

Alternatives to Police Response for People in Mental Health Crisis - Ideas, Barriers, and Ways to Work to a Solution

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SAMHSA
Substance Abuse and Mental Health
Services Administration

Disclaimer

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Goals and Objectives

- Learn about one policing alternative being used and discussed in many parts of the country, the CAHOOTS program.
- Learn from real life experiences of two advocates about issues that need to be considered when discussing these alternatives in the public forum.
- Learn about barriers to finding a solution, and ways to work together to achieve a successful outcome.

CAHOOTS: CRISIS ASSISTANCE HELPING OUT ON THE STREETS

**Mobile Crisis Teams as First
Responders and an Alternative
to Police in Eugene, Oregon**



White Bird Clinic



Founded in 1969, White Bird is a collective environment organized to enable people to gain control of their social, emotional and physical well-being through direct service, education, and community.

- Federally Qualified Health Center
- Crisis Services
- Outpatient Behavioral Health and SUDS including MAT
- Homeless Services
- Benefits Assistance
- Medical and Dental Clinics

CAHOOTS Background

- Initial funding from Community Policing grant.
- Evolution of White Bird's "Bummer Squad" community-based crisis response which started in 1969.
- Staffing model developed in recognition of community health needs.
- First official CAHOOTS team began response on the 4th of July, 1989.
Originally only available 40 hours/week.

CAHOOTS SERVICES

Response is available 24/7 for crises related to:

- De-Escalation
- Serious Mental Illness
- Substance Use
- Poverty
- Homelessness
- First Aid and Non-Emergent Medical Care
- Resource Referral and Connection

All services are voluntary, confidential, and free of charge.

CAHOOTS STAFF

- CAHOOTS Response Teams are made up of a Crisis Worker and an EMT.
- New Staff go through up to 30 hours of instruction and 500 hours of field training.
- Staff are unarmed and rely on verbal de-escalation.
- Many members of the CAHOOTS team come from a place of lived experience.

COMMUNICATIONS/DISPATCH

- Requests for service are made via Non-Emergency Public Safety Dispatch.
- Calls are triaged for safety and urgency.
- CAHOOTS teams are dispatched over Police Radio.
- All calls placed to 911 or Non-Emergency are screened for CAHOOTS response.

IMPACT

- 2019 Calls For Service (CFS): Approximately 24,000 CAHOOTS responses in Eugene and Springfield, Oregon.
- In Eugene, CAHOOTS teams responded to approximately 18,000 CFS out of the 105,000 calls made to Eugene Public Safety.
- Nearly 15,000 of these responses occurred without other Public Safety resources.
- Over 13,000 would have required Police or Fire/EMS response if CAHOOTS were not available.
- Police Cover Requests: 311
- Arrest Diversion rate: 5-8%
- ER and Ambulance Diversion Savings: \$14.8 Million

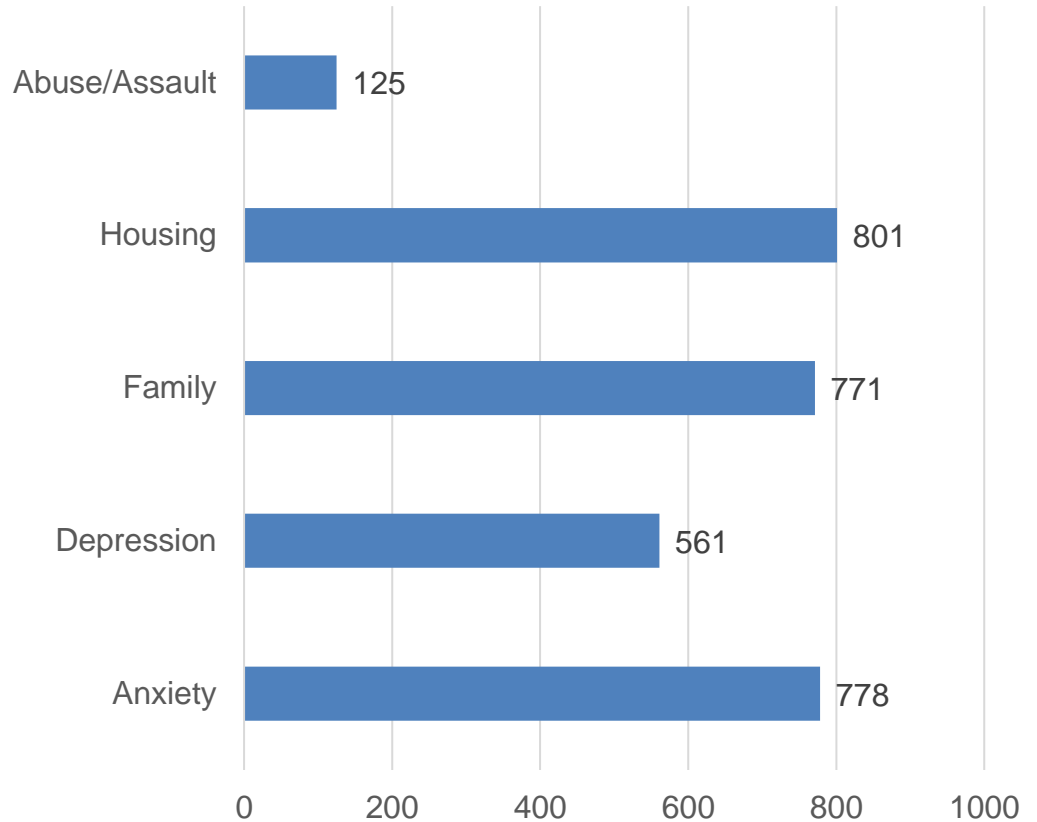
RESPONDING TO YOUTH IN CRISIS

- Classroom Presentations: Mental Wellness, Awareness, Communication
- School Clinics
- Tragedy Response
- Collaboration

RESPONDING TO YOUTH IN CRISIS

2019 Clients by Age Range:

- 11-15: 420
- 16-20: 902
- 21-25: 1127



PATROL CULTURE SHIFT

- Seeing beyond the symptoms.
- Modeling
- Briefings
- Training
- Multi-Systems Response
- Collaborative Approaches
- Advocacy

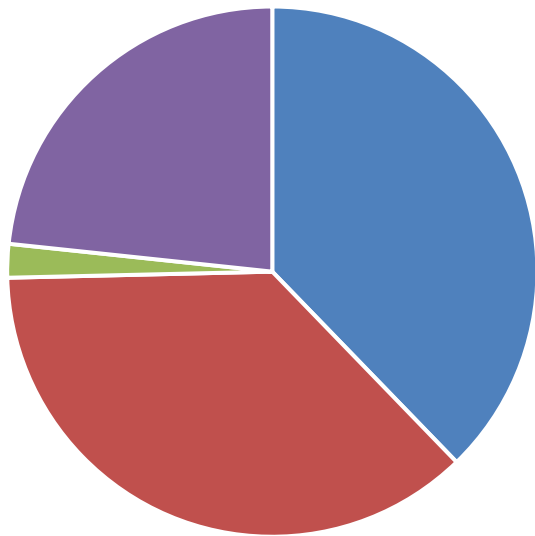
SAFE, COMPASSIONATE RESPONSE

- Empathy
- Mutual Trust
- Harm Reduction
- Unconditional Positive Regard
- Least Intervention Necessary

STAFF SAFETY AND DE-ESCALATION

- Appearance
- Situational Awareness
- Presence and Body Language
- Environment
- Least Intervention Necessary
- Mutual Trust
- Debrief
- Self-Care
- Employee Support
- COVID Precautions

Funding



■ City ■ County ■ Wraparound ■ Other Revenue and Donation

- Total Operational Revenue for FY 2019-2020: \$2.2 Million
- Cities of Eugene and Springfield: \$850,000
- Lane County: \$830,000
- Medicaid Wraparound: \$46,000
- Other Revenue and Donations: \$525,000

SUPPORT OF OTHER COMMUNITIES

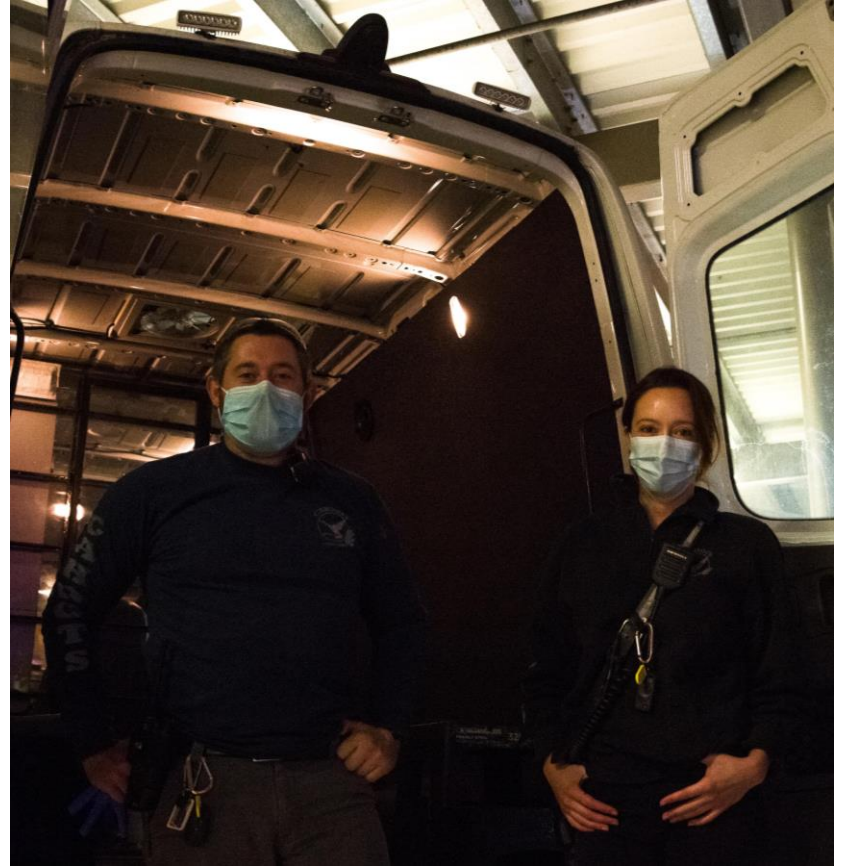
- Stakeholder Engagement
- Technical Support
- Program Design
- Training
- Legislation
- Advocacy

Thank you!

For more information, please
visit us at:

www.whitebirdclinic.org/contact

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Diverting to Mental Wellness

Cherene Caraco



RECLAIM YOU

PRN is a survivor led space for healing, wellness and exploration of identities beyond victim, “mentally ill,” “addict,”

Three-fold aims: Peer Support, System Change, Social Justice

Elevate the voices of people directly impacted to advance wellness, recovery and resilience through peer support

Ignite social justice based reform on policies and practices that create inequity and marginalization of people with labels of mental illness in the name of treatment and “justice”



PVNC is a statewide survivor led movement mobilizing to provide leadership for policy and system transformation based on their Expertise by Experience

Coalitions:

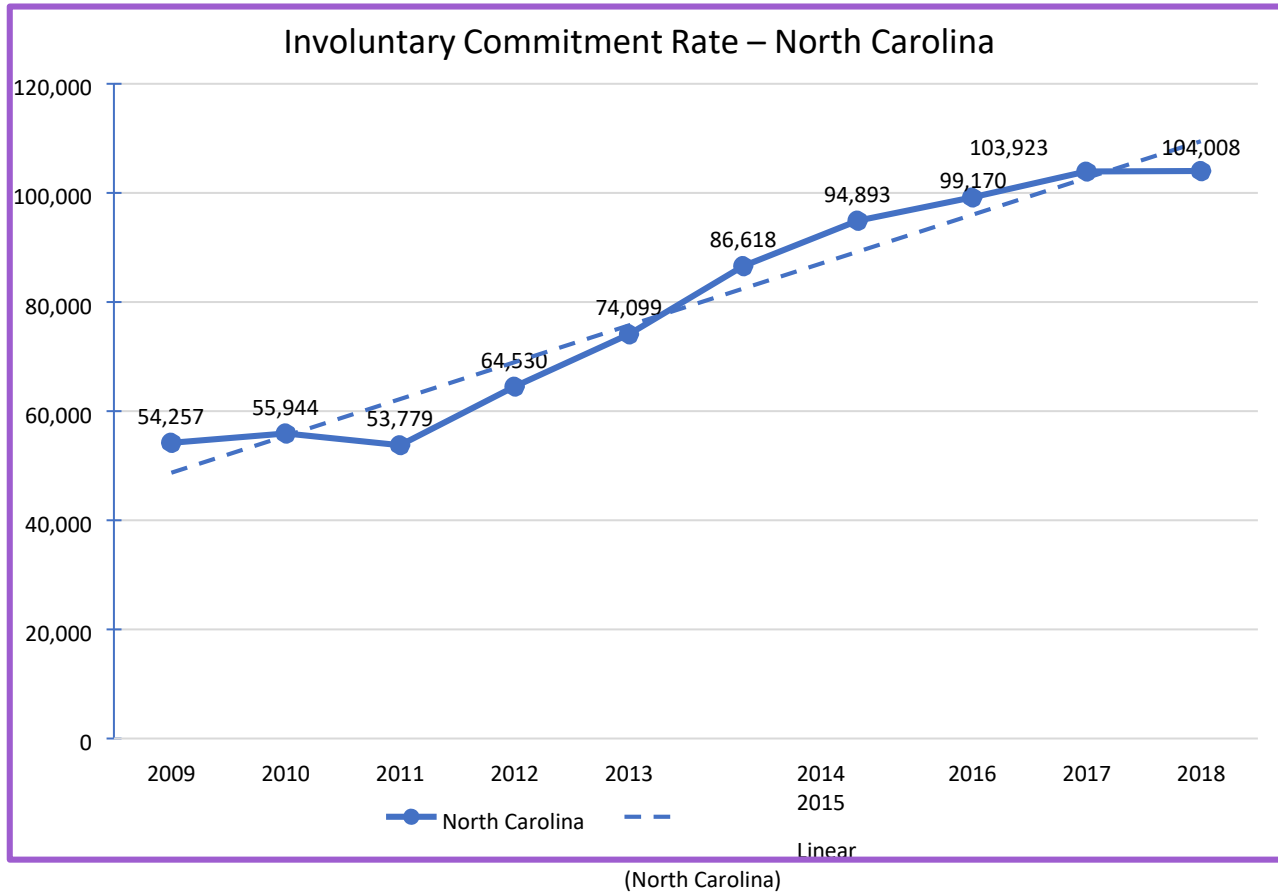
- Peer Justice Initiative (PJI)
- Peer Support Expert Commission
- Peer Run Wellness Centers
- Peer and Recovery Policy and Leadership Youth and Collegiate Recovery
- Community Inclusion: I’m IN!



A Perfect
Storm....
Conspiring
for
Change

At the interception of Racial
Justice, Disability and Public
Safety, is the clash of
systems and a demand for
change

Involuntary Commitment Rates in North Carolina



Impact of Involuntary Commitment Rates in North Carolina



MENTAL HEALTH RECOVERY

Trauma & The Use of Involuntary
Commitment in NC

INVOLUNTARY COMMITMENT RATES



109,951

incidences of involuntary
hospitalization of children and
adults in NC in 2018

this is a nearly 50% increase in 10 years

AN ESTIMATED COST OF



\$230,677,198.00

for 1 day at an average cost of **\$2,098/day* in
NC for psychiatric hospital stays

**4-10 day NC average length of stay
(*Henry K. Kaiser Family Foundation, 2017)*

HUMAN TOLL ON PEOPLE AND FAMILIES

*"I was told that the best way to get my
son help was to hospitalize him. They
handcuffed and shackled him and put him
into a sheriff's car... he was 5 years old!
I was devastated and so was he"*

TRAUMA-INFORMED ALTERNATIVES EXIST



**Concerned?
We. Are. Too.**

**JOIN YOUR VOICE TO OURS:
#FUNDHEALINGANDRECOVERY**

[FACEBOOK.COM/PVNCPRN/](https://www.facebook.com/PVNCPRN/) OR INFO@PEERVOICENC.COM

Increased Focus on Involuntary Commitment Rates in North Carolina



NC didn't track the data on mental health commitments, so some advocates did it instead.

By: Taylor Knopf, NC Health
News December 21, 2020



More NC psych patients are ending up handcuffed in a police car. Why?

By: Taylor Knopf, NC Health
News December 14, 2020

Concerns with Involuntary Commitment

- Traumatizing “treatment”
- Clinical concerns
- Overuse – defaulting to their use
- Lack of social continuum of support – addressing causes of crisis, and supporting prevention, effective treatment, and on-going wellness support
- Human rights/racial equity – Increase in mobile crisis
- Financial costs

Community Crisis Response Team design (CCRT)- 17

Recommendations

By community, for community. Diverse team of lived experience

- ✓ Co-Responder Models, CIT and Mobile Crisis
- ✓ “We don’t want clinicians in white vans and officers in black uniforms in our neighborhoods”
- ✓ Designed, led and staffed by diverse communities (ethnicity, racial expressions, gender, sexual orientation, mental health, homelessness, incarceration, gang involvement, etc) in partnership with county, PD, behavioral health agencies

Diversion from confinement, handcuffs, shackles, involuntary treatment

- ✓ Jail diversion= sky high involuntary psychiatric hospitalizations
- ✓ Confinement is HARMFUL. Change the narrative that jail confinement bad, hospital confinement good

•Types of Calls/Responses

- ✓ Calls- non violent, non criminal, mental health, substance use, homelessness, “welfare” checks, basic needs
- ✓ What’s in the Van? (Medical, basic needs, hygiene products, Naloxone, an automated external defibrillator, epipen, contraception, PPE, tents, tarps, info on needle exchange, COVID, transmittable disease, etc.)
- ✓ Dispatched through? 911, 211, independent

Recommendations Continued

Diversion to what?

- ✓ Peer-run alternatives (forensic peer support, peer-run respites, warm-lines, recovery communities, living rooms....)
- ✓ Recovery based services that are trauma and culturally designed that focus on healing, basic needs, value and investing in community

Legislative role

- ✓ Appropriations for municipalities for non-police teams as well as financial incentives for CIT and co-responder teams
- ✓ Gathering, tracking, reporting and examining jail and involuntary commitment data
- ✓ Funding for peer-run alternatives- open access safety nets

Cherene's Contact Information



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Los Angeles County Is Embarking on a radical transformation of its criminal justice system



Los Angeles County is embarking on a **radical transformation** of its criminal justice system

COUNTY OF LOS ANGELES **CEO** • ALTERNATIVES TO INCARCERATION
Care First, Jails Last

Honoring and Recognizing work in LA County



Acknowledgement of Local Native Peoples

Tongva/Kizh/Gabrieleño, Tataviam & Chumash

Snapshot of Los Angeles County

General Population Statistics

- 10,081,570 - Estimated 2019 Population
- 66,436 people experiencing homelessness in 2020
- 13.4 percent of population live in poverty
- 48% of the population are Latinx or Hispanic

Public Safety & Criminal Justice Facts

- 23 LA County Sheriff's Department Stations
- 21 LA Police Department Community Stations
- 45 Other Municipal Police Agencies
- 500 Youth held in LA County Locked Facilities in 2020
- 60,000 Adult Probationers Supervised Throughout LA County (2020)

Disproportionate number of justice system involved population comes from communities of color

- In LA County just 9% of people are black, but comprise 29% of people in jail.
- Latino people make up 49% of the population, but they are 52% of the county's incarcerated population.
- Black and Latinx Women are 54 % of the women in LA County, but 75 % of women in jail.
- Youth of color are also more likely than white youth to have their adolescent development derailed by criminalization and arrest.

Incarceration in Los Angeles County has been story of “racial inequity” that has impacted Latinx, Black, Native American, and other people of color.

Mental Health Service Difficulties In LA County

- According to a RAND study from 2019, on any given day about **30 percent** of the population at LA County's Twin Towers Correctional Facility is in the mental health housing, and **61 percent** of those individuals would be appropriate for community release.
- There was a critical mental health bed shortage pre the pandemic, even as more community based treatment would reduce numbers of people cycling through the justice system.
- The 30 day readmission rates at LA County hospitals outpaces the national average by 18 percent (38-20).



The Los Angeles County Sheriff's Twin Towers Correctional Facility.
Damian Dovarganes/AP



Mental health housing unit at Twin Towers Correctional Facility-Los Angeles Times

Mental Health Service Difficulties In LA County

- The Department of Justice has issued a consent decree over the Los Angeles Jail system because the treatment living conditions of the mental health population have been deemed “unconstitutional”.
- Suicide is leading cause of death in jails across the country.
- People with mental health conditions are three times as likely to experience abuse while incarcerated.



An inmate sleeps in a room on the fourth floor of the medical unit of the Twin Towers jail facility. This area houses inmates with the highest level of need -- both psychiatric and medical. (Robert Gauthier / Los Angeles Times)



Mental health housing unit at Twin Towers Correctional Facility-Los Angeles Times

LA County Alternatives to Incarceration (ATI) Units

Areas of Responsibility

- 1.- Alternatives to Incarceration** – Address work group recommendations on adult justice system transformation.
- 2.- Youth Justice Reimagined** – Address work group recommendations on juvenile justice system transformation.
- 3.- Alternative Crisis Response** – Nationwide coordination effort planning for 988 implementation of non law enforcement response to crisis calls.
- 4.- Measure J** – Budget process and funding allocation for justice system transformation and community investments.

Measure J

- An amendment to the LA County Charter approved by the voters on November 3, 2020.
- Intended to address the disproportionate impact of racial injustice through community investment and alternatives to incarceration.
- Requires a minimum of at least 10 percent of the County's locally generated revenues in the general fund be allocated to community investment and alternatives to incarceration.
- No portion of Measure J set aside funds can be used for any carceral or law enforcement agencies, not including legally required County commitments performed by these agencies.
- Three year phase-in period beginning July 1, 2021 with full 10 percent set aside by June 30, 2024.

Measure J – Transparent Allocation Process

- Measure J requires the Board of Supervisors to establish an inclusive and transparent process on the allocation of funds.
- The Board created a Measure J Reimagine LA Advisory Committee comprised of:
 - Board appointees
 - Representatives from mental health, health and human services, and public safety departments
 - Labor leaders
 - Community representatives with lived experience
- The Advisory Committee will be responsible for ensuring that the Measure J budget recommendations are informed by community need and racial equity and that the budget process is an inclusive, transparent and data driven process with ample opportunities for community participation.

More On the Reimagine LA Advisory Committee

- The Advisory Committee is purely advisory. It does not have the authority to implement any proposed recommendations or direct the activity of County employees.
- The preparation of the spending plan recommended to the Board is the responsibility CEO.
- The approval of the spending plan is the sole responsibility of the Board.

Two Areas of Measure J Investment

- 1.- Alternatives to Incarceration
 - Implements “Care First, Jail Last”
- 2.- Direct Community Investment
 - Jobs, Housing and Wellness

Already In Process – ATI Shovel Ready Projects

- Communication Campaign
- Expansion of text reminder program for upcoming court date notifications
- Securing documents for employment program
- Preparing Los Angeles for County Employment (PLACE) program
- Community health worker/care coordinator apprenticeship program
- LA EMT apprenticeship program
- Forestry Fire Camp Program
- My Brothers' Keeper Resiliency Program
- Department of Children and Families Prevention and Aftercare Network Integration

Youth Justice Reimagined

Phase 1 planning in progress – focused on prevention and diversion into youth development programs.

- 1) Rollout pre-arrest youth diversion countywide.
- 2) Transition all diversion programs in Probation to Youth Diversion and Development
- 3) Build out infrastructure of future department

Alternate Crisis Response

Working on a countywide collaboration to design and implement 988 as an alternative to 911 response to mental health crisis calls.



A protestor at a rally against the death of George Floyd. (Chava Sanchez/ LAist)

Community Led Process

17 member committee, comprised of:

- Board Appointees (5)
- County Department Leads (5)
- Individuals with Lived Experiences (5)
- Labor Representatives (2)

This group is tasked with overseeing the establishment of an inclusive and transparent Measure J revenue allocation process to:

- A) Develop a spending plan recommendation process.
- B) Create an annual spending plan for future Measure J funding cycles.
- C) Coordinate with County departments to develop detailed budget requests.

Community Lead Process (Continued)

Reimagine LA Subcommittees



Economic Opportunity



Diversion, Behavioral Health & Health



Education Access & Youth Development



Housing



Reentry

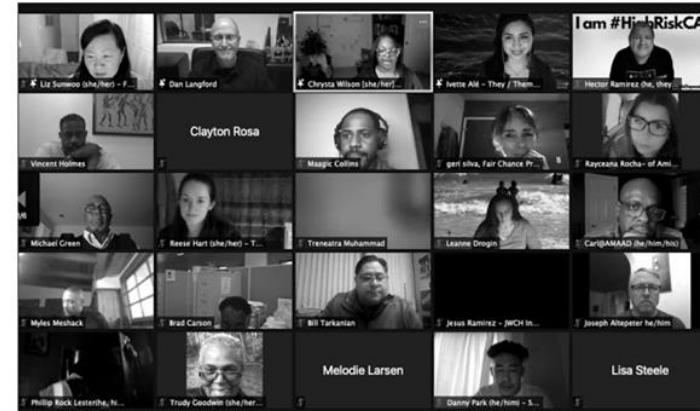
Community Process



RE-IMAGINE L.A. COUNTY

THE SUBCOMMITTEES HOSTED THEIR FIRST MEETINGS.

IN THE FIRST MEETING, THEY REVIEWED THEIR ROLE IN MAKING FUNDING RECOMMENDATIONS THAT ARE ALIGNED WITH MEASURE J AND ELECTED A CO-CHAIR FROM THE COMMUNITY.



REIMAGINE.LA

SAMHSA's Mission

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) • 1-800-487-4889 (TDD)