

# Annual Report 2020



**START**

TREATMENT & RECOVERY CENTERS

*The right way to treat people®*

## I Can See Clearly Now

I can see clearly now my life has more meaning.

No more feeling hopelessness, it is a new beginning.

Now I can walk with my head held high, at times  
I feel like a bird that can fly. I can start healing  
now the pain is gone,

Finally, I am in a place where I belong.

I am in recovery "YES", I am free.

Now I can experience again the best part of me,

Every day I write poetry.

—P.K.C.

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## Message from The Chief Executive Officer & The Chair, Board of Trustees:

### A Sober Look at the State of Substance Use and Mental Health Disorder Treatment in Communities of Color in the Context of the COVID-19 Pandemic

Whether from the Centers for Disease Control and Prevention (CDC) or the Substance Abuse and Mental Health Services Administration (SAMHSA), common findings among most reports are that communities of color or persons with a mental health or substance use disorder experienced a disproportionately higher COVID-19 infection rate, hospitalization rate, morbidity, and mortality. While extremely important, these reports have focused almost entirely on containing the virus with public health interventions, such as social distancing and encouraging the wearing of masks and face coverings.

This critically important focus does not include an examination of decades of social dislocations and racial discriminatory systems that had placed the persons we serve from the same diseases and co-occurring medical conditions (such as hypertension and diabetes), and mental health disorders that contributed to disproportionate COVID-19 morbidity and mortality. This is largely due to a failure to focus and embrace the approach of examining the social determinants of health.

The COVID-19 pandemic also revealed longstanding limitations in the healthcare delivery systems, including limitations in public health, primary care, and mental health infrastructure. Workforce limitations that had been especially significant among behavioral health providers pre-COVID-19 were made more severe as services continued

during the pandemic despite inadequacies in the supply of personal protective equipment. This led to COVID-19 related illnesses and/or quarantine of these under-appreciated essential workers. This only worsened the staffing of behavioral health providers. Because of the regulatory relief provided by NYS, many providers were able to shift their operations using telehealth services. However, the transition was not smooth due to: inadequate internet services in many areas; limited minutes of telephone providers used by some patients; and/or the capacity of some patients to use the technology.

The implementation of these technologies did not adequately address the social isolation experienced by many persons served. From the standpoint of behavioral health providers, this meant dedication of resources to the purchase of laptops for clinicians to work remotely and the purchase of personal protective equipment. These expenses had not been anticipated or budgeted. This is especially significant, given that reimbursement was reduced to limit in-person interaction among clinicians, and between clinicians and the persons they serve.

**Given these challenges, we are proud of the effort by our staff to provide care to the persons we serve that is consistent with our Mission and our 51 year legacy of excellence. Details of this effort will be presented in this Annual Report.**

**Lawrence S. Brown, Jr., MD, MPH, FACP, DFASAM**  
*Chief Executive Officer*



**Felicia Ivey, PhD, LMHC, SAP, CAMS-II**  
*Chairperson*



# Our Leadership

## START Board Members List

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**Lisa Smoots**

**David Zerlip**

## Executive Leadership

**Lawrence S. Brown, Jr., MD, MPH, FACP, DFASAM**

*Chief Executive Officer*

**Bevan Baker, FACHE**

*Chief Operating Officer*

**Irving De La Cruz, CPA CGMA CIA**

*Chief Financial Officer*

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*Chief Administrative Officer*

**Daanish Shaikh, MD, ABPM, ABFM, AAMRO, FASAM**

*Chief Medical Officer*

**Benjamin Lipschitz, Esq.**

*General Counsel*

# About Us

In the background of the civil rights struggles and the Vietnam War, a dedicated group of attorneys, physicians, public-policy makers, academicians, and community activists formed a Board of Trustees and co-founded the Addiction Research and Treatment Corporation (ARTC) in 1969, with Dr. Beny Primm serving as its founding Executive Director. The purpose of ARTC was to provide treatment to underserved minority injection drug users living in poor inner city neighborhoods within New York City.

In response to the rigid Rockefeller drug laws and the rapid growth of the HIV/AIDS pandemic, the agency expanded to seven medication-assisted treatment programs, plus three chemical dependency (drug free) programs, and added on-site primary medical care including HIV counseling, testing, and treatment. In 2008, the agency began a campaign to address the adverse consequences of chronic hepatitis C virus infection, especially common among injection drug users. Concurrently, ARTC engaged in the conduct of behavioral and

biomedical research related to substance use disorders, HIV/AIDS, and hepatitis C virus infection. In order to better protect the rights of persons served, ARTC formed its own in-house Institutional Review Board.

In 2012, in order to widen the scope of services within our communities, the agency acquired contracts for two programs providing behavioral health services to adolescents at detention centers in The Bronx and Brooklyn, and non-secure facilities throughout New York City. Two other programs providing behavioral health services to adolescents were subsequently added.

A new strategic plan was released in 2012, and Joyce Y. Hall was named Chairperson of the Board of Trustees, while Dr. Lawrence S. Brown, Jr. was named Chief Executive Officer. In 2017, Shaun E. Smith assumed the role of Chairperson of the Board of Trustees. Most importantly, CARF recognized the agency as being among the top three percent of programs providing substance use services nationwide. In keeping with the 2012 strategic plan, the agency's rebranding included a name change from ARTC to START Treatment & Recovery Centers (START). In 2020, Felicia Ivey became Chairperson of START's Board of Trustees.

Over the past 51 years, START has grown into one of New York State's largest non-hospital providers of health and human services, working with patients with a variety of substance use and behavioral health issues through both clinical and non-clinical programs for adult and adolescent populations. The first clinic at 937 Fulton Street, Brooklyn is still in operation, making START the largest and oldest minority-run substance use treatment program in the country.

**“The loss of a loved one to addiction left me feeling profoundly disempowered. START offered a greater sense of purpose, providing an outlet to channel my experiences, combined with my professional background in healthcare, and my passion for health equity. As a board member, it has been a privilege to help drive START’s mission to deliver compassionate, comprehensive, and lifesaving care.”**

**—MEGHAN MARX  
MEMBER, START BOARD OF TRUSTEES**

In 2020, in the midst of the COVID-19 pandemic, START was deemed an essential business in New York State, as per Governor Cuomo’s Executive Order. As a consequence, we were able to continue our work, despite the pandemic. Pivoting to adhere to New York State social distancing recommendations and guidelines, START provided equipment for all staff to ensure their safety and to maximize efficiency in serving our patients. This consisted of personal protective equipment for in-person services, and technology that allowed services to be delivered remotely. These measures ensured that START’s programs continued to focus on providing comprehensive patient assessments, behavioral and medication management, cognitive and solution focused therapies, education, grief counseling, depression treatment, and loss management.



# OUR MISSION

The mission of START Treatment & Recovery Centers is to provide the highest quality of compassionate, comprehensive, evidence-based healthcare and social services; education of the public concerning maintenance of healthy lifestyles; and cutting-edge behavioral, biomedical and healthcare services research.

# OUR VISION

To transform the perception of addiction and behavioral health disorders by bringing dignity and respect to the lives, families and communities we serve.

# OUR CORE VALUES

- Team and People Orientation
- Accountability and Outcome (Data Driven) Orientation
- An Entrepreneurial Spirit: Know Our Agency/Our Industry
- Engagement and Focus
- Risk Reduction and Innovation
- Self-Awareness

# Locations

## Administrative Office

22 Chapel Street  
Brooklyn, NY 11201  
Tel: 718.260.2900  
Web: startny.org



STARTNY



START\_NYC



START.NY



in

## Manhattan Adult Programs

### Highbridge

2406 Amsterdam Avenue  
New York, NY 10033  
Tel: 212.543.2782

### Kaleidoscope

119 West 124<sup>th</sup> Street  
New York, NY 10027  
Tel: 212.932.2810

### REACH

119 West 124<sup>th</sup> Street  
New York, NY 10027  
Tel: 212.932.2676

### Starting Point

119 West 124<sup>th</sup> Street  
New York, NY 10027  
Tel: 212.932.2676

### Third Horizon

2191 Third Avenue  
New York, NY 10035  
Tel: 212.348.5650

## Brooklyn Adult Programs

### Bushwick

1149-55 Myrtle Avenue  
Brooklyn, NY 11206  
Tel: 718.574.1400

### East New York

494 Dumont Avenue  
Brooklyn, NY 11207  
Tel: 718.385.4000

### Fort Greene

937 Fulton Street  
Brooklyn, NY 11238  
Tel: 718.789.1212

## Adolescent Mental Health Programs

### Teen START

119 West 124<sup>th</sup> Street  
New York, NY 10027  
Tel: 212.222.2069

### Central Intake

Call now to schedule  
an appointment:  
Tel: 800.211.0996

# Adult Patient Care

## Medication-Assisted Treatment Programs

START has taken pride in providing substance use (primarily heroin) services in New York City for over 50 years. Despite having successes and challenges over the years, START has always remained true to our mission, vision, and core values. We have decreased barriers to access to care and worked hard to decrease the stigma associated with substance use and mental health treatment. In 2020 we started a centralized admission process, where patients can complete a brief screening and be linked to a site convenient for them to receive their care.

There are seven medication-assisted treatment programs (MATPs) at START (3 sites in Brooklyn and 4 sites in Manhattan) that provide life saving FDA approved medications to treat opioid use disorder. Over the years, we have followed the guidelines of our regulatory bodies and strived to provide evidence-based care. Every patient who comes to START is orientated to her/his home clinic; receives an individual assessment by the Behavioral Health and Medical team; gets screening services; and gets set-up with a multidisciplinary team who from the first visit focuses on individual patient needs. Every attempt is made to reduce the administrative and clinical barriers to help patients receive the life saving treatment, consistent with regulations. If you know anyone that needs help, please have them call our Centralized Admission office at 1-800-211-0996.

In 2020, the COVID-19 pandemic caused a once in a century type of challenge to navigate. START put the safety of our patients and staff first by implementing practices, such as mandating wearing personal protective equipment (PPE; i.e., masks), adhering to social distancing, and promptly conveying updated guidelines by OASAS (Office of Addiction Services and Supports), CDC (Centers for Disease Control and Prevention), and NYSDOH (NYS Dept of Health). We at START are and will continue to be committed to the safety of the patients we serve and provider staff.

An indication of the effectiveness of our efforts was demonstrated by the fact that none of our MATPs needed to be closed due to COVID-19. In addition, our utilization rate and retention in care greater than 365 days was the highest in the past 3 years, as shown in the data tables.

MATP Utilization Rate 2020	MATP Utilization Rate 2019	MATP Utilization Rate 2018
94%	93%	91%

MATP Retention >365 days 2020	MATP Retention >365 days 2019	MATP Retention >365 days 2018
71%	41%	50%

In the area of Vocational Services, the ability to provide training and employment opportunities was severely hampered by COVID-19. Since the impediments to providing services were external to START, we were unable to meet our Vocational/Educational targets.

## MATP Highlights of 2020:

### **Treatment of patients with Hepatitis C at**

**START:** As a sequel to the PCORI study in which we provided Hepatitis C treatment to our patients via Telemedicine, we partnered with NYSDOH to train all of our providers at START to give our patients the option to be referred, see a specialist via Telemedicine or be treated by a START provider in their very own clinic.

### **We increased take home medication:**

At START, every attempt was made to provide the maximum take home in a safe and effective manner. Every take home given or rescinded was done via case conferences in collaboration with the provider and Behavioral Health team, with the individual patient's recovery in mind.

### **We participated in a new home medication delivery system:**

When we realized our patients needed life saving medication, but due to COVID-19, they were not able to get to the clinics, we reached out to a local pharmacy that had the credentials to deliver methadone. We contracted with them to get our patients the medication they needed. We asked for and received approval from OASAS to implement the OASAS Methadone Delivery Program.

**We provided PPE:** We mandated the use of masks at all of our sites, and if any individual did not have a mask, they were given one at the entrance.

### **We hosted the NYS Psychiatric Institute - Columbia Addiction Psychiatry Fellowship Program:**

We trained and collaborated with fellows to provide a hands-on education experience in addiction medicine, and medication for opioid use disorder.

**We updated our treatment plans:** Every patient's individual treatment plan was centered on patient goals, with the counselors' recommendations approved and signed off by all providers.

## REACH

### **(Recovery, Education, Advocacy & Change for Health)**

At our 124th Street MATP in Manhattan, we also have an onsite outpatient "drug-free" program that caters to patients with dual diagnosis of substance use and mental health disorders. Our services include psychiatric evaluation, medication management, groups, relapse prevention, family therapy, anger and stress management, and referral. We have a psychiatrist onsite who can prescribe medications, if needed, to help our patients with their mental health condition(s), in coordination with our Behavioral Health staff.

In 2020, we managed to keep these services open to patients, despite the challenges of the COVID-19 pandemic by moving all patient services to Telehealth. However, we could not overcome staffing and referral problems, and as a result, there was significant difficulty in maintaining census. In the face of historic levels of depression, anxiety, substance use, and suicidal thoughts due to social isolation, REACH remained available to the community.

# Adolescent Mental Health

During 2020, START provided services to adolescents at three distinct programs: Adolescent Detention Centers, the 100 Schools Project, and Teen START. Detailed information about all three of these programs follows.

## Teen START

Teen START is the agency's Article 31 outpatient mental health clinic certified by the New York State Office of Mental Health (OMH), specifically to address the mental health of adolescents, their families, parents, guardians and loved-ones.

Teen START completed its third year of operation in September 2020. We can report that the entire clinical team remained in place for the second straight year, inclusive of the Clinical Director, Board-Certified Bilingual Spanish Adolescent Psychiatrist, Senior Therapist, and two part-time licensed clinicians, each of whom have special expertise with adolescents and their families. As part of the clinic's adherence to OMH regulations and quality expectations, Teen START continued the use of evidence-based screening tools to identify adolescents who have mood disorders and substance misuse. Additional quality improvements included the continued practice of clinical supervision, the tracking of show rates, and compliance reviews of treatment plans.

Teen START Program by the Numbers		
Select Services Provided	Year	
	2020	2019
Individual Psychotherapy	2,269	1,448
Family Therapy	180	71
Medication Management	206	57
No Shows	722 (20.6%)	1200 (39.9%)

The most significant development of 2020 was the need for rapid implementation of Telemental Health in response to the COVID-19 pandemic. As has been the case throughout the agency's long history, START met the challenge. In March 2020, the clinical staff abruptly went home and continued to work from there for the entire year, under the New York State Governor's Executive Order that allowed for the delivery of mental health services remotely, in order to keep everyone safe, and in order to save lives.

The show rate for services increased dramatically during all three full quarters of the pandemic, rising to 78% annually. Clearly, Telemental Health connected adolescents to their therapists in a way not previously seen. Revenue increased 25%, a vast improvement over 2019, and was a direct result of the transition to and acceptance of Telemental Health service delivery. However, program expenses and allocations were greater than revenue and a budgetary deficit remained.

Teen START utilized several technology platforms, including telephone, Zoom, and Microsoft TEAMS, while maintaining clinical documentation in the electronic health record. All staff were provided with a HIPAA compliant laptop and necessary software.

All clients were able to remain with their primary therapist for their entire course of treatment, with no transfers or lapses in services. This was due to the dedication of the Teen START clinicians, and the working environment that supported their desire and ability to remain in their roles.

## Adolescent Detention Centers

The adolescent mental health detention center program is the result of a contract between the New York City Administration for Children's Services (ACS) and START. It has been in existence for the past nine years. This program focuses on the provision of mental health services to adolescents in secure and non-secure detention facilities. In June 2020, due to COVID-19 pandemic-related funding and other constraints, START was informed that the contract with us would end as of September 2020. It was clarified that START was in good standing with the contractors and that whenever the opportunity presented itself, START would be able to reapply for a NYC contract. The START team worked effectively with ACS to complete the closeout process.

## 100 Schools Project

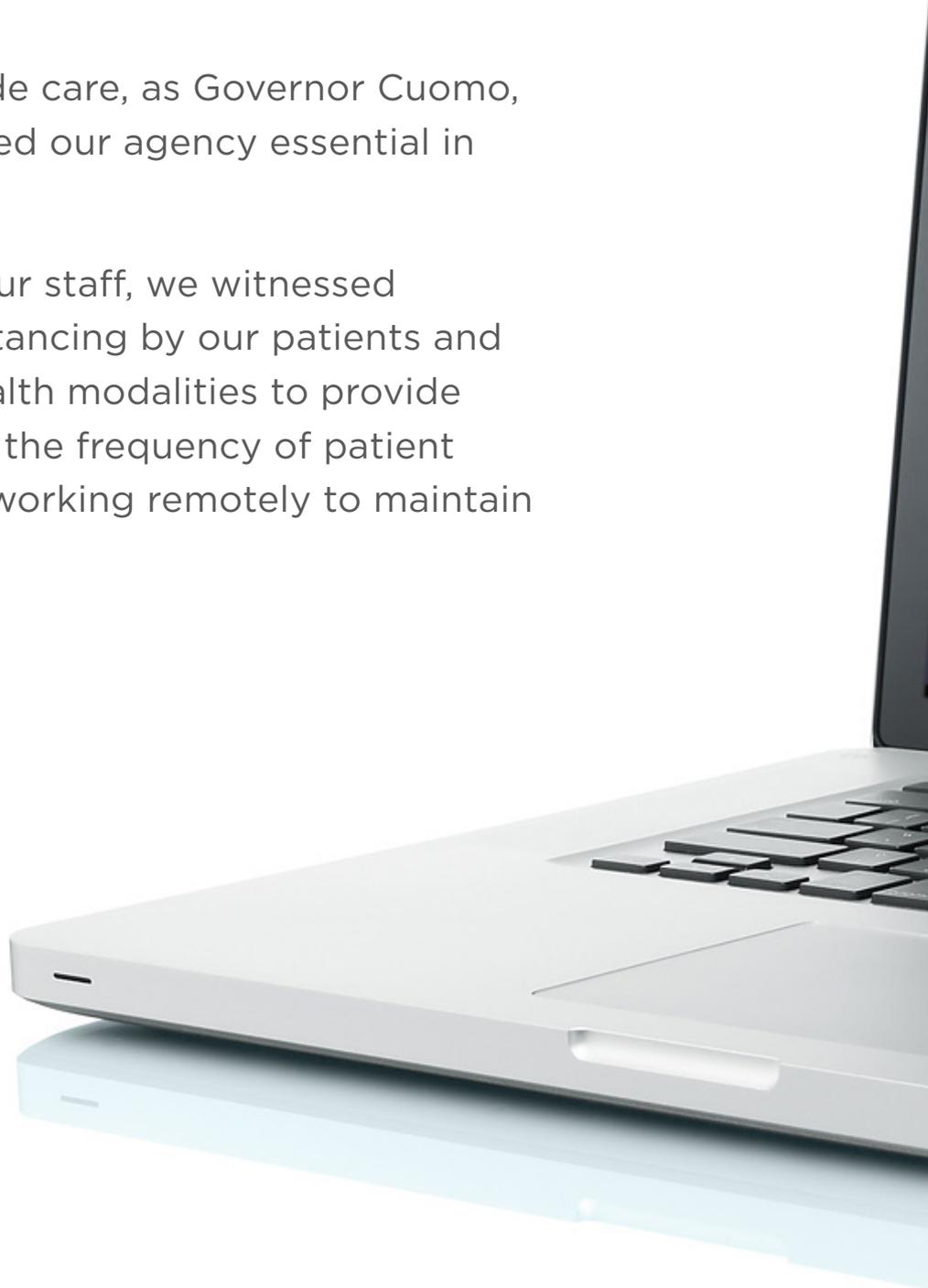
The 100 Schools Project, a collaboration between START and the Jewish Board of Family & Children's Services (JBFCS), is aimed at increasing mental health capacity across the school system to support and grow academic success. This program was severely disrupted by the COVID-19 pandemic, most significantly, due to discontinuation of funding of the Delivery System Reform Incentive Payment (DSRIP) Program by the Federal government. As a result, the contract was terminated as of June 2020, not only with START, but with all other agencies that were contracted with JBFCS on this project. Prior to discontinuation of the program, a toolkit was developed to offer actionable material to assist schools in supporting the mental health needs of their communities. It is fully searchable, and almost every attached item can be downloaded. Please find the toolkit here:

**<https://rebrand.ly/100Schools>**

# Let's Stay Socially Connected!

START continued to provide care, as Governor Cuomo, via Executive Order, deemed our agency essential in New York State.

Due to the dedication of our staff, we witnessed progress: due to social distancing by our patients and adolescents, use of telehealth modalities to provide care, responsibly reducing the frequency of patient visits and, when possible, working remotely to maintain continuity of care.





# Research

Since the early 1970s, research at START Treatment & Recovery Centers (START) has continued to evolve to study advancements in evidence-based approaches and new technologies to address the complex needs of the communities we serve. As START remains true to its mission to conduct cutting-edge behavioral, biomedical, and healthcare services delivery research, we maintain steadfastly committed to our core values to address today's opioid crisis at a time of unparalleled challenges due to the COVID-19 pandemic.

Throughout 2020, we continued our legacy of proposing research that addresses today's public health challenges. Surveys were developed to assess attitudes toward COVID-19 vaccination among START patients and staff. The goal of this study will be to examine factors that are associated with COVID-19 vaccination receptivity. We are particularly focused on assessing perceived importance of various factors that may impact vaccination decisions, such as vaccine safety and effectiveness, as well as recommendations from medical professionals.

Our Patient-Centered Outcomes Research Institute (PCORI) funded project entitled, *Stepped-Wedge Randomized Control Trial to Compare Integrated Co-Located, Telemedicine-based Treatment Approach for Hepatitis C Virus (HCV) Management for Individuals on Opiate Agonist Treatment and Usual Care Treatment of HCV individuals on Opiate Agonist Treatment*, has proved to be an impactful clinical study. Patients from three START clinical sites have been engaged in this study: Fort Greene, Bushwick, and East New York. This study compares the use of telemedicine to treat patients infected with HCV at our clinic sites vs. usual care (referral to an outside specialist). The study has been one of the most consequential research efforts that START has ever undertaken, in terms of research that has an immediate observable clinical benefit. It marries clinical medicine with technology in a way that facilitates treatment to cure patients of a disease that is very prevalent in the communities we serve and causes significant morbidity and mortality. The use of telemedicine for this study has provided an additional benefit in that it has become an indispensable modality for providing care during the COVID-19 pandemic.

Over the course of the PCORI study, presentations of preliminary study findings have occurred at various conferences. During 2020, the following poster was presented at the New York City Epidemiology Forum held at Columbia University: **Patient-Centered Hepatitis C Treatment via Telemedicine for Individuals on Opiate Substitution Therapy.**

As planned, all four waves of the study have been completed and ongoing follow-up of participants is underway. The following table summarizes the study status as of 12/31/2020:

Summary as of 12/31/2020				
Arm of Study	Discontinued	SVR*	Total	% SVR
Referral	50	31	78	40%
Telemedicine	12	66	78	85%
Combined	62	97	156	62%

Furthermore, the research team decided to conduct additional sub-studies to enhance the impact of the main study. The following sub-studies were approved during 2020:

- **Billing Sub-Study:** The goal of this sub-study is to evaluate the treatment of HCV among patients in medication-assisted treatment programs (MATPs) using telemedicine versus traditional referral for in-person care from an economic standpoint, based on billing data.
- **Social Determinants of Health (SDOH) Sub-Study:** The goal of this sub-study is to understand the association between SDOH and HCV treatment among patients in both arms (telemedicine versus traditional referral for in-person care).

During 2020, we also had the opportunity to collaborate with the New York City Department of Health and Mental Hygiene (NYC DOHMH) Viral Hepatitis Program and the SUNY Research Foundation on a project funded by the Centers for Disease Control and Prevention (CDC) entitled, *Improving Hepatitis B and C Care Cascades; Focus on Increased Testing and Diagnosis*. This project is designed to improve HCV testing and treatment rates in people at risk for HCV, particularly in high burden areas of NYC identified through surveillance data. This project made HCV treatment more accessible to patients receiving care at START, so that they could receive treatment conveniently onsite.

Summary as of 12/31/2020						
	Encountered/ Approached	Enrolled	Discharged/ Insurance Issue	Started HCV an- tiviral therapy	Undetectable	% Undetectable*
Phase 1	30	22	3	17	17	100%
Phase 2	30	15	1	5	5	100%
Combined	60	37	4	22	22**	100%

Publication of manuscripts in peer-reviewed journals has been a focus of START's research team for many years, as this is the most effective way of disseminating our research findings to the largest audience. During 2020, the following paper was published in April in *PLOS ONE*: **Toward precision prescribing for methadone: Determinants of methadone deposition**. It was from a study completed in 2018 entitled, *MeDiCALF (Methadone Disposition Changes Associated with Liver Fibrosis): A Study of Methadone Pharmacokinetics in Patients with and without Liver Fibrosis, Hepatitis C Virus (HCV) Infection and HCV/HIV Co-Infection*. This study looked at both the circulating levels of methadone and degree of liver fibrosis in patients with HIV/HCV co-infection throughout the course of substance use treatment.

The foregoing clearly demonstrates the commitment START has made and continues to make to research that benefits the persons served.

\*Of the total number of patients who completed HCV therapy, % of patients who had undetectable virus at their 8-week follow-up test. Note that as of 12/31/2020, two patients achieved sustained virologic response at 12 weeks, which is considered being cured of HCV.

# Resilience + Kindness = Hope

Since the outbreak of COVID-19, when you have the courage to listen to or read the news; it seems everything is full of negativity and hopelessness. Even the most optimistic people we know are having a difficult time remaining positive. Anxiety thrives on uncertainty, and these are certainly very uncertain times. The pandemic seems to have captured the attention of almost everyone.



There are, however, some individuals who appear able to bear the changes and painful impact with more resilience than others. What is different about those people? Is it their upbringing; something in their DNA; their support systems?

Surprisingly, it's something that each one of us can develop with the right mindset and guidance. It's a set of behaviors, beliefs, and activities that anyone is capable of learning. The best part is that it doesn't cost money or mean that you must completely change your life to accomplish it!

Resilience and hopefulness are not qualities you either have or don't have; they can develop over time. Think about what you're proud of, and what you do well. Develop your relationships with like-minded, resilient people, who will give you encouragement, listen to your ideas and concerns without judgment, and help you to find that glimmer of hope within you. Be proud of your self-reliance and what you've had to do to get through many challenges.

Replace that anxious, nagging negative voice in your head with one that says, "You've got this!" Strengthen yourself in ways that are best for YOU. Fortify yourself with knowledge and support that can help you believe you really can handle whatever is coming. We will all have to face failure, fear, and adversity during our lives. But we can also choose to call upon our resilience and inner strength, protect ourselves and restore ourselves.

Practicing random acts of kindness can also build your resilience. When your kindness is rewarded with a smile, joy and gratitude, you will feel the surge of your own empowerment. Engage in little acts of kindness.

## Dr. Brown's Acts of Kindness

- Like our friends in Italy, open your windows and play beautiful music for others to appreciate
- Bring coffee to the custodians in your building and thank them for helping to keep things safe
- Tell someone they are a good parent
- Hold the door for someone, even if you're running late
- Write a positive comment on someone's LinkedIn post
- Email a note of appreciation to a friend or colleague
- Initiate a virtual board game, card game or movie night
- Let someone ahead of you in traffic (without complaining)
- Tell someone you love their hairstyle/necklace/sunglasses/jacket/outfit/shoes

Barack Obama said, "On every front there are clear answers out there that can make this country stronger, but we're going to have to break through the fear and the frustration people are feeling. Our job is to make sure that even as we make progress, that we are also giving people a sense of hope and vision for the future."

**Given our history of success, "We've got this!"**

# Staff Initiatives

START's Back-to-School supply drive and holiday toy drive are annual initiatives that are customary to the nonprofit organization. Looking very different than past years due to Covid-19 yet occurring despite the pandemic, our two annual events were effective while adhering to health and safety guidelines.

## Back to School Supply Drive



Prior to September 2020, External Affairs collected donations for the Back to School Supply Drive. Despite this year's socially distanced learning experience, over 300 children and grandchildren of START's patients received school bags filled with supplies and child-sized masks.

## Annual Holiday Toy Drive



This year, we raised over \$6,300 for the annual holiday toy drive from staff and members of the community! START's distribution of more than 325 gifts brought much needed holiday cheer to our patients' children and grandchildren. The gifts were distributed through START's Highbridge, Third Horizon, Kaleidoscope, REACH and Starting Point clinics in Manhattan, and at its Fort Greene, Bushwick and East New York clinics in Brooklyn.

# Engagement

START is committed to educating, addressing and ending the negative stigma surrounding addiction. Over the years, we have worked diligently to expand our community outreach and partnership efforts. As active participants in the communities we serve, we are not only becoming a source of awareness, but also a trusted advocate for our patients.

In order to build a stronger relationship, it is important we strive for ongoing visibility in our communities. They have to see more of who we are and what we are about. Due to Covid-19 pandemic which brought restrictions on gathering, START was unable to hold its much anticipated 50th Anniversary Gala. It was postponed and subsequently cancelled because of concern for the health and safety of prospective attendees.

## Virtual AIDS Walk: July 19, 2020



START participated in the 2020 virtual AIDS Walk as a community partner. After postponement, the event occurred on July 19, 2020. Team START participated in this virtual Walk, individually and socially distanced. START raised \$5,075 for this important cause. We would like to thank our Board of Trustees, Advisory Council, staff members, patients, and friends in the community for their support.



## Moment of Solidarity

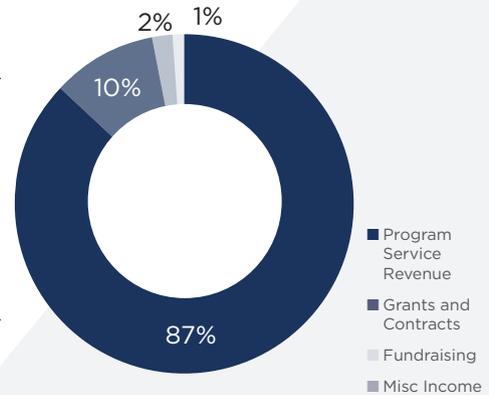
On June 11th, 2020 START staff members joined in a moment of solidarity in support of racial equality and policing reform within a clinic-wide, eight minute and 46 second observation of silence. This was followed by moving words from C-level staff and the collaborative singing of "Lift Every Voice and Sing." More than 60 staff members participated, while socially distanced and masked. (COVER IMAGE: MOMENT OF SOLIDARITY JUNE 2020)

# Financials 2020

Below is the audited summary of START's financial performance during the period January 1, 2020 to December 31, 2020:

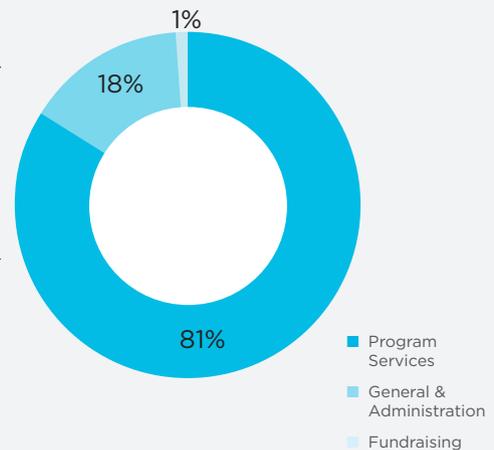
## Sources of Funds\*

Program Service Revenue	\$23,587	87%
Grants and Contracts	\$2,785	10%
Fundraising	\$126	1%
Misc Income	\$489	2%
<b>Total</b>	<b>\$26,987</b>	<b>100%</b>



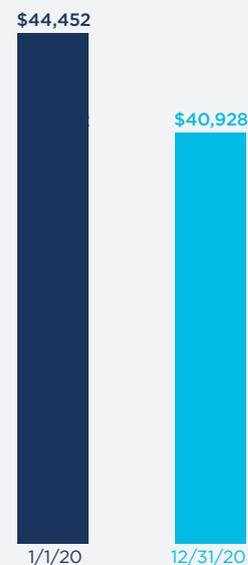
## Use of Funds\*

Program Services	\$24,824	81%
General & Administration	\$5,548	18%
Fundraising	\$139	1%
<b>Total</b>	<b>\$30,511</b>	<b>100%</b>



## Net Assets\*

Fund Balance, 1/1/2020	\$44,452
Fund Balance, 12/31/2020	\$40,928
<b>Decrease</b>	<b>\$3,524</b>



\* All amounts are in thousands

**START'S** commitment stands true even after dealing with the general impact of the COVID pandemic. Staying committed, focused, determined to my recovery was challenging in itself. One must keep his eyes on the prize and not lose sight that distractions can play a huge part in relapse.

Surround yourself with positive people and make sure the prize is worth the race.

Put your best foot forward with a steady pace.

—G.J.

# START Donors 2020

Thank you with sincere appreciation to the people that provide financial support to START.

Through the generous contributions of our supporters, START is able to continue to evolve and improve our programming to serve the most vulnerable New Yorkers. It is because of this support that we are able to strategically envision our next steps and the future of START. We remain grateful to each of our donors for enabling our work to continue and meeting the changing needs of the communities that we serve.

Donations can be made online at [www.startny.org/donate](http://www.startny.org/donate)

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# In Anticipation of 2021...

It is beyond a blessing to be able to utter the words, “Happy New Year” to all. Indeed, 2020 was a very heartbreaking, difficult, challenging, fear-filled year to say the least, but it must be remembered that in such grief, START must continue to strive forward and prolifically anticipate what is to come.

“You may not always have a comfortable life and you will not always be able to solve all of the world’s problems at once, but don’t ever underestimate the importance you can have because history has shown us that courage can be contagious, and hope can take on a life of its own.” – Michelle Obama

In the echo of our gracious former First Lady, Michelle Obama, we must remember to continue to hope. Hope for the greatness that is simply moments away. As our lives continue to be ravished by COVID-19, it is clear to see that our current hopes not only rely on the COVID-19 vaccines or upon the politicians in office, but also, more importantly they are dependent upon the efforts of all of us. Hope is dependent upon you and your chosen perception of life.

Ask yourself: How can my hope help?

For START, our daily stride is founded upon the hope of making a better tomorrow for everyone in our community. We continue to focus on healing, uplifting and providing sources of liberation for each patient we are so blessed to be able to care for, while aiding them towards a healthier tomorrow.

To be successful in our hopeful journey, it is important that we understand what it is that we are hoping for. As long as we step forward with an educated agenda, START will have a greater chance of a successful, hopeful journey. Stride on, be safe, and help others be safe as well. This is the only way START can make a brighter tomorrow.

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