

## Sweeney eyed for No. 2 slot

BY YANCEY ROY  
yancey.roy@newsday.com

ALBANY — Assemb. Robert Sweeney (D-Lindenhurst) is one of the leading candidates to become the second-most powerful member of the State Assembly.

Assembly Speaker Sheldon Silver (D-Manhattan) is considering Sweeney, along with Assemb. Joe Morelle (D-Rochester), for majority leader. The occupier of the post runs the Assembly floor for Silver, marshaling bills and votes on key issues and monitoring the pulse of rank-and-file Democrats.

“Assemblyman Sweeney is a well-respected member and is one of several members under consideration,” Silver spokesman Michael Whyland said yesterday.

Sweeney couldn't be reached for comment.

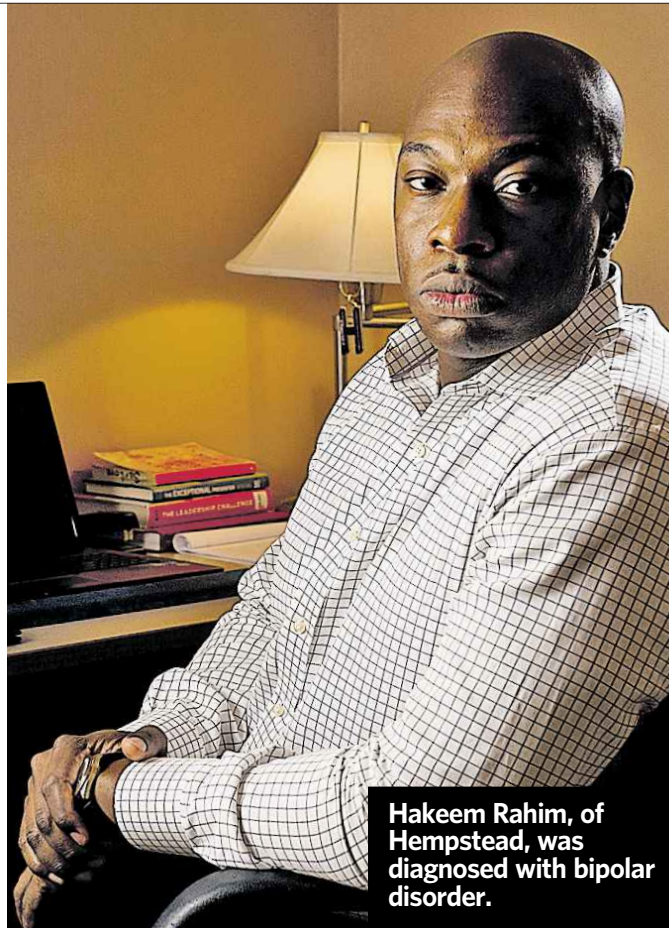
The spot is being vacated by Assemb. Ron Canestrari (D-Cohoes), who didn't run for re-election.

Silver would name a No. 2 after he is formally re-elected as speaker by Assembly Democrats, slated for Jan. 9, the day Gov. Andrew M. Cuomo delivers the State of the State address that kicks off the 2103 legislative session.

Typically, with a New York City lawmaker serving as speaker, the majority leader post goes to an upstate lawmaker to provide geographic balance — which would point to Morelle, who has been long considered the favorite among some Capitol insiders.

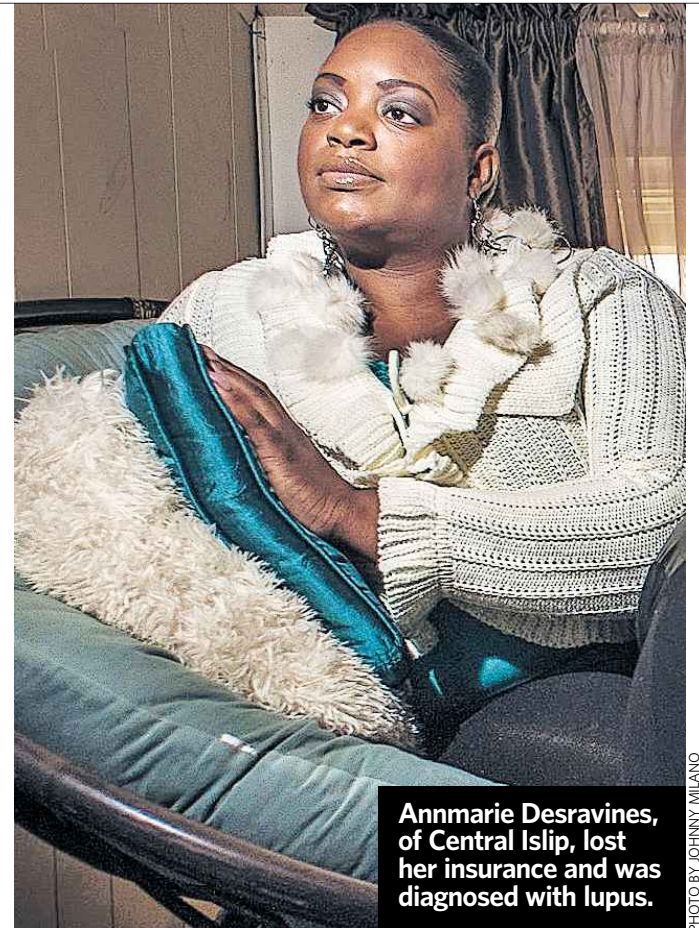
Sweeney, 63, first elected in 1988, is dean of the Suffolk County delegation and considered a loyal Silver ally. He is currently chairman of the Assembly environmental conservation committee.

The last Long Island legislator to serve as majority leader was John E. “Jack” Kingston of Nassau County, who held the post from 1969 to 1974 — when Republicans controlled the Assembly and Perry Duryea Jr. of Suffolk County was speaker.



Hakeem Rahim, of Hempstead, was diagnosed with bipolar disorder.

NEWSDAY PHOTO / J. CONRAD WILLIAMS JR.



Annmarie Desravines, of Central Islip, lost her insurance and was diagnosed with lupus.

PHOTO BY JOHNNY MILANO

# MENTAL HEALTH CARE:

## How factors can affect resources

BY LAUREN R. HARRISON  
lauren.harrison@newsday.com

**A**nnmarie Desravines didn't take phone calls from family, cried “at the drop of a dime,” and said she was barely getting up in time for the first of her two part-time jobs as a cook.

After she lost her health insurance and then was diagnosed with lupus, “I got to the point of where I would go to work, come home and get in my bed. I didn't want to eat. I didn't want to drink. I didn't want to do anything,” said Desravines, 41, of Central Islip. “I knew I was depressed.”

Three months passed before Desravines, an African-American woman, sought a therapist.

“I think it starts with pride,” she said of cultural barriers to

seeking mental health treatment. “We're so strong that we are afraid for people to see the weak side of us.”

African-Americans' access to mental health care can be affected by lack of financial resources, and their approach to such care is influenced by deep historical underpinnings, including stigma, suspicion of medical professionals and reliance on religion, experts say.

“Historically, we've been abused in the health care system and used for very unethical research, and often we feel that we don't get the same type of treatment,” said Dr. Alvin F. Poussaint, professor of psychiatry at Harvard Medical School and co-author of “Lay My Burden Down: Suicide and the Mental Health Crisis among African-Americans.”

The holiday season can exac-

erbate mental health conditions for some people, said Dr. Sidney Hankerson, a psychiatrist and research fellow at Columbia University.

“For people who are socially isolated, it [the holiday period] highlights the fact that they are alone. That can lead to depression.”

The Patient Characteristics Survey, conducted every two years and required for programs licensed or funded by the New York State Office of Mental Health, sheds light on local disparities.

According to the 2011 survey, about 16 percent of people enrolled in mental health treatment in Suffolk County were African-American, compared with 66.1 percent who were white. In Nassau, 23.2 percent of those enrolled in mental health treatment were African-

American, compared with 58.7 percent who were white.

### Recommendations made

The state Office of Mental Health, in its 2011 report on unmet needs, recommended addressing racial treatment gaps by clinician training in cultural competency, screening for mental disorders by primary care doctors, and community-based campaigns dispensing mental health information.

Local officials said that they've taken such steps and worked with churches, community groups and schools to better reach African-Americans.

“People avail themselves to mental health services when the service is convenient and where they feel comfortable,” said Dr. James R. Dolan Jr., director of the Nassau County Office of Mental Health, Chemi-