NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE
Michelle Morse, MD, MPH
Acting Health Commissioner

Testimony

of

Dr. H. Jean Wright II
Executive Deputy Commissioner for the Division of Mental Hygiene
New York City Department of Health and Mental Hygiene

before the

New York City Council

Committee on Mental Health, Disabilities and Addiction

On

Oversight: Current Access and Operations of New York City's 988 Suicide & Crisis Lifeline
Int. 1162-2025 and Int. 1385-2025

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250 Broadway, Hearing Room 3
New York, NY

Good afternoon, Chair Lee and members of the Committee. I am Dr. Jean Wright, Executive Deputy Commissioner for the Division of Mental Hygiene at the New York City Department of Health and Mental Hygiene (the Health Department). I am joined today by Jamie Neckles, Assistant Commissioner for Bureau of Mental Health, and Dr. Rebecca Linn-Walton, Assistant Commissioner for the Bureau of Alcohol and Drug Use. Thank you for the opportunity to testify today. I am pleased to be here with my team to discuss NYC 988 and the Health Department's role in addressing the mental health needs of New Yorkers.

First, I'd like to review the history of NYC 988, and our role in building, maintaining, and improving this infrastructure.

The Health Department is a key pillar of New York City's mental health system. We provide health surveillance to inform programming and policies, guidance and leadership, as well as oversight and technical support for contracted services as well as some direct services.

We take a public health approach to this work with the primary goal of preventing mental health crises by increasing awareness and access to mental health and substance use supports. However, when mental health crises do occur, we seek to ensure all New Yorkers have access to responsive care that includes health and social supports that are affordable, accessible, effective, and free of stigma. As part of this work, we procure and manage the contract for the call center that operates 988 in New York City.

New York City has long been a leader in this space. The mental health crisis, information and referral hotline serving New York has evolved and expanded over decades. It started as the 24/7 phone-based service, called LifeNet, that handled less than 100,000 calls a year. In 2016, the City substantially increased its investment in the hotline to handle more volume through more modern means of communication – renamed as NYC Well. The program's capacity doubled to 200,000 calls, texts and chats. A website was also developed to provide direct, searchable public access to the resource database which counselors used to share information and make referrals. Peer support was also added as an option for anyone to select.

In 2020, the federal government moved to improve and unify the country's mental health crisis and suicide hotlines, making 988 the nationwide number. In 2023, NYC Well officially transitioned to 988, along with the rest of the country. We worked closely with the State Office of Mental Health to execute this transition. NYC 988 goes above and beyond federal and state requirements – providing a robust array of services such as peer support, a single point of access to mobile crisis services, and non-crisis information and referral.

The Health Department oversaw and supported the evolution from LifeNet to 988.

This history informs our work currently.

The mental health crisis services we support can be categorized into three groups: Someone to Call, Someone to Respond, and Somewhere to Go. The program we're discussing today, 988, is the cornerstone of "Someone to Call."

When someone experiences a mental health crisis, it can be helpful to talk to someone we trust: a friend or family member, a religious advisor, a peer, a mental health professional or health care provider. Anyone can reach out to 988 at any time of day or night, any day of the year, to speak with a trained crisis counselor or peer support specialist. New Yorkers can reach out via call, text, or chat. 988 counselors and peers will listen to a person's situation and help them through a moment of crisis with emotional support and coping skills. NYC 988 provides custom local counseling and resources consistent with national standards and best practices.

Counselors help connect people to ongoing mental health services that meet their needs. In New York City, these counselors refer people who don't need immediate care to community based mental health providers and community resources. There is also an online database of service providers available to the public on the 988 website.

While 988 is the main program for "Someone to Call," it can serve as a link for Health Department programs that are responsive to "Someone to Respond" and "Somewhere to Go". For example, 988 can dispatch a Mobile Crisis Team to visit the person wherever they live within a few hours, 8 am – 8 pm, 7 days a week, citywide. Mobile Crisis Teams are our cornerstone short term intervention for non-life-threatening mental health crises – "Someone to Respond". Mobile Crisis Teams represent a significant portion of the mental health crisis response infrastructure in the city. Mobile Crisis Teams are a distinct part of the mental health care system. They are operated independently from 988 by hospitals and community-based-organizations licensed by the State Office of Mental Health.

Some people need more support than they can access in their home. These individuals might need "Somewhere to Go," our third category. For these situations, the Health Department supports Crisis Residences, which provide an alternative to hospitalization for people experiencing mental health crises. This program is an example of a very different type of intervention from 988 and illustrates the wide array of services the Health Department supports that are available to your communities.

988 often serves as an entry point to these services.

It is designed to be easy to use for everyone - phone, text, and online chat are staffed with people who speak English and Spanish with additional interpretation services available in more than 200 languages. Callers are also never asked to disclose their immigration status. NYC 988 counselors are also trained to accept calls from deaf and hard of hearing individuals.

The Health Department oversees the contract for 988 in collaboration with the State Office of Mental Health to hold the vendor accountable to City standards and continually improve this service for New Yorkers. The Division of Mental Hygiene contracts with over 200 providers and CBOs to administer over 800 programs. The 988 contract is held to the same rigorous standards as all our other mental health vendors.

The contract requires the vendor to provide six core services: crisis counseling and suicide prevention, peer support, information and referral to behavioral health services, single point of access to urgent behavioral health services, website, and follow-up.

The NYC 988 vendor is required to maintain staff levels that support call center capacity to meet standards of timely response, accessibility, and deliver all core services. There must be dedicated staff for each modality (calls, text, and chat) at all times. The vendor has an obligation to comply with all quality improvement requests from the Health Department.

My team works tirelessly to uphold our commitment to New Yorkers and continually improve the City's mental health system. This is not without challenges, but we are committed to addressing the mental health needs of our communities.

Legislation

Before we answer your questions, I'd like to briefly discuss the legislation being heard today.

Introduction **1162** refers to annual reporting on suicide deaths. The Health Department already publishes data on suicide deaths annually in the Summary of Vital Statistics report - which highlights births and deaths in the City by trends, demographics, and geography. This report includes information on suicide deaths and is available on our website. The Health Department also publishes data on suicide deaths in other locations on our website, including the Healthy NYC webpage and various data publications.

Introduction **1385** refers to the establishment of a construction site opioid antagonist program. We appreciate the Chair and Council for bringing attention to this important issue. Construction workers experience higher risk of opioid use disorder and overdose fatality compared to other occupations. We support the intent of this bill and look forward to discussing how to accomplish the goals of this legislation while allowing the Health Department to focus on community-based naloxone distribution among neighborhoods and communities most impacted by the overdose crisis.

The Health Department strives to ensure mental health services in New York City are affordable, accessible, effective, and free of stigma. I am pleased with the progress we have made, but we still have more work to do. We welcome feedback from Council and community members today as we continue to improve and adapt the City's mental health infrastructure to better meet the needs of New Yorkers.

Thank you for the opportunity to testify. I look forward to answering your questions.