**Community Board 17**

**Social Services Committee Meeting**

**Monday, October 24, 2022**

**Present: Guests:**

Rhonda Joseph Zuma Novoa,

Donna Rose NYC Dept. of Health

Sharon Marshall CK Price

Tesa Wilson

Monica McKain-Brown

Sabine Jacques

Janice Reid

Diana Gay

Muline Mickle

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The **Social Services Committee Virtual** meeting was held on **Monday, October 24, 2022 at 7:30pm.**

**Ms. Rhonda Joseph** called the meeting to order 7:40pm.

**Roll Call**-Rhonda Joseph, Donna Rose, Sharon Marshall, Monica McKain-Brown, Tesa Wilson, Janice Reid, Zuma Novoa, Sabine Jacques, Diana Gay

**Ms. Joseph** asked if they had a chance to review the minutes for the Sept. 26, 2022 meeting? Since they do not have a quorum, the minutes will be tabled until the next meeting.

**Chairperson’s Report**

**Ms. Joseph** said in September, an issue was raised to the CB 17 Chair and Treasurer for the significance of having the Social Security Administration make a presentation at this meeting or in a forum to give some information to the community. There was some debate back and forth and she said she would bring it up at this meeting to see how they would like to handle it and if the Social Security Administration was something they felt they needed to have as a presentation. She is bringing it up to see how they feel about a presentation and if this is something to put some time into and present. She is fine if they do come here to present or table at the resource fair. If they have a presentation for the community, she hopes they would have an audience for such a presentation. Do they want to table this conversation to give people a chance to think about it or do they feel this information is not needed at this time?

**Ms. Janice Reid** asked if the request was to do this for the entire Board?

**Ms. Joseph** said at the time it was raised, it was raised to the Executive Board and they felt that Social Security was something they needed to bring in and do a presentation. The Social Services Committee can have them do the presentation at one of their meetings or something separate and have them as a resource later on down the line. If they decide to do this, it is going to take time to prepare and organize.

**Ms. Reid** said just as a history, when they do present these things, the members from the Board do not attend and it could be something tailored to the committee. They did come in before and they did have Social Security issues before, built into long-term care. She does not know if it is a pressing issue for persons right now, but it is something that anyone over 65 needs to know that information. They can do this in the Spring.

**Ms. Joseph** said with regards to the Resource Fair, they will have a subcommittee and start pooling in the other committees who are interested in participating in this resource fair, so they can start chiming in and bringing the resources they would like at the fair. If they are looking to do this fair in April or May, they will have to start planning now, and they will not be able to do that in this meeting. If there are people who are interested in being a part of that planning for the fair, let her know, and as she starts to reach out to the other committees and they start forming this theme or group to roll out and put together the fair, that is how they are going to do that.

At the last meeting, they spoke very heavily about health issues and disparities. Ms. Sharon Marshall, from the Dept. of Health will discuss some of the data that the dept. of Health has been pulling in and disseminating that information to them, so they can understand and get some insight into what is happening in their community.

**Ms. Sharon Marshall** said she is the Director of Community Engagement & Partnerships for the Bureau of Brooklyn Neighborhood Health and her colleague Ms. Zuma Novoa, a Community Health Specialist, part of the NYC Dept. of Health & Mental Hygiene is with her. They are assisting Commissioner Dr. Hazar McNatt, who oversees most of the work they do in Central Brooklyn. Dr. McNatt would like the opportunity to introduce herself to CB 17 and share some high-level information about their direction out of the Brooklyn office.

The Bureau of Brooklyn Neighborhood Health is a part of the Center for Health Inequity and Community Wellness, where Dr. Michelle Morris is the Deputy Commissioner. The Bureau of Brooklyn Neighborhood Health strives to reduce health inequities in North and Central Brooklyn and residents have been impacted by discrimination and long-term disinvestment. They use evidence-based interventions, community experiences and data to inform more equitable programs and strategies to improve health and well-being. They use a collective action approach and focus on the primary drivers of premature mortality. Some of the ways they use strategies to foster improved health outcomes include data and storytelling to highlight injustices, influencing policy change, implementing place-based programs, and bringing investments into the area. Investments are by way of grants and things like that to help expand their footprint. Most of the work done by the Health Dept. is through City tax levied dollars, but grants also help them to do more innovative type of work without using City dollars.

Resources for health data, and they are presenting here because they know that each year, they develop their district needs statement, and so to help them develop and inform district needs statement, they are more than happy to share the data that they have or even point them in the direction of some of the data and she will forward the hyperlinks to Ms. Joseph that will help them. Some of the things they will find on the data page are Mental Health in New York City, the Changing Birth Composition in New York City, Urban Heat Island Effect in New York City and the Community Health Profiles. She likes how the Community Health Profiles are organized because they also help them as far as understanding the structural determinates of health.

In their FY 23 statement, these are some of the things they said the neighborhood needs. Create or promote programs that destigmatize mental health needs and encourage treatment, other programs to address public health issues request, funding for mammogram testing, create or promote programs on education and awareness on preventing chronic diseases including smoking cessation, nutrition, physical activity and animal and pest control request including reducing rat and mosquito populations. This was in the last needs statement and someone at the District Service Cabinet meeting, who served as a Representative for the Health Dept. and address some of the things that fall under the bucket of the Dept. of Health and what progress they are making. One thing they are always talking about is pest control.

**Ms. Zuma Novoa** said they have been through a lot especially with COVID-19. The Community Health Profile takes at least 2 years to put together and the last one was done in 2018 and they are trying to compromise some with 2019, especially with COVID-19. The data is always 2 years behind and they expect this data will be a little behind because of COVID-19, that made a big impact. A lot has changed from this and once they go back into the community to gather this information, they are going to see **(INAUDIBLE)** better or worse, and they just want to be positive, and what they want to do is get a true capture in the community and the needs themselves. Their focus is to focus on those needs of preventing chronic diseases, smoking, nutrition, physical activities and hypertension and they want to capture where all that is now. The leading cause of death is COVID-19 and it took an impact across the World and they want to get back to where they were, and they want to capture true numbers and what the community has gone through.

**Ms. Marshall** said with Hispanics and Blacks, the leading cause of death is heart disease, cancer, diabetes and other cardiovascular diseases. They separate Puerto Ricans in the data when it comes to Hispanic **(INAUDIBLE)** and there are a lot of reasons they do that because when they pull it all together, it loses the uniqueness of the Puerto Rican experience and the theory is that the Puerto Rican population, who has had the most exposure to American culture. Unfortunately, some of the health outcomes are worse and less protected factors.

**Ms. Novoa** said with prenatal health, another point factor about pregnancy outcomes in the community, and again this data is from 2018, and hopefully, they can see how these numbers can be either positive or negative, as they have seen in the community. In the Brownsville office, they do have wonderful programs for Moms that can really participate in many ways, especially with the Doulas. They have newborn care classes for the Moms in the community, which she thinks is so important and they hope to see some positive outcome when it comes to the pregnancies in many aspects.

**Ms. Marshall** said teen pregnancies have gone down significantly in the communities, but East Flatbush still has in comparison to the other parts of Brooklyn, is still in the top 3rd of teenage pregnancies.

**Ms. Novoa** said with infant mortality, East Flatbush has been impacted by the severe infant mortality.

**Ms. Marshall** said infant mortality is being gauged by which they determine the health of a nation or community. If they have a high infant mortality rate, that means there may be other things within the system that goes beyond health and healthcare access that impacts that. Infant mortality are infants that died before they reach the age of one. Within the borough of Brooklyn, East Flatbush is in the top 3rd of communities with infant morality rates that are high. The 3-year average of infant morality was highest in Queens Village, followed by East Tremont in the South Bronx, East New York, Brownsville and Williamsbridge, but East Flatbush is there.

Severe maternal morbidity is the illness and poor health outcome related to pregnancy and birth and unfortunately, this was prior to COVID-19 and East Flatbush had one the highest severe maternal morbidity rates in the City, not just in the borough. There are a lot of efforts within the Dept. of Health to address that and they work with Dr. Michelle Morris, the Chief Medical Officer of the Health Dept. and the Chair of Birth Equity Initiative that involves insurance and hospitals and they do partner with Kings County Hospital and Downstate as well to address this crisis within the East Flatbush community. They are still working on the data from COVID-19, and this may have made things worse and they know during that time, even with giving birth, they would go to the hospital and could not have any support. The Doulas started doing some virtual support. One of the factors that impacts maternal morbidity and mortalities and mental health crisis can also be a component, because they don’t just measure these things based on the actual childbirth experience, but the continuing of the pregnancy to postpartum as well.

**Ms. Novoa** said with the impact of the climate during the Summer season, and they are now in the Fall and entering the Winter, this is something of value they need to keep in mind, basically, what are the neighborhoods that are very vulnerable to heat and East Flatbush happens to be one of them. As they see in the Heat Vulnerability Index, on the map, it is a 5 at the highest risk. They are going into the Fall weather, but before they know it, they will be back to Spring, and many in these low income neighborhoods may not have access to ACs or the other luxuries the other communities may have or even cooling centers, where they would have to travel further and it still puts them at risk with any other underlining conditions they may have, would be accelerated due to the heat.

COVID-19 was a very big heavy impact and they just came from a very hot Summer this year and as they move forward, they don’t know, but hopefully, when they start changing with the climates, they will be able to get more information of what they need to do. If they are in these communities where the heat is so high, the death rate is incredible. The goal is to bring a better understanding of how heat stress works, how to bring other resources to the community, and how they as a community and the Dept. of Health can help in many ways, even having lower access to ACs for communities, building better green spaces, neighborhood cooling centers and resources that are within the community and the residents don’t need to go beyond the community to get those resources.

**Ms. Marshall** said trees were planted on her block and she explained to her neighbor that East Flatbush is a Heat Island and these are some of the strategies they use to cool down the neighborhood and help to protect the health and wellbeing of the residents and having more trees in the neighborhood helps with cleaner air which reduces asthma, because they do have high asthma rates in East Flatbush. Having extra foliage in the neighborhood is very important to reducing heat and they can make request to have additional trees.

**Ms. Tesa Wilson** said regarding mortality, heart disease and cancer, she asked if there were any specificity of which kinds of cancers?

**Ms. Marshall** said typically, it is lung disease, breast cancer and they do a lot of work around that, but as the statistics show, they get diagnosed about the same or less than white women, but are more likely to die, that is as much as access to treatment that is culturally humble and accessible as well. This is where the intersection of disparities and equities fit in, because if they are diagnosed less, but die more, it is more than just unhealthy lifestyles.

**Ms. Muline Mickle** asked if they have any data to show if the people in the community are taking the COVID-19 and the Flu vaccines that are available?

**Ms. Marshall** said she did look at the recent data for East Flatbush, and 80% of East Flatbush has had at least one dose of the COVID-19 vaccines, however, only 33% have had the booster. Perhaps, some further education on the value of the booster. Knowing that they had an aging population within East Flatbush, it is recommended that individuals 50 years and above should consider taking the booster now that they have the bi-valiant. There is a campaign to encourage vaccinations. Their team is slow, but mighty, and they have been mobilizing around Crown Heights, by Weeksville, who had real access issues and they are doing some campaigning around increasing booster rates, but they are trying to figure out how to promote the existing locations where they can get boosters. She has checked with some of the local Pharmacies within East Flatbush, and they do have the bi-valiant booster. She thinks that the promotion is not the way because it is not as intentional and intensive as it was with the initial vaccine.

**Ms. Novoa** said they have recently seen a surge in the RSV, the virus that is affecting a lot of children. They are seeing a combination because of COVID-19, and now they are entering the flu season and now they have this RSV, which is a raspatory virus, that is spread among children and is very high. They are seeing that it is not out of control because the City acted really quickly to this and they are not yet overwhelmed with this. This virus is also spread among seniors where their immune system is compromised.

**Ms. Marshall** said they are ramping up the distribution of test kits again as the cold weather happens.

**Ms. Sabine Jacques** asked as they are collecting future data, will they take into consideration if there is a correlation with the increase in smoke shops within the communities? She has seen an increase in smoke shops in certain communities, so how would that be taken into consideration.

**Ms. Marshall** said the initial Community Health Profiles had low smoking rates in East Flatbush than the rest of the borough. This data was pulled before all these laws being passed related to the Marijuana industry. There are a lot of smoke shops in the neighborhood. She can ask if they are going to be studying the impact of the proliferation of smoke shops in the neighborhood.

**Ms. Novoa** said with the vapors, that is another issue they will find **(INAUDIBLE)** and they have been true strong advocates against because that started affecting more of the younger people and this is another issue, they will address within the Dept. of Health in trying to get the young people away from that because prior to 2019, they saw a big increase and there was a big advocacy group and also with the Dept. of Health that got behind to try to reduce that because it was targeting most of the young people within their community.

**Ms. Marshall** said she did not see a report on cold, but they do know that if they don’t have access to things that will cool them, they might also be living in buildings where heating may be a challenge as well. She can ask if there are any recent reports around how the cold impacts them. If they look at the relationship between not having access to those resources for cooling, it is likely they are not going to be living in places where the temperatures are regulated properly, whether it is due to the landlords or old buildings.

**Ms. Joseph** thanked Ms. Marshall and Ms. Novoa for the information, and it is a lot to digest. She will send out the links and the Community Health Profiles to the members.

**Ms. Wilson** said there is an upcoming community event that will be held in Community Board1. This community event will benefit North Brooklyn as well as Central Brooklyn. The United Federation of Teachers, along with the American Federation of Teachers are putting together a book giveaway and resource fair, where they will be giving away 40,000 books, on Saturday, November 5, 2022, at PS 257, located in the Williamsburg/Bushwick area of Brooklyn. They are asking people to come out and help build libraries and foster literacy in children. Families will be able to receive up to 50 books per family. They are also seeking volunteers to help them on Friday, Nov. 4th, the day before, because this is a massive undertaking to unpack and prepare for distribution of 40,000 books. The books are free for students in grades K-12.

**Ms. Joseph** said she will send out the information and flyer to the members.

She asked if there were any new or unfinished business, or questions they would like to raise?

She did want to raise changing the meeting time from 7:30pm and make it a little earlier, if that would work better for people. Since they don’t have a quorum, she is putting it on the floor as a discussion piece, however, they can’t vote to change the time for this meeting. The next meeting will be in November at 7:30pm, but that was a question asked by people who attended the last meeting.

**Ms. Monica McKain-Brown** asked what is the timeframe they are looking at when they say earlier?

**Ms. Joseph** said they are looking at 6pm, 6:30pm or 7pm, but if it has to stay at 7:30pm, then it will stay at 7:30pm, if that is what works for the members.

She asked for a motion to adjourn the meeting?

**Ms. Donna Rose** made a motion to adjourn the meeting.

**Ms. Mickle** seconded the motion.