

**Written Testimony of Disability Rights New York
Western New York Hearing of the Office of the Attorney General
Regarding Mental Health**

As the Protection and Advocacy System for New York State, with a designated office in Rochester, Disability Rights New York (hereafter, “DRNY”) is in a unique position to provide a current report regarding the state of services available to people with significant mental illness and children and youth with significant emotional impairment in Western New York. DRNY’s systemic legal advocacy is informed by reports made directly to DRNY by such individuals and their families. Based upon this information and our analysis of such, DRNY respectfully reports the following:

Issues Impacting Children and Youth:

- A current lack of mental health providers in Western New York, particularly providers who treat children and youth with significant mental health diagnoses and/or significant emotional impairment, has reached a crisis level. DRNY has spoken with many parents who have reported long wait lists to see mental health providers (which includes providers who accept private insurance, as well as Medicaid). For Medicaid-eligible children, there is a complete inability to access certain other services for which they are eligible to receive. As a result, these children and youth struggle to function at home and in school. The families of those battling depression and anxiety, and those with suicidal ideations and behaviors, are clearly in need of crisis response and follow-up services. However, they regularly find that such services are simply not available in their communities. This places increased daily pressure and stress on these families, who have nowhere to turn but to community hospitals, where they are evaluated in what are commonly referred to as comprehensive psychiatric emergency programs (hereafter, “CPEP”).
- CPEP are generally understaffed and over-extended. As a result, parents report that children and youth are regularly turned away and denied services. Often, their parents are told that their children are simply displaying “behavior issues.” Residential Treatment Facilities have also reported to DRNY that youth who they have brought to CPEP were turned away with the same explanation. This dynamic leads to such children and youth cycling in and out of CPEPs, experiencing



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compounded trauma and instability in the context of what is intended to be careful evaluation and treatment. It also places further strain on their families.

- Children and youth who do receive evaluation and treatment at CPEP, and are determined to be in need of inpatient pediatric mental health care, are often held in the CPEP for days. The simple reason: there are no inpatient pediatric psychiatric beds available. Thereafter, they are often placed in facilities far away from their home communities, sometimes outside New York State. Under such circumstances, they are deprived of regular visits from family and friends. This dynamic often results in their further dysregulation.
- DRNY also reports the critical need for increased mental health support for children and youth in Western New York school systems, as this is often the only place that they are able to access mental health services. In Monroe County, for example, only a handful of public schools have satellite-based mental health clinics. The COVID-19 pandemic has resulted in many young people either being diagnosed with mental health conditions for the first time or experiencing an increase in their mental health symptoms. Now more than ever, we need to equip our schools to help children and youth struggling with mental health issues. DRNY therefore strongly advocates for creation of more public school-based satellite mental health clinics in Western New York.

Impact on All People with Significant Mental Illness:

- Adults with significant mental illness in Western New York who enter CPEP either voluntarily or involuntarily are similarly unable to access community-based services to which they are legally entitled. They sometimes find themselves the subject of prolonged civil commitment proceedings that create life-long trauma and stigmatization. On other occasions, they are released back into the community without proper treatment or supports and face housing instability.
- Based upon reports to DRNY, the lack of accessible, supportive housing in Western New York regularly places people with significant mental illness at risk of harm and decompensation. There is a specific and urgent need for creation and sustainment of transitional housing for people with significant mental illness in the region. For those transitioning from congregate care settings, including psychiatric hospitals, adult homes, jails and prisons, the transition back into the community without supportive services and safe residential options undermines all efforts toward discharge planning and far too often results in decompensation. DRNY strongly urges all community leaders to engage people with lived



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experience, and the peers and advocates who have worked with them, in conversations about best practices and models for transitional housing.

- With reflection on the death of Daniel Prude in Rochester in March 2020, DRNY urges all communities in Western New York to replace armed and uniformed police officers as first responders on calls to assist those who appear to be mentally ill and in crisis. Our advocacy on this issue is based upon the reports of many people with significant mental illness and our analysis of the issue from a state and national perspective. Residential Treatment Facilities have reported to DRNY that police officers often place youth in handcuffs when transporting them to CPEP for what are still and commonly referred to by law enforcement as “mental hygiene arrests.” Such police interactions often create trauma and result in physical harm to those being removed. Successful response models engage mental health professionals and/or peers in initial response to such calls, often in the context of mobile crisis services, and provide enhanced, culturally competent training for police officers who may become involved thereafter. For further analysis of DRNY’s recommendations in this area, including a set of guiding principles for all communities discussing alternative response models, see:

RAASIC Report, March 2021 Public Report (DRNY and John Jay College of Criminal Justice)

<https://www.dropbox.com/s/im8q11y0zlny3/2021.03.26F%20RAASIC%20Report.pdf>

Disproportionate Impacts on BIPOC Communities in Western New York:

- Based upon our work in partnership and coalition with other advocacy organizations, reports made by those contacting DRNY, and observations shared by members of DRNY’s PAIMI Advisory Council, DRNY recognizes that all of the above-referenced deficiencies in service provision disproportionately impact those who live in Western New York’s BIPOC communities. This disparity in access to services results in persistent racial inequity that must be addressed by all systems charged with ethical and competent care of people with significant mental illness and children and youth with significant emotional impairment.

DRNY would like to thank you for this opportunity to address such important issues and welcomes requests from the Office of the Attorney General to discuss these issues further.



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