



## General Government & Social Services Committee

March 9, 2021

### Summary and Motions

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Committee chair, Council Member Susan Lamb, called the meeting to order at 1:00 p.m. Committee members Vice Mayor Steve Kay and Council Members Richard Moloney, James Brown, Hannah LeGris, Liz Sheehan, Fred Brown, Whitney Baxter, Jennifer Reynolds, and Kathy Plomin. Council Members Chuck Ellinger, Josh McCurn, and Amanda Bledsoe attended as non-voting members.

Note: Two items from this meeting, (II.) CivicLex Public Comment Proposal and (IV.) ESR Program Subcommittee – Report Out, were reported to the council on Tuesday, March 9, 2021, at Work Session.

Lamb read the following statement: “Due to the COVID-19 pandemic and State of Emergency, this meeting is being held via live video teleconference pursuant to 2020 Senate Bill 150, and in accordance with KRS 61.826, because it is not feasible to offer a primary physical location for the meeting.”

#### **I. Approval of February 9, 2021 Committee Summary**

Motion by J. Brown to approve the February 9, 2021, General Government & Social Services Committee summary; seconded by Baxter. The motion passed without dissent. (Plomin was absent for this vote.)

#### **II. CivicLex Public Comment Proposal**

Richard Young, Director of CivicLex, reviewed their proposal to work with the administration and council to examine the city’s public comment processes (after COVID-19 restrictions are lifted). The goal is to make recommendations to improve access and hopefully lead to less contentious public comments.

Motion by J. Brown to approve the resolution and MOU for the public comment proposal, seconded by Reynolds. The motion passed without dissent.

Motion by Plomin to report this action out today at Work Session, seconded by Reynolds. The motion passed without dissent.

#### **III. NAMI, Fayette Mental Health Court Annual Update**

Randy Stafford, NAMI’s Addiction and Co-existing Conditions Coordinator, began the presentation, first talking about his personal experience with mental health disorders in his family, his struggles with addiction, and how he eventually became a social worker. He stressed the importance of treatment, particularly for individuals with dual diagnoses. The national average to successfully treat someone with a dual diagnosis is 10 percent; FMHC is between 60 and 80 percent. Stafford talked about participants helping each other, which can eventually create a “recovery movement.” He explained the proven success FMHC has had by integrating its treatment for mental health and addiction. Jennifer Van Ort Hazzard, NAMI’s FMHC Coordinator, also shared her personal experience of turning her challenges into success. She talked about the stigmas associated with someone recovering from mental health issues and compared a life of wellness to climbing a rock wall with belays.

FMHC provides wrap-around services, connecting participants to providers to become contributing members of the community. Participants graduate with a “wellness recovery action plan” and they have

high percentages of improvement in housing, the criminal justice interface, and employment. Van Ort Hazzard explained the return on investment since 2018 by diverting folks from the detention center and law enforcement. People in detention who suffer from serious mental illness require on average 60 percent additional resources than those without a mental illness. She concluded the overall return on investment is 1,426 percent. Fayette District Judge John Tackett talked about what happens to criminal defendants when there isn't an option for a mental health treatment court by telling the story of a woman who continually ran into law enforcement, served time in jail, and lost guardianship to multiple children. He questioned what she and her children's life would be like if she was sober and compliant with her medication. There are societal costs and monetary costs in the situations he described; FMHC has a high rate of success and many of those costs are mitigated.

Moloney and Kelly Gunning, NAMI's Director of Advocacy and Public Affairs, discussed a meeting in Frankfort about FMHC and the effort to get New Vista, University of Kentucky, NAMI, and the state on the same page. Moloney said he is glad to get something set up again. He also mentioned his desire to get Eastern State Hospital opened up more.

J. Brown confirmed the court hasn't had access to coronavirus relief funds. Judge Tackett explained the challenges the courts face because of pandemic restrictions, particularly with folks who are suffering from homelessness. Phill Gunning, NAMI's Executive Director, said they received CDBG funds for the expansion of the FMHC and adding an aftercare program. They are seeing an increased need for services. Kentucky's Department of Behavioral Health has contacted NAMI to create a blueprint of the FMHC so it could be replicated and to bring this model to other communities. New Vista will also have more flexibility to serve people because they are looking at the whole treatment for individuals, which could provide more flexibility for Participation Station (a program NAMI supports).

Plomin and Connie Milligan, an expert in criminal justice and mental health, talked about similar programs in the country and how FMHC is the only mental health court that is run by a consumer organization, which Milligan described as the reason why the court is so successful. Plomin asked if there was an overriding theme why people aren't stepping into the program. Van Ort Hazzard said the court prides itself on not being a "get out of jail free card," explaining some people are more interested in mitigating sentences instead of the journey to wellness. Folks are always welcomed back if they didn't choose the program in the past. Plomin stated the program's impact on the community is bigger than 38 graduates. Lamb talked about sharing successful programs such as FMHC with other communities. No action was taken on this item.

#### **IV. ESR Program Subcommittee – Report Out**

Hilary Angelucci, Research Analyst, reviewed the purpose of the Extended Social Resource Program Subcommittee while recalling two previous committee presentations that prepared the subcommittee for its work. She explained how recommendation #1 realigns all shelter funding under the Office of Homelessness, Prevention, and Intervention, which would encompass the 25 percent ESR Overnight Emergency Shelter designation and all other shelter funding such as for the Hope Center. The subcommittee recommends maintaining one ESR Program with two distinct components, Community Based Initiatives Program and Overnight Emergency Shelter Program. The draft resolution establishes a 1 percent funding goal for the ESR Program and of the funds budgeted each year it directs 60 percent to the Community Based Initiatives Program and 40 percent to the Overnight Emergency Shelter Program.

Angelucci reviewed the results of a survey issued to nonprofit agencies, which allowed agencies to identify needs in the community for the ESR program. Recommendation #2 encourages specific needs to be emphasized under the existing ESR priority areas, including youth violence prevention and intervention, mental health, and student learning loss. Recommendations #3, #4, and #5 address the program's process, including an opportunity to showcase how proposals support the Mayor's Commission on Racial Justice and Equality; to use a two-year funding cycle for the program but use a one-year cycle for FY2022; and to engage with agencies in the grant process and fund more of the request. Other considerations the subcommittee suggested were for one-time funds for educational support to make up for learning loss due to COVID-19 and to refer workforce readiness to the chief development officer as a need that was reported by agencies through the survey.

J. Brown explained the proposed resolution, versus an ordinance, is intended to provide the administration guidance. He clarified that the areas of emphasis, under recommendation #2, are in addition to other topics already identified in each priority area. He said the intent of the realignment of the Overnight Emergency Shelter Program to OHPI is to continue to fund these agencies at the level as done in the past.

Bledsoe spoke about improving the way the city stewards its resources to maximize its value in the community. She likes 1 percent as a goal but compared it to about half that amount that is dedicated to economic development; she wants to maintain flexibility because the community's needs can change. She asked if 40 percent of funds dedicated to the Overnight Emergency Shelter Program will be enough, which J. Brown pointed out there are other funding sources for homelessness services. They discussed how often the priority areas would be reviewed and about engaging agencies into the process to help gauge or shift priorities. Chris Ford, Commissioner of Social Services, said they will work closely with the administration, council, and community agencies to adjust as needed, particularly because we are still in the pandemic environment. Lamb and Bledsoe discussed how an ordinance is more of a mandate and Bledsoe described resolutions more as a "sentiment of the time."

Moloney has concerns about this commitment in the future when federal assistance is not available and the city slips back into a situation when expenses are higher than revenues. He doesn't want to send a message that this is required. He and J. Brown discussed recommendation #6, for educational support, as something the council could consider, after ESR proposals are received, to determine what additional allocation is needed. Moloney hopes Fayette County Public Schools and the school board will factor into this recommendation, which manages a much bigger budget than LFUCG.

Motion by J. Brown to approve this resolution along with the other recommendations to the full council; seconded by Plomin. The motion passed without dissent.

Motion by J. Brown to report this action out today at Work Session; seconded by Baxter. The motion passed without dissent.

#### **IV. LGBTQ Youth Mental Health Ordinance**

Craig Cammack, Community Outreach Liaison, first explained the purpose of the draft ordinance is to protect the LGBTQ community's youth. Conversion therapy is counseling or treatment that seeks to change a person's sexual orientation or gender identity. Therapy that isn't conversion therapy can assist people undergoing gender transition or offer support and acceptance of a person's sexual orientation to help them stay safe. Twenty states and 70 local governments have passed laws protecting youth from

conversion therapy, including Covington and Louisville, Kentucky. The U.S. Supreme Court has upheld a conversion therapy law case and affirmed the law's constitutionality. There are 57 known conversion therapy providers in Kentucky, seven of which are located in Fayette County. Two bills tied to conversion therapy bans were introduced in the Kentucky legislature this year. He referenced several scientific studies that prove the negative impact of conversion therapy and showed statistics outlining at least 144,000 LGBT individuals 13 and older live in Kentucky, many of which are minors. There are a variety of risks associated with conversion therapy. Based on several studies, Cammack explained conversion therapy's lack of evidence of efficacy and that participants of conversion therapy are more likely to get depressed, use illegal drugs, and attempt suicide. He reviewed the support for laws banning this therapy both nationally and locally, including 20 letters of support for the local draft ordinance that were included in the packet.

Evan Thompson, an LFUCG Attorney, said the draft ordinance includes justification for banning conversion therapy, including science and national organizations that oppose this type of therapy, which is harmful to youth. He pointed out the authority to implement such ordinance is outlined in LFUCG's Charter, Article 3, Section 3.02 - 22. The draft ordinance prevents state-licensed providers from engaging in conversion therapy with minors as well as public funds going to known providers of conversion therapy. The Lexington-Fayette Urban County Human Rights Commission (HRC) will enforce the ordinance. Thompson also pointed out the inclusion of the complaint process and the right to appeal.

Reynolds asked about this ordinance focusing on minors and established that it doesn't include adults on the basis that adults can make their own decision; the ordinance bans this for youth because it has shown to be harmful.

LeGris said constituents have contacted her office expressing support for banning conversion therapy. She and Ray Sexton, Executive Director of HRC, discussed the enforcement of violations outlined in Section 4 of the draft ordinance. HRC would operate as a neutral party to file a complaint against the entity that's engaging in the practice of conversion therapy and then conduct an investigation. If the violation is valid, HRC would use an attorney on their staff and go through a public hearing with an independent hearing examiner, similar to a court proceeding. Specific fines are not laid out; it is up to the hearing examiner to determine any compensatory damages based on what was proved in the hearing.

F. Brown doesn't feel that he knows enough about conversion therapy to make a good decision yet but he supports protecting minors from being coursed in counseling that would be adverse to them. Cammack explained the difference between sexual orientation, which is who you are sexually attracted to, and gender identity, which is the gender you see yourself as (female, male, or non-binary); both can be a focus in conversion therapy. F. Brown and Thompson discussed the various fields in which people can have a state license to practice therapy, counseling, etc. F. Brown confirmed that this ordinance wouldn't apply to a pastor or religious counselor if they didn't have a state license.

Bledsoe and Cammack discussed examples of therapy that would not be considered conversion therapy. She talked about youth experiencing a "questioning phase". Cammack said, for example, talk therapy could be used to help a person understand their feelings and affirm those feelings are okay. It should not say the person's feelings are wrong and that they need to be attracted to the opposite sex. Bledsoe agreed it would be unhealthy for anyone to be coursed. She mentioned how it is common for pastors to also have a counseling degree or license and confirmed this ordinance would apply to all folks with a license, even if they work in a church. She said pastors may be conflicted to help a person wishing to go

through the discernment process, adding that some people want this kind of help. Cammack explained the ordinance only applies to minors and how pastors can talk about sexual orientation and gender identity to help guide individuals without it being conversion therapy. If the intent is to sway or changes a person's behavior, it would be illegal.

F. Brown talked about the parent's role in this. Particularly, if parents don't understand the minor's sexual orientation and gender identity and turn to, Christianity for example, which he said can be a form of conversion therapy. Cammack said the intent of the ordinance is driven by scientific research that conversion therapy harms children and it would not be up to parents to let their child participate in conversion therapy. F. Brown questioned the constitutionality of the ordinance, expressing concern about government intervention into parental control. He asked how this gets reported, for example, if it involves a five-year-old, which Sexton said HRC can file a complaint without an aggrieved party. F. Brown said he can't understand the ordinance when it comes to parents or pastors and who has legal responsibility.

LeGris reemphasized her constituents' expressed support for the ordinance and the two local governments in Kentucky, which have passed similar ordinances for the protection of minors, plus all the letters of support shared with the council. Thompson said the draft ordinance closely follows Louisville's ordinance. Lamb is supportive of the ordinance and said the city's charter clearly states it is our duty to protect the mental health and wellbeing of our youth in our community. She stated the ordinance is designed to protect some of the most vulnerable members of our youth, adding that the science is undeniable and conversion therapy does more harm than good.

Motion by Sheehan to approve the LGBTQ youth mental health protection ordinance; seconded by Kay. The motion passed with a 9 – 1 vote (F. Brown voted no).

Discussion on the motion included the following. Kay questioned the committee's readiness to move this item forward. He is supportive but said it's a difficult issue; the underlying intent is to recognize that conversion therapy for the question of sexual orientation and gender identity is harmful. He spoke about the community's belief that this therapy is inappropriate, how people will have differing views, which they are entitled to, and not enforcing or imposing those views on minors. F. Brown feels the information presented was one-sided; he would like time to talk to parents about this and give the community time to respond. Moloney said he doesn't want to delay the ordinance, which is banning something harmful to kids. It was established that this item would be reported out on April 13<sup>th</sup>. The motion passed with a 9 – 1 vote.

## **V. Items Referred to Committee**

No action was taken on this item.

Motion by Kay to adjourn (at 3:01 p.m.); seconded by Plomin. The motion passed without dissent. (Moloney and F. Brown were absent for this vote.)

Meeting materials: <https://lexington.legistar.com/MeetingDetail.aspx?ID=845889&GUID=B84A2BF4-D0D1-4542-923F-05D9EFAA0D44&Options=info|&Search>

Recording of the meeting: [http://lfucg.granicus.com/MediaPlayer.php?view\\_id=4&clip\\_id=5309](http://lfucg.granicus.com/MediaPlayer.php?view_id=4&clip_id=5309)

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