



Racial And Structural Equity

Introduction

Who we are – some background

- Over the past five years, the Mental Health & Substance Use CART has worked and volunteered countless hours to unite nonprofits, local government, educators, service providers, and community advocates to promote mental wellness, support recovery, and address barriers to care.
- **Key Issues:**
 - Limited Trusted Mental Health Services
 - Lack of Diverse, Culturally Competent Providers
 - Disconnected Services and Initiatives
 - Complex, Hard-to-Navigate Systems
 - County interpretation of state/federal regulations - “Sanctions”
 - Limited Support for Harm Reduction Programs
 - Limited Follow-up After Crises
 - Community Stigma Prevents Seeking Care
 - Lack of Trauma-Informed Training
- RASE seeks to dismantle systemic and structural racism and building a more just, equitable, and inclusive Rochester and Monroe County.

Progress

What got done – some examples

Disconnected Services and Initiatives: Maintain a community-wide inventory of mental health and substance use resources to identify needs and improve access (ref. R6)

- The Monroe County Mental Health Mobile App was launched to centralize access to mental health resources.
- Available in English and Spanish, the app covers OMH/OASES clinics, mobile crisis teams, hospital systems, veteran hotlines, the suicide hotline, and more.
- Since its launch in 2023, the Monroe Mental Health App has been downloaded 3,600+ times, with 40,000+ interactions.
- Areas with the highest activity: Basic Needs, Crisis Services, and Wellness Services.



Disconnected Services and Initiatives: Mental health emergency response services are fully integrated (ref. R1, R3, R5)

Monroe County Forensic Intervention Team (FIT)

- Est. in 2017 and expanded in 2021, FIT provides 24/7 crisis response and operates as a co-response model with law enforcement to support residents in mental health emergencies.

City of Rochester Person In Crisis (PIC) Team

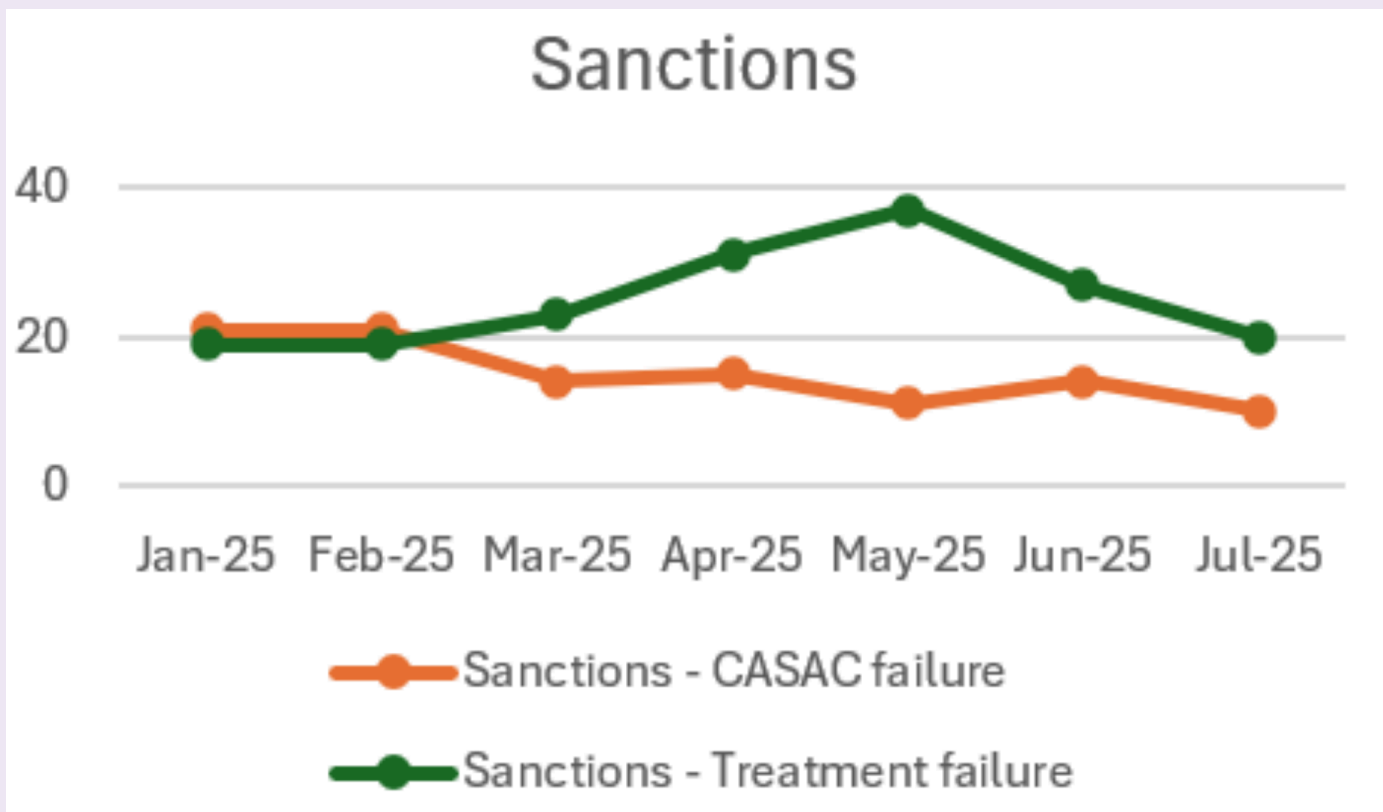
- Est. in 2021, PIC can respond 24/7 in lieu of the police in mental health and substance use crises.

In 2024, both teams collaborated to integrate counselors and restorative justice supports into 4 City of Rochester R-Centers.

- The City of Rochester formed the Office of Crisis Intervention Services to provide a comprehensive, community-based response to support victims and families dealing with homicides, mental health, domestic violence, and other related crises.

Sanctions: Remove or ease attendance and compliance barriers for individuals in recovery (ref. R8, R16)

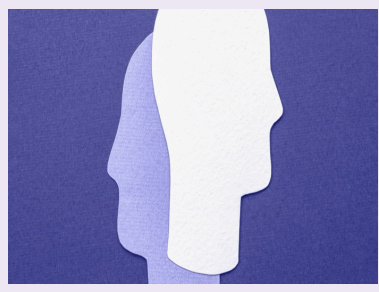
- The 85% attendance threshold for substance use recovery programs has been permanently removed.
- DHS has updated processes, such as auto-scheduling missed appointments, to reduce sanctions while maintaining compliance with mental health and substance use regulations.



Limited Trusted Mental Health Services: Develop Community Behavioral Health Advocates (CBHA) — local residents trained to help people navigate and access behavioral health services (ref. R1)

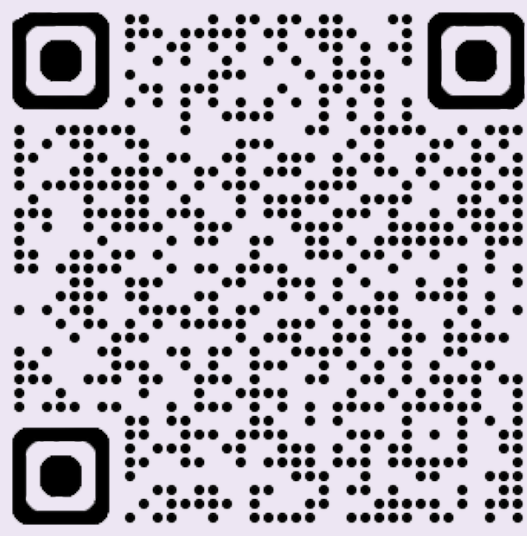
- MC OMH developed **BIPOC Peer Support Program** (Est. 2024)
 - Collaboration between EE Pathways, House of Mercy, and Recovery Housing.
 - Trains and certifies peers to provide substance use and recovery support.
 - 65 individuals have been enrolled since the beginning of the program.

Mental Health & Substance Use



Community Advancing Recommendation Team (CART)

CART Facilitator: Regina Bradley. **Current CART Members:** Dr. Tammy Butler, Roberta Davis, Jason Delooze, Latesha Fussell, Alia Henton-Williams, Sabrina Howland, Julio Jordan, Carla Leaks, Dr. Candice Lucas, Yasmin Mattox, Denise Read, Shannon Regelsberger, Manny Rivera, Carlos Santana, Van Smith, Tatiana L. Welch.



RocRASE.com

Challenges

What slowed us down – some examples

Authority Limitations

- Most mental health and addiction services are delivered by the region’s large private health systems and nonprofit agencies, not by the City of Rochester or by Monroe County, therefore outside the purview of RASE.

System Complexity

- There is no single, integrated MH/Addiction emergency response system. There are siloed programs run by the city, county, health systems, and nonprofit agencies. .

Future

What’s still to do – some examples

- Work with community partners to advocate for policies that keep care affordable and accessible for vulnerable communities.
- Collaborate with partners and state/federal leaders to continue to address planning and policies focused on cuts to services.
- Promote holistic health to recognize the connection between physical health and mental wellbeing and integrate services.
- Develop a coordinated and integrated community response to behavioral health that would use a proactive approach to mental health and addiction services.

5th Annual RASE Community Update October 6, 2025

Urban League of Rochester - Successor organization to the Commisison on RASE