep and bear arms.

Since government has been content to infringe on that right to self defense, regardless of the limits placed on government by the Constitution, let us consider the current proposals.

The Charter Revision Commission has proposed that the legal age for ownership of a firearm in New York City be raised to 21.

This is a classic example of the tyranny of the majority. They would not be bold enough to call for an outright prohibition on gun ownership.

So instead they divide and conquer. They say we will only strip the rights of one segment of society.

In this case, people age 18 to 21. Never mind the fact that they are in most other ways, save discriminatory alcohol consumption laws, granted the full rights and responsibilities of every adult citizen.

They pay taxes, vote, can be tried as an adult for any crime. We'll just take away the right to self defense, says the government. What a reasonable compromise. After all, it will take some guns off the street, and everyone else will still be able to own them.

I wonder how reasonable it would seem if we arbitrarily stripped the rights of another group of citizens, say deny the right of gun ownership to blacks, or Jews, or people below a certain income level. After all, it would take some guns off the street and isn't that what's really important?

I say New York City is better than such petty, arbitrary discrimination. All of our citizens are entitled to their rights, regardless of their age and we must not allow this proposal.

A related proposal being considered by the Charter Revision Commission would prohibit the possession or discharge of a firearm within 1,000 feet of any school, whether public or private, including daycare centers.

I would be interested in seeing any evidence the Commission has gathered that gun play at or near daycare centers has become a problem.

We're talking a 2/10 of a mile radius from every school in the city, so I am guessing that covers a significant swath of real estate.

The effect of this proposal would be to effectively prohibit any possession of a firearm outside a home or place of business.

We would disarm the vast majority of lawful, peaceful gun owners in this city, while doing nothing about violent criminals who do not recognize gun free zones or any other law.

This is nothing less than victim disarmament, and it is immoral.

I say, get government out of the way of lawful gun ownership. Reject these vicious, antisocial victim disarmament proposals. Protect our inalienable right to self defense.

Thank you.

MR. MASTRO: I just wanted to clarify for the record, the last time I looked, under New York law you had to be 21 to legally drink in this City.

MR. LESZYNSKI: I mentioned that in my testimony.

MR. MASTRO: Also the last time I looked, the Second Amendment talked about the right to bear arms in militia.

MR. LESZYNSKI: It says individuals.

MR. MASTRO: That's the way it's been interpreted constitutionally.

I appreciate the comments, though.

Greg Draves.

MR. DRAVES: I'm Greg Draves. I'm Libertarian candidate here in the Seventh District.

I looked over this 142-page document of this Commission's recommendations and, you know, it doesn't seem like it's about safety or health or human rights or even about children.

It's about power. It calls for the creation or expanded authority of nine different administration boards, departments, commissions and offices of the Mayor.

And you know, who is the mayor accountable to? The City Council?

No, because with more and more commissions, the City Council is being systematically stripped of power.

The Mayor is accountable to voters. After the first four years of getting his staff onto all these commissions, then he has carte blanche the next four years to strip whatever power he
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wants.

You know, I mean, I would consider that, you know, eight years from now are we going to see the difference between the office of tucking children into bed and the office of happy thoughts?

That there might be a commission on mayors, which will be appointed by the mayor with the job of choosing the mayor every four years.

It doesn't seem to make a lot of sense for this representative government to have so much power represented in only one person. I really take exception to that. And my question is who is going to protect us from the mayor if you take away the City Council and you take away our guns.

MR. MASTRO: Thank you.

Dorian Davis, please. Okay.

Joseph Garber.

Welcome back, Mr. Garber.

MR. GARBER: Good evening, Chairman

Mastro and members of the Commission. My name is Joseph Garber.

Last night in LaGuardia Community

College, Mr. Davis, the executive director made an excellent presentation about the role of his agency and he indicated that he needs an investigative staff, which I am fully in agreement.

However, when he said he only needs two investigators, I felt that possibly there should be a common interest between OMB, the Department of Investigation and his own office, and the Police Department's Internal Affairs Bureau and the Mayor's Office of Operation to come up with a suitable quota based on his caseload.

Now to get back to the City Charter in more detail.

In Section 435, as I have started last evening, I feel that there is to be language written into code about the merger of the New York City Housing Authority Police Department and the New York City Transit Authority into the charter as well as the merger of the School Safety Division from the Board of Education into the New York City Police Department on December 15th, 1998.

Consideration should also be given to
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revoking Section 437 of the charter where it indicates that the police commissioner can appoint one intelligent individual who will visit the courts.

Since the Police Department now has a criminal justice bureau and a legal bureau with a large staff, I think possibly that section is superfluous.

In Section 438 of the charter, I couldn't believe what I read that there are, to my knowledge there are no telegraph mechanisms in use in any police department facility.

And reading Chapter 48 regarding the department of information technology and telecommunications, I could not find any reference in that chapter relative to telegraph user staff.

Therefore, I think the Commission staff should review Section 438 to determine is there really a need for that section?

In Chapter 18A, Section 440, page 133 it states the civilian complaint review board has jurisdiction to investigate complaints against officers of the department.

When we use "officers," this means uniformed members of the City of New York Police Department of all ranks.

However, on page 134, paragraph four, subsection one, it states against members of the Police Department.

Members of the Police Department does not only include uniformed members of the service. It also includes civilian members of the service.

So, therefore, I think there is an issue of language that both of these two sections have to be clarified.

On page 137 of the Commission's recommendations relative to chapter 195, it states that the Department of City Planning reviews the purchase or lease of any office space by City agencies.

TIME MONITOR: Your time is up.

MR. GARBER: Okay. Thank you very much.

MR. MASTRO: Jak Karako.

MR. KARAKO: Good evening. My name is

Jak Karako. I am the Libertarian candidate for the City Council in District 4. I am also the (516) 741-5342 AR-TI RECORDING COMPANY (212) 349-9692

chair for the Libertarian Party of New York. I am a financial systems professional and a performing artist.

I would like to comment on the proposed gun-free school safety zones and sales.

In the history of mankind, no law has been able to disarm the criminals. Criminals will always have access to arms. If they cannot find them in the market, black market, they manufacture them.

Therefore, any gun restricting law will have affect only on law abiding citizens, not on criminals, rapists, robbers, murderers. We cannot wish guns out of existence, nor can we legislate them out of the hands of the criminals.

Since there cannot be police presence everywhere, all the time, the only reasonable solution is to allow people to defend themselves. Even with the best intentions, disarming the law abiding citizens relative to criminals has one consequence: More crime.

Think from the criminal's perspective. Would you rather have your victim armed or unarmed? Even the possibility of an armed victim would make any criminal think twice.

Admittedly, as the civilization progresses, the need for guns decline, and yet the only viable solution is lesser gun control not more.

Therefore, I urge you to not propose any gun-free zones and not to propose any changes to the age limit for gun purchases.

Thank you very much.

MR. MASTRO: Frederick Wilson, please.

All right.

How about Emmanuel Anosike?

MR. ANOSIKE: Honorable Chair, ladies and gentlemen, my name is Emmanuel Anosike. I'm the Director of the Department of Business Services for the City of New York.

The Department of Business Services, as you know very well is the lead agency for small business here in the City. We are just like the (516) 741-5342 AR-TI RECORDING COMPANY (212) 349-9692

commerce department. We allow businesses to grow. We teach them how to staff, how to develop, how to do everything.

So, but here today I am going to talk about the bid practices program. The bid practices program assists minority and women owned business to obtain contracts for goods and service and for construction and construction related items.

I am here to support that the small purchase limit be raised to \$400,000 for all categories.

In 1991 and 1992, I took an independent study on how the City buys. Because I'm a civil engineer, and I looked at how the process worked and I am involved with Mayor's Office of Contracts.

In my own study I found out that small business' contracts mostly fell under \$250,000. You need to look into the records from the controller's office. We found out that many of them fall under \$100,000.

So here today I am saying that 100,000 is truly small and is an issue. And I am also saying because these people come to me on a day-to-day basis for training on how to bid, how to estimate, where to get funding, what agency has what, but I found that --

TIME MONITOR: One minute.

MR. ANOSIKE: All right.

So what I am saying is that if we should increase this number up to 60 percent, we stand to help these people to make more than 14 million in the fiscal year, and to facilitate the whole process.

The Department of Business Services has embarked on a new system where information will be send to these businesses via electronic system, e-mail, via fax and via letters.

So I want to thank you for giving me this opportunity and thank you very much for your hard work.

Thank you.

MR. MASTRO: Thank you very much, sir.

Dorothy Williams Pereira.

Are there any other speakers who I did

not call?

MS. PEREIRA: My name is Dorothy

Williams-Pereira.

Thank you for letting me address you again, but I also must say that this is not very accessible to the public and the reason for the lack of testimony at hearings probably relates to the fact that it's so difficult to get to testify, either by transportation or just the public generally not knowing when and where things are.

I would like to address the whole idea of checks and balances. I find it difficult to understand why we are in this day and age, when we no longer have to travel by stagecoach to Albany to -- for legislators to vote and for the public to know about what is going on that we are trying to centralize government even more.

We should be trying to decentralize it more. We should try to have a health board in every assembly district. We should try to have a Department of Health in every county.

We should have less centralization and more decentralization and, therefore, have a more effective treatment for our public. We should have the public getting more services because there are more services to get and less bureaucracy to pay for.

The separation of powers has long been a philosophy of philosophers for many centuries.

Power corrupts when it is concentrated too close in one position. We have experienced a failure on the part of the Department of Health to protect the public from AIDS, from West Nile virus.

We actually need a more expanded Department of Health not a more concentrated one.

We should have a commission for getting rid of the West Nile virus and getting vaccinations for AIDS and West Nile virus.

We should have more research to talk about integrated health when you have completely ignored as a Department of Health holistic medicine for many, many years, when you know very little about nutrition.

I am not against osteopathic or regular M.D. medicine, I think that everything that helps a patient should be integrated. But I also think that commissions should be able to network with each other and not have to be consolidated.

I think it's very important --
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TIME MONITOR: Your time has ended.

MR. MASTRO: Thank you, ma'am.

Is there anyone else who wanted to be
heard that I haven't called?

I want to thank everybody for being
here tonight and thank everyone for their testimony.

(Time noted: 9:15 p.m.)

CERTIFICATION

I, BONNIE ATELLA, a Shorthand Reporter and Notary Public, do hereby certify that the foregoing is a true and accurate transcription of my stenographic notes.

I further certify that I am not employed by nor related to any party to this action.

BONNIE ATELLA