

**Non-Police Mobile Crisis Response Team Programs:  
Reducing Unnecessary Police Interactions with Marginalized Populations**

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## **ABSTRACT:**

Non-police mobile crisis response team (MCR) programs are emerging as alternatives to policing with the potential to decrease interactions between police and marginalized populations. This paper investigates the feasibility of widespread implementation of MCR through a comparative case study of Crisis Assistance Helping Out On The Streets (CAHOOTS), Street Crisis Response Team (SCRT), and Support Team Assisted Response (STAR). The questions this paper seeks to address are: what are the successes and challenges associated with MCR? And, how can the lessons learned from CAHOOTS, STAR, and SCRT inform the establishment, design, and implementation of future MCR programs? To investigate this, interviews were conducted with MCR workers, MCR administrators, and academic experts; I also observed community meetings and relevant webinars. The findings suggest that clear division of responsibilities among city responses, community leadership, community partnerships, and gradually diverting funding from police are major factors affecting the successful implementation of MCR programs.

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## **Non-Police Mobile Crisis Response Team Programs:**

### **Reducing Unnecessary Police Interactions with Marginalized Populations**

#### **INTRODUCTION**

On March 5<sup>th</sup>, 2015, police officers shot and killed Brendon Glenn, an unarmed, unhoused Black man in Los Angeles. Police responded to a report of an unhoused person bothering customers outside a restaurant. When the police arrived, Brendon walked away. A few moments later, Brendon got into a verbal argument with people outside a bar down the street. The same police officers arrived, and the situation escalated. Although the officers claimed they planned to arrest Brendon, the bar's security footage showed the officers pulling Brendon by his hair and wrestling him to the ground. The footage then showed one of the officers backing away from Brendon, who was lying on the ground, before shooting him twice at point blank range. Doctors pronounced Brendon dead upon arriving at the hospital. Brendon was a 29-year-old father to Avery, a young boy who was just 3-years-old at the time of his father's death (Brendon Glenn). Brendon did not pose a threat to himself or others on March 5<sup>th</sup>, 2015. His behavior didn't require an armed police response, and it certainly did not warrant death. Brendon needed and deserved a specialized response from experts trained to deal with unhoused populations, behavioral health, and substance misuse.

Brendon Glenn's death at the hands of police highlights many issues caused by the current system of policing in the United States, including excessive force, targeting of marginalized populations, racial profiling, and lack of transparency. Black, Indigenous, Hispanic and other people of color are disproportionately affected by police violence and misconduct (El-Sabawi and Carroll 2020). From 2000 to 2018, firearm discharge during a police interaction was

the 10th leading cause of death for Black Americans between the ages of 15 and 24 (El-Sabawi and Carroll 2020). Police brutality affects the health and safety of communities throughout the United States. Moreover, cases of police abuse often involve individuals facing mental health issues, poverty, substance abuse, and lack of housing (Simpson et al. 2021). During the summer of 2020, a number of protests spread across the across the United States after the murder of George Floyd, Breonna Talyor, Tony McDade and countless other unarmed civilians at the hands of law enforcement. These protests reignited a decades-long call to defund the police among community activists, scholars, and citizens throughout the country (Jacobs et al. 2020). However, calls to defund or completely abolish the police often raise questions about the impact of budget cuts on many services provided by law enforcement departments (El-Sabawi and Carroll 2020).

Currently, a variety of police alternative programs at differing levels of maturity exist throughout the country. In particular, in Eugene, Oregon, a program called Crisis Assistance Helping Out On the Streets (CAHOOTS) has been dispatching a non-police crisis intervention team to mental-health related 911 calls in an effort to mitigate violent police interactions since 1989 (Macauley 2021). CAHOOTS has sparked similar programs across the country. One example is the Support Team Assisted Response (STAR) program in Denver, Colorado, which has a similar structure in which social workers and paramedics respond to calls involving substance misuse and behavioral health issues instead of police officers (Macauley 2021). Additionally, in San Francisco, the Street Crisis Response Team, launched in November of 2020, responds to cases involving mental health issues, substance abuse, and unhoused populations (Simpson et al. 2021).

The recent success of these programs illustrates the potential for widespread implementation of similar models in which mental health professionals, behavioral health professionals, and community partners respond to many types of crises that are currently being handled by police. Evidence of the successful implementation of these programs can help convince actors who are weary of police alternatives of the potential benefits to society (Batko 2020). Many individual evaluations of police alternative programs exist in the current literature, but there is a significant knowledge gap related to the large-scale feasibility of such programs. The literature base would benefit from a comparative study that analyses the designs and implementation approaches taken in several different police alternative programs aimed at reducing negative police-civilian interactions in cases involving mental health concerns, houselessness, poverty, and substance abuse. This study aimed to address these gaps in the literature.

Through a qualitative comparative analysis of the CAHOOTS, STAR, and SCRT programs, this study aimed to answer the following key questions: firstly, what are the successes and challenges associated with non-police mobile crisis response teams? And, how can the lessons learned from CAHOOTS, STAR, and SCRT inform the establishment, design, and implementation of future non-police mobile crisis response programs? Findings generated from thematic qualitative analysis of interviews, community meetings, and relevant webinars about the three programs of interest revealed that community input, connections to long-term mental and behavioral health services, and the establishment of trusting relationships between teams and community members contribute to the success of these programs. Specifically, programs that focused on community leadership illustrated greater understanding of communities' reception to their programs, mechanisms for communicating with difficult to reach segments of their target

populations, and avenues for adapting non-police crisis response teams' services to better assist marginalized communities. Cities with co-responder programs, established either independently or in partnership with non-police mobile crisis response programs, were better equipped to dispatch mental health responses to violent situations in which non-police teams are unable to respond, but struggled to gain community trust due to their highly publicized direct connections with the city's police department. The non-police mobile crisis response programs of interest all highlighted the importance of creating networks of mental and behavioral health services that are community-based and representative of the diverse needs of each city's population.

Additionally, the findings of this analysis illustrate the key role non-police mobile crisis response programs can play in diverting individuals away from the criminal justice system and saving program cities significant financial resources. However, challenges with planning to divert funds from police departments; establishing dispatch systems that both ensure community trust in the program and provide appropriate responses to violent situations; and minimizing the influence of broader social system failures must be addressed to enable the most successful implementation of non-police mobile crisis response programs in other cities across the country. With modifications addressing these difficulties, non-police mobile crisis response teams are feasible mechanisms to decrease unnecessary interactions between marginalized populations and police and improve the accessibility of mental and behavioral health services on a large scale.



## **LITERATURE REVIEW**

### **Background on Police Use of Force in America**

#### ***History of Policing in the United States***

Aggressive approaches to policing in the United States can be traced back to the violent and oppressive legacies of slavery and subsequent Jim Crow laws (Ralph 2020). Slave codes in America legally defined enslaved populations as property rather than humans and regulated them as such (Hassett-Walker 2021). The government-sponsored slave patrols focused on “apprehending escaped slaves and returning them to their owners; unleashing terror to deter potential slave revolts; and disciplining slaves outside of the law for breaking plantation rules” (Hassett-Walker 2021). The slave patrols and militias responsible for policing enslaved populations and their movement transformed into structured police forces during the latter half of 19<sup>th</sup> century, following the Civil War (Ralph 2020). Early responsibilities of newly formed police departments included monitoring recently freed slaves, enforcing Black Codes and Jim Crow laws, and protecting the elite status of white Americans (Hassett-Walker 2021, Salter 2021). During this time, patrollers used extremely violent tactics to police Black Americans including lynching, castration, and whipping (Salter 2021). In the decades to come, police departments throughout the country used these historical approaches as standards to model their methods for maintaining order and exerting power over Black communities, particularly during the periods of racial justice movements that characterized the 1950s and 1960s (Ralph 2020).

#### ***Interactions Between Marginalized Populations and Police***

The legacies of aggressive policing strategies targeted toward historically subjugated groups continue to play a role in police-community interactions to date. In addition to racial minorities, other vulnerable populations that are over-policed and disproportionately subjected to

police violence include unhoused populations and those struggling with mental illness and substance misuse (Salter 2021). More so, strong interactions exist between populations suffering from lack of housing, mental illness, and drug-related issues (Macauley 2021). When worried friends, family, or other community members contact authorities, people experiencing personal crises related to behavioral issues and substance misuse are significantly more likely to be killed in a police encounter than people who are not affected by such issues (Jacobs et al. 2020).

Laniyonu et al.'s study examined the relationship between police use of force and prevalence of serious mental illnesses in suspects in nine cities throughout the U.S. between 2011 and 2017 (Laniyonu and Goff 2021). The results illustrated that individuals suffering from mental illness were 11.6 times more likely to experience use of force by police officers than those without mental illnesses (Laniyonu and Goff 2021). Additionally, research by Mulvey and White in 2014 found that persons with mental illness experienced greater use of higher-level weapon force (Mulvey and White 2014). All of these results provide support for the conclusion that people with mental illnesses face elevated risks of being subjected to police use of force. Similar relationships exist in unhoused populations. Although statistical evidence in this area is relatively sparse, in cities that criminalize houselessness, unhoused populations are more likely to be victims of violence in general, including police violence (Resnikoff 2015).

### ***Police Reform and Alternative Interventions***

During the summer of 2020, protests in response to countless incidents of police violence against communities of color resulted in widespread calls to reform police departments across the country (O'Rourke et al. 2021). This surge in protests caused many cities to begin looking at mechanisms to potentially defund, abolish, or otherwise reduce their police forces (O'Rourke et al. 2021). However, significant barriers to effective implementation of such initiatives currently exist. Namely, the act of disbanding the institution of policing does not in itself establish a

system of replacement for many of the essential duties for which police are responsible (O'Rourke et al. 2021). Empirical evidence related to police department budget cuts during the 2008 Recession suggests that cutting funding without changing or minimizing the tasks carried out by police can further exacerbate many problems police reforms seek to address (Weichselbaum et al. 2020). Specifically, in 2008, budget cuts coincided with increased use of force in many cities (Weichselbaum et al. 2020). Thus, effective plans to defund police departments require specificity and well-established alternative systems that simultaneously decrease the number of responsibilities held by law enforcement.

Although many reforms and police alternative models could fill in some of the roles held by law enforcement officers, experts disagree on which alternative systems would best promote safety and equality throughout the country (Simonson 2021). Obstacles including lack of police support, strong and influential police unions, police rank-and-file culture, and inevitable policy tradeoffs must be considered when evaluating reforms that require structural changes within the current policing system (O'Rourke et al. 2021). Yet, calls for internal change within law enforcement institutions have echoed in police jurisdictions across the country for decades. An article by Angell in 1971 advocated for the separation of all police forces into three service sections - general, coordination and information, and specialized services - to limit isolation from communities and allow for more specialized services based on a population's needs (Angell 1971).

Additionally, current research on alternative models of policing has primarily focused on the widespread adoption of the Crisis Intervention Training (CIT) model, which has been implemented in police departments across the country. In contrast to an entirely community-based or mental health-based solution, the CIT model is an internal reform that operates within existing police structures by training current officers to better recognize and respond to mental

health issues (Watson and Compton 2019). O'Rourke et al.'s paper was hesitant to accept this approach to combating police violence as a true alternative because of its entanglement with established policing institutions. More specifically, O'Rourke et al. argued that any reforms that attempt to address police violence from within existing institutions will face resistance and other complications due to the strength of police unions and the strong rank-and-file culture that exists within a vast majority of police departments (O'Rourke et al. 2021). Thus, there is a strong case for identifying solutions that minimize the role of police in community interactions.

### ***Non-Police Mobile Crisis Response (MCR) Programs***

Many models that emphasize the role of mental and behavioral health specialists in crisis response and minimize police involvement when possible currently exist. However, few studies, if any, have critically examined the design of non-police crisis response models and evaluated their ability to be adopted on large scales through comparative analyses. My study aimed to address this gap in the literature. By investigating three cases of non-police crisis response models in cities across the country, this study aimed to examine the successes and failures of these models with the ultimate goal of identifying any barriers to widespread implementation of such programs and providing recommendations to overcome them.

### **Previous Studies**

Many cities across the country have established police alternative pilots and other programs over the past year. Because many of these programs are very early in their development phases, few studies evaluate the approaches, designs, and effectiveness of such programs; as such, the literature currently lacks studies that consider longitudinal research related to these programs and studies that comparatively analyze several of these models at once. Two of the three programs being studied in this research fall in this category: Support Team

Assisted Response (STAR) and Street Crisis Response Team (SCRT). The third program, CAHOOTS, was established in 1989, so some empirical data assessing the impact of the program on Eugene, Oregon exists (Macauley 2021).

Analysis of preliminary studies suggest that, during its 6-month pilot, the STAR program avoided unnecessary interactions between police and community members (Reimagining Public Safety Recommendations 2021). Specifically, during the pilot program, of the 748 calls to which the STAR team responded, no calls required police back-up and no arrests were made (STAR Program Evaluation 2021). However, advocates and critics alike warn of the dangers of weighing the successes of the pilot program too heavily in future decision making due to the limited duration of the study, the small geographic area of focus, and the low number of calls to which the STAR team responded (Reimagining Public Safety Recommendations 2021). More so, Denver Task Force's evaluation of STAR's preliminary analysis highlighted the potential bias involved in the study due to Denver's decision to conduct the initial evaluation through an in-house team at the Denver Police Department (Reimagining Public Safety Recommendations 2021). The lack of data in the case of the STAR program currently presents an obstacle for expansion of the program to the rest of the city by making policy makers reluctant to increase funding to the initiative or divert police funds to the program (Reimagining Public Safety Recommendations 2021). At the same time, programs like STAR require additional funding to pay for the studies that would prove the viability of their programs.

Furthermore, the current funding and staffing model of STAR suggests that the program might not be viewed as or intended to serve as an alternative to policing, but rather, an additional mental health service provided by the city of Denver. According to Denver's police chief, STAR is not about reallocating police funds; instead, Chief Pazen views the program as an opportunity for the police department to focus on addressing crime issues in the city (Sachs 2021). Thus,

because STAR's funding comes from a pool of money that is separate from the police department's budget, it is possible that, over time, STAR may result in an increase in policing other activities across the city. Additionally, studies produced by the program's evaluative committee are somewhat limited in that they focus only on the STAR program's successes in a vacuum and fail to consider the broader effects of STAR on policing throughout the city.

In San Francisco, SCRT's timeline and structure largely mirror that of STAR. SCRT's 6-month pilot program was launched in November 2020 (San Francisco Department of Public Health 2021). The pilot program's main goals were to provide trauma-informed responses to calls about people experiencing crises in public spaces, to minimize unnecessary contact with law enforcement, and to decrease unnecessary use of emergency rooms (Street Crisis Response Team Pilot 2021). Although most of the data about STAR came from internal evaluations within the program, SCRT's early analysis of its pilot program was conducted by Harder + Company, an independent outside organization (Street Crisis Response Team Pilot 2021). Thus, compared to an in-house city evaluation team, Harder + Company's analysis provided more objective evaluations of the program's strengths and failures. Harder + Company analyzed 710 incidents that SCRT responded to, but of those, only 305 incidents had enough information about specific client characteristics and connection to services (Street Crisis Response Team Pilot 2021). The analysis of calls to which SCRT responded, rather than more general mental health or criminal justice outcomes in San Francisco, enabled the evaluation team to better isolate the effects of SCRT.

The initial findings of Harder + Company's broader research project assessing the impact of SCRT through June 2022 revealed that between the program's initial start date and March 2021, the SCRT team never called the San Francisco Police Department for back up in all its responses to crises (Harder and Company 2021). Even with limited SCRT teams servicing the

city during the initial phases of the program, the SCRT was able to respond to an average of 19% of non-violent mental health calls (800-B code calls) received by the city (Street Crisis Response Team Pilot 2021). The quantitative analysis also revealed that SCRT's rate of diverting individuals away from the criminal justice system has been substantially increasing as the program ages (Street Crisis Response Team Pilot 2021). Similar to the results of other mobile crisis response programs, 74% of individuals serviced by SCRT were able to remain in the community following de-escalation (SFDPH Health Commission 2021).

However, the positive results and trends found in preliminary studies may shift as more data becomes available over time (Harder and Company 2021). That being the case, a September 2021 update highlighted the expansion of SCRT to operate six crisis response teams and the continued success of the program in diverting non-violent mental health calls away from police (SCRT September Update 2021). However, due to the confidential and fast-paced nature of emergency mental health dispatching, Harder + Company's analysis of SCRT lacks detailed information about the demographic characteristics and long-term outcomes of many of those serviced by SCRT. This information is essential to proving the extent to which SCRT has improved behavioral health outcomes for marginalized populations.

The initial SCRT research study also emphasized the program's support for long term care; since SCRT's initial launch, 33% of all individuals who interacted with SCRT teams received follow up care that was coordinated by the San Francisco Public Health Department (SCRT September Update 2021). Those involved with crisis response teams hope that such teams will minimize inefficient use of police resources and help guide individuals away from emergency rooms and toward longer-term support services (Westervelt 2020). Similar to the STAR program, proponents of SCRT applaud the design for allowing police to spend more time fighting crime; however, it is unclear what such a police department refocus could mean for

already overpoliced populations. Although the police appear to support the SCRT initiative on paper, social media posts uploaded on rank-and-file police officers' personal accounts illustrate that resistance and skepticism might be common within the SFPD (Westervelt 2020). A strength of Westervelt's social media approach is that it enables one to understand the true views of some officers who may be fearful of retaliation if they express dissent in police department surveys, which make up the approval results of official evaluative studies. However, Westervelt's analysis did not provide quantitative evidence about the potential police dissent; therefore, it is possible that skepticism about SCRT is coming from a vocal minority in the police department that the majority of SFPD officers disagree with.

Because of CAHOOTS's 30-year history, some evaluative research exists investigating the longitudinal success of the program. However, in Bell's paper discussing next-generation policing strategies, Bell noted that despite its 33-year history, like newer MCR programs, even CAHOOTS has not been rigorously evaluated by a third party (Bell 2021). Although CAHOOTS has significantly more historical data available about the success of its programs, most of the quantitative analysis that is included in studies conducted about CAHOOTS by third parties have relied heavily on the statistical data collected and published by the Eugene Police Department rather than an independent and impartial third party. Thus, virtually all of the quantitative analyses currently published about the CAHOOTS program lack complete objectivity. Nevertheless, papers analyzing the potentially biased data that is currently available still provide meaningful perspectives and estimations of the success of the CAHOOTS program over the years.

Macauley's paper focused on evaluating the effectiveness of CAHOOTS, CIT, and a number of other interventions for mental health crises (Macauley 2020). Macauley concluded that the CAHOOTS program provides an example of "how the strategic avoidance of police



interactions with the mentally ill or individuals under the influence, not only benefits vulnerable populations but also makes economic and logistical sense” (Macauley 2020). Macauley’s paper also recognized the lack of generalizability of their paper and others that attempt to apply CAHOOTS’s model to other, more diverse cities (Macauley 2020). In contrast to a large number of major cities in the United States, Eugene, Oregon has a population that is over 80% white; additionally, the city is not as densely populated as most larger cities (Macauley 2020). Therefore, attempting to make broad claims about the success of non-police mobile crisis response programs in other contexts may be premature.

Beck et al. conducted a case study investigating CAHOOTS’s funding, dispatching, and staffing and how these elements have contributed to CAHOOT’s success. Through background research and a series of interviews with Eugene Police Department leaders, Beck et al. found that cooperation between the Eugene Police Department and the CAHOOTS was essential to the successful development and continued implementation of the CAHOOTS program (Beck et al. 2020). Additionally, the analysis highlighted the importance of a strong mentorship program among CAHOOTS staff, robust training, input of community members, and partnerships between government and community-led behavioral health providers (Beck et al. 2020). Although Beck et al.’s approach enabled researchers to evaluate the institutional aspects of CAHOOTS at length, Beck et al.’s paper lacked objectivity and a diverse set of opinions because they only interviewed police department leaders.

Similar to Beck et al.’s analysis, Waters’s qualitative investigation of the CAHOOTS program’s recent rise in national popularity attributed the program’s historical success to strong relationship building with community resource providers and the establishment of community trust by minimizing associations between CAHOOTS and traditional policing (Waters 2021). According to El-Sabawi and Carroll’s research identifying avenues for defunding the police,

consistent with the successful narratives described by Beck and Waters, throughout its history, only about 250 out of 240,000 calls CAHOOTS responded to required police back-up, which speaks to the program's success in minimizing unnecessary police encounters with civilians (El-Sabawi and Carroll 2020). However, in contrast with Beck et al. and Waters's characterization of the easy process of relationship building with pre-existing community partners, El-Sabawi and Carroll also pointed out that many cities do not have as strong of a network of social, mental health, and behavioral health resources as Eugene did; thus, according to El-Sabawi and Carroll, the necessary process of partnering with strong networks of care is constrained by the social infrastructure in place in a given city.

Many new and developing programs modeled their crisis response teams off of the CAHOOTS program because of its highly publicized and long-standing success over the years, including both STAR and SCRT. In addition to the generalizability issues discussed by Macauley, Waters noted that using the CAHOOTS model to project the success of other programs could be problematic due to the origins of CAHOOTS's history of community trust (Waters 2021). Because the CAHOOTS model of crisis intervention was established in 1989, politicians and community advocates had years to develop and refine its design - "a luxury that many community advocates responding to police violence today do not have" (El-Sabawi and Carroll 2020). Additionally, public recognition of and support for the CAHOOTS program was relatively easy to come by because of the White Bird Clinic's reputation as a well-established community institution (El-Sabawi and Carroll 2020). As discussed by El-Sabawi and Carroll, the White Bird Clinic has been providing free medical assistance and community-based support resources to those experiencing adverse drug experiences since 1969 (El-Sabawi and Carroll 2020). Nonetheless, cities across the country can attempt to replicate the CAHOOTS program's

relationship of trust with the community by engaging with community partners who are well established in the city (El Sabawi and Carroll 2020).

Overall, the existing literature has established a consensus about several of the factors that were necessary for the successful establishment of the three non-police mobile crisis response programs of interest; establishing community trust and relying on pre-existing networks of care were some of the tactics most commonly referenced by researchers. As the literature illustrated, CAHOOTS, STAR, and SCRT all have published quantitative data suggesting that their programs have been successful at reducing police-citizen interactions and decreasing police violence, but the quality, generalizability, and validity of many of the statistics utilized by evaluative studies of MCR programs are called into question due to the lack of third-party evaluators for CAHOOTS and STAR.

### **Theory**

Scholars of social justice and policing disagree about the roles dominant theoretical frameworks should play in shaping police reform (Simonson 2021). Most scholars who support reform advocate for some level of restructuring current institutions, but the extent and methodology varies greatly across the field. The power lens or power shifting lens theory postulates that the current system of policing is constructed to deprive populations that interact most with the police of agency and influence over its functioning (Simonson 2021). Thus, practitioners of this philosophy argue that reform should support reparative shifts in power away from police to communities historically victimized by policing institutions (Simonson 2021). By itself, however, the power lens does not suggest a single approach to reform, but rather, provides a lens through which reform models can be evaluated (Simonson 2021). Thus, it is necessary to

evaluate other theories of police reform that could be combined with the power lens theory to establish the most effective theoretical framework.

Police reform strategies emphasizing legitimacy could be compatible with the power lens. Legitimacy theory is concerned with the perspective that negative relationships between police and communities stem from citizens lacking confidence in the police, which decreases the likelihood of citizens cooperating with police (Bell n.d.). As Harkin similarly highlights, according to legitimacy theory, police violence, misconduct, corruption, discrimination and brutality all minimize the legitimacy of the police (Harkin 2015). Specifically, Harkin notes that “if the police breach legality, diverge from popular morality and show no restraint or deference to consent, then they pay a cost of diminished legitimacy” (Harkin 2015). One problem with legitimacy policing in the context of the power lens is that using legitimacy as a framework inherently requires the assumption that the current system of policing is redeemable from its abusive past. Those that have been less oppressed and subjugated by the current policing system are more likely to be in support of working within the system rather than larger structural change; thus, legitimacy as a reform strategy does not fit the power lens goal of attempting to give the most power and influence over the system to those most victimized by it.

This viewpoint is supported by Bell’s claim that the legitimacy framework de-emphasizes the importance of widespread structural change (Bell n.d). Moreover, particularly given the extent to which centuries of oppression perpetrated by the police have negatively impacted many generations of marginalized populations, it may be unlikely that legitimacy of the police can and should be restored. If legitimacy operates through a majoritarian lens as is the case of many democratic processes, minority communities may be excluded from the legitimacy calculation in general. If white populations make up the majority of a community and view harsh,

discriminatory policing as the strategy that results in procedural justice for themselves, the legitimacy policing approach will not result in the desired power shift.

Instead, Bell argues that current police systems seek to exclude marginalized groups from society and that true change requires support for structural approaches (Bell n.d.). Several scholars would agree with Bell's conclusion that effective police reform requires a total shift and complete restructuring of the policing system. Meares of Yale Law School refers to this restructuring as a "Third Reconstruction" in which historical power dynamics are completely disrupted and deep structural change in the criminal justice system's operation occurs (Meares 2015). Although Meares describes the lack of police legitimacy and need for drastic change, the paper fails to provide concrete examples of what a just structural change might look like. However, the strategy of completely restructuring the current policing system in any capacity could fit within the framework of power shifting outlined in the power lens. Restructuring the system such that the needs of the most historically marginalized members of society are highlighted could be a viable evaluative framework for police reform if additional specificity is provided.

Capers also discusses the "Third Reconstruction" related to policing, emphasizing its relationships with Afrofuturism, critical race theory, and legal scholarship (Capers 2019). Afrofuturism describes literature, art and theory that "imagine greater justice and a freer expression of black subjectivity in the future or in alternative places, times, or realities" (Afrofuturism). Critical race theory "critiques how the social construction of race and institutionalized racism perpetuate a racial caste system that relegates people of color to the bottom tiers" (George 2021). Capers's research speculates about the future of policing when whites lose majority status in the United States, specifically suggesting that over the next few decades, technology and demographic changes might increase the caretaking role of policing and

minimize current issues faced (Capers 2019). However, although Capers provides a more specific prediction for the potential form of structural change, Capers's focus on Afrofuturism and speculative evidence lacks a level of practical significance for scholars concerned with the immediate path forward and current systemic changes necessary to move the United States towards the egalitarian society Capers describes. Effective power shifting involves increasing agency concretely and efficiently, which is not consistent with Capers's philosophical interpretation of the elements involved in the Third Reconstruction.

On the other hand, Paul Butler, another supporter of framing police reform around the concept of a "Third Reconstruction," notes that the problems in the criminal justice systems are not mistakes or errors in the application of a just system (Butler 2020). Rather, Butler argues that these outcomes represent the system functioning as it was designed and intended to (Butler 2020). Moreover, Butler references the reduction of stop and frisk cases in New York as evidence supporting the notion that combinations of activism, protests, and legal action are necessary to promote broader national change in the criminal justice system and trigger the "Third Reconstruction" necessary to achieve desired social change (Butler 2020). Butler's interpretation of the Third Reconstruction is more compatible with the power lens because it provides concrete examples of steps that can be taken to generate agency and shift power toward historically oppressed populations. Yet, unlike Meares and Capers, Butler's example of how to trigger the desired radical social change both acknowledges the unjust design of the system and proposes working within it through legal actions. Thus, Butler's advocacy for a Third Reconstruction seems to view policing in a vacuum separate from the rest of the legal system. If the criminal legal system was created in such a way that those who interact with it most are the least represented by it, as is argued with the power lens, one should not expect the legal avenues for reform Butler describes to be particularly effective in shifting power.

Democratization of policing systems is another strategy many scholars take to discussing police reform. In line with many of the concepts expressed in power shifting theories, proponents of democratic approaches to police reform suggest that complete dissolution of failing institutions is a necessary experiment that is characteristic of a successful democracy (O'Rourke et al. 2021). In contrast to other scholars, who see incremental changes as potential avenues for achieving widespread structural change, O'Rourke et al. argues that incremental adjustments to policing are unlikely to result in positive outcomes for marginalized communities (O'Rourke et al. 2021). According to O'Rourke et al., this is because current police departments are shielded from democratic control by corruption, police unions, and attitudes of officers who are resistant to change (O'Rourke et al. 2021). More so, O'Rourke et al. argues that previous attempts at police reform have failed because activists are too willing to trust the democratic process in this context (O'Rourke et al. 2021). Thus, similar to advocates of a Third Reconstruction, O'Rourke et al.'s argument in favor of true democratization of police recognizes the historical and modern-day failures of the policing system to reform itself internally.

Democratization of police involves acknowledging the systems in place that prevent successful incremental reform and dissolving the aspects of the system that have failed citizens. As in the case of the legitimacy policing described by Harkin, some might argue that a simple majority democratization approach might result in an oppressive majority using the newly developed system to victimize marginalized groups even more than in the status quo. However, combining the democratization approach with the power lens creates a theoretical framework that prioritizes addressing the concerns of those most affected by policing within a system in which the government and its programs are accountable to the citizens. Whereas incremental change might look like retraining police officers on approaches to mental health responses or firing the most discriminatory officers on the force, democratization involves dissolving the

aspects of policing that are failing while centering community actors rather than police in the establishment and implementation of reform.

Over the past several decades, there has been a significant amount of discourse pertaining to theoretical approaches to police reform. Power shifting is the overarching framework on which my analysis focuses. Using the power lens as a guide to assessing the strengths, weaknesses, design, and implementation of non-police mobile crisis response teams enables me to ground my research in tailoring institutions toward the needs of those who have previously and presently suffered the most at the hands of police. Because the power lens by itself focuses on the broader philosophical ideals that should be shaping reform, combining the power lens with O'Rourke et al.'s theory of democratization of police institutions provides the best approach for evaluating policy solutions related to police alternatives. The most effective combination with the power lens is democratization of policing as it involves taking actions toward abolishing ineffective and unjust systems and replacing them with new systems designed to respond to the needs of citizens and maintain accountability. This theoretical framework hinges on the assumption that democratization and power shifting can exist in the same system; instead of conceptualizing democracy as a simple majority vote, framing it as a mechanism through which failing institutions can be rebuilt and the government becomes accountable to its citizens throughout the implementation process enables true redistribution of power.

By evaluating community-based programs that are explicitly designed to solve problems without police assistance instead of incremental changes in police conduct, my research aimed to provide academic support for reforms that defund currently failing policing systems. This theoretical approach is also represented in my selection of interview subjects; instead of focusing my analysis only on the perspectives of current holders of power like police departments and city government institutions, I sought out community organizations and individuals directly involved



in community-based crisis de-escalation. Depending on the chosen methodology of reform, scholars warn that there is no guarantee that a power-shifting approach will result in outcomes desirable for oppressed communities (Simonson 2021). It is possible that an increase in democratic control of police activities could lead to an increase in patrols, incarceration, and police violence (Simonson 2021). However, it is likely that this risk remains with any effort to restructure or otherwise overhaul current police systems within the broader context of the criminal justice system; thus, police reform must also be a part of a larger overhaul of the entire legal system, social structure, and power dynamics of American society to be successful.

## **METHODS**

To investigate the potential for widespread implementation of three alternative models - Eugene's CAHOOTS, Denver's STAR, and San Francisco's SCRT programs - I used a qualitative research approach. By conducting semi-structured interviews with several categories of participants involved in the development and implementation of the programs as well as academic experts in policing, I gained insight about the structure, implementation, and successes of non-police mobile crisis response programs. I also conducted observations of the STAR program's Community Advisory Committee meetings and webinars featuring academic experts and program administrators. This approach provided the depth of information necessary to focus my evaluation on the design, implementation, and successes of police reforms. Tatem's 2021 study provides historical evidence supporting the effectiveness of interviewing staff members of the programs of interest when conducting a comparative analysis of emerging approaches to police reform (Tatem 2021). Kisley et al.'s investigation of a mobile crisis partnership in Nova Scotia also relied on interviews of staff members, further illustrating that interviews provide

studies about police alternatives with in-depth and valuable data (Kisley et al. 2010).

Additionally, this strategy avoided the issue of lack of quantitative data availability due to the recent establishment of the programs of interest and difficulty in acquiring data from law enforcement by examining the issue through a qualitative lens.

I chose CAHOOTS, STAR, and SCRT as case studies for my research because they are each located in vastly different cities across the country with differing demographics, population densities, and crime rates. Tatem's 2021 study illustrated the success of this strategy for determining appropriate programs to use in a comparative case study. Tatem's study focused on a similar category of research by exploring the relationship between the embeddedness of social workers in social work policing programs and the effectiveness of these programs, thus establishing the validity of this strategy in assessing police alternative programs (Tatem 2021). Additionally, by studying a well-established program that has been operational for several decades (CAHOOTS) alongside two newer programs, I aimed to examine the influence of existing programs on the development of new programs and evaluate the amount of time it takes for programs to become successful.

### **Data Sources**

To investigate the mobile crisis response teams of interest, I conducted interviews with several categories of individuals with knowledge of and involvement with MCR programs. This variety of participants allowed for both depth and breadth of understanding of the potential successes and challenges associated with expanding similar programs. I also observed STAR Community Advisory Committee meetings and webinars pertaining to the implementation of police alternatives. In this section, I will explain the various types of sources from which I gathered data.

## 1. Interviews

Figure 1 displays information about the interviews conducted with program administrators, community partners, crisis responders, and academic experts.

**Figure 1: Table of Interviews Conducted**

Table of Interviews Conducted				
Interviewee Name	Program Association	Organization	Job Title	Interview Category
Lorez Meinhold	STAR	Caring For Denver	Executive Director	Program Administrator
Gary Sanford	STAR	Caring For Denver	Director of Community Engagement	Program Administrator
Kathleen Silks	SCRT	San Francisco Department of Public Health	Director of Street Crisis Response Team	Program Administrator
Carleigh Sailon	STAR	Denver 9-1-1	STAR Operations Manager at Denver 9-1-1	Program Administrator and Crisis Responder
Andrew Papachristos	N/A	Northwestern University	Professor of Sociology	Academic Expert
Lisa Raville	STAR	Harm Reduction Action Center	Executive Director	Community Partner
Daniel Felts	CAHOOTS	CAHOOTS	EMT and Crisis Counselor	Crisis Responder

*a) Those involved in the administration and development of the programs:* I interviewed several people involved in the administration and development of each of the police alternatives of interest. One of the interviewees worked for a non-profit organization who serves as a partner for a crisis response program; non-profit partners often provided guidance in the programs' initial development, formation of relationships with nearby communities, and the continued implementation of the program's services. The other four interviewees in this category provided insights from the perspective of city government structures including the program city's

department of public health, the city's 911 services, and outside funders. These individuals gave similar information about the design and implementation of the programs. They also provided context related to responses from the community and the successes and challenges the programs faced.

b) *Non-Police Mobile Crisis Response Team Members*: To gain accounts of first-hand experiences of individuals directly involved in the programs of interest, I interviewed an individual trained as an EMT and crisis counselor working on mobile a crisis response team; additionally, one of my interviewees who is currently a program administrator is trained as a licensed clinical social worker and previously worked on mobile crisis response vans. I asked both interviewees in this category questions about their perceptions of the effectiveness of the programs and any successes or obstacles they have faced related to their work on the crisis response teams.

c) *Academics*: I interviewed one academic expert with knowledge of policing, the criminal justice system, and potential alternative approaches. This participant provided information about the current state of policing in the United States and the feasibility of implementing alternatives.

## **2. Observations**

Figure 2 illustrates information about the meetings and webinars I observed throughout the research process including STAR community advisory committee meetings and relevant webinars addressing the implementation of police alternatives.

**Figure 2: Meetings and Webinars Observed**

<b>Meetings and Webinars Observed</b>			
<b>Title</b>	<b>Program Association</b>	<b>Date</b>	<b>Host Organization</b>
STAR Community Advisory Committee Meeting - September 2021	STAR	9/14/2021	Denver Department of Public Health and Environment
STAR Community Advisory Committee Meeting - October 2021	STAR	10/27/2021	Denver Department of Public Health and Environment
STAR Community Advisory Committee Meeting - November 2021	STAR	12/1/2021	Denver Department of Public Health and Environment
STAR Community Advisory Committee Meeting - December 2021	STAR	12/22/2021	Denver Department of Public Health and Environment
STAR Community Advisory Committee Meeting - January 2022	STAR	1/26/2022	Denver Department of Public Health and Environment
STAR Community Advisory Committee Meeting - February 2022	STAR	2/23/2022	Denver Department of Public Health and Environment
The Technical Assistance Coalition Webinar: Alternatives to Police Response for People in Mental Health Crisis - Ideas, Barriers and Ways to Work to a Solution	CAHOOTS	6/24/2021	National Association of State Mental Health Program Directors
Street Crisis Response Team Anniversary	SCRT	11/30/2021	San Francisco Department of Public Health
Alex S. Vitale: The End of Policing? Rethinking Public Safety in a Time of Crisis.	N/A	2/22/2022	University of Chicago

a) *Observations of Community Advisory Committee Meetings:* From September 2021 to February 2022, I observed a total of six of STAR’s monthly Community Advisory Committee Meetings, which took place over Zoom. Following the meetings, I received Zoom recordings of the meetings from one of STAR’s program administrators. During these meetings, official Community Advisory Committee members and Denver city officials typically discussed the

STAR program's progress, plans for expansion, concerns expressed by community members, and other administrative details about the program.

a) *Observations of Community Relevant Webinars:*

Because of the recent increase in popularity of non-police mobile crisis response programs, many individuals involved in the programs that I contacted did not have the availability to meet for a one-on-one interview. In these cases, program administrators sent me webinars in which members of their program discussed many of the topics I hoped to address in interviews. In total, I conducted observations for three webinars: 1) *The Technical Assistance Coalition Webinar: Alternatives to Police Response for People in Mental Health Crisis - Ideas, Barriers and Ways to Work to a Solution*, 2) *Street Crisis Response Team Anniversary*, and 3) *Alex S. Vitale: The End of Policing? Rethinking Public Safety in a Time of Crisis*. I obtained the first two webinars directly from program administrators, and the final webinar highlighted the perspective of an academic expert who was a featured panelist at a University of Chicago speaker event.

## **Procedures**

Each category of data source required a distinct approach to data collection. For interviews, I wrote one script with question stems and probing questions for each of the three categories of participants. For each interview with program administrators, I added key program-specific information to the follow-up questions in the generic script to ensure that each interview question was asked in a contextually relevant manner. Prior to interviews involving academic experts and crisis responders, I conducted preliminary research on their background to ensure that all questions in the script were relevant to their expertise. I conducted most of the interviews over Zoom and used the Zoom recording system to store each interview. Several interviewees

requested a phone call instead of a Zoom call; in those cases, I called participants on my phone and recorded the audio of interviews through QuickTime Player on my computer.

I first recruited interview participants by contacting the general contact emails or contact forms available on each program's websites. After connecting with at least one interviewee per program, I relied on snowball sampling to connect with non-profit partners and members of the crisis response units. For academic interviewees, I contacted professors and researchers from the University of Chicago and Northwestern University with relevant backgrounds through email. While observing Community Advisory Committee meetings and webinars, I took detailed field notes highlighting the perspectives shared by community members, city officials, program administrators, and academic experts. Following each observation, I reviewed my field notes and wrote down the most prevalent themes that came up throughout the event.

## **Measures**

In total, I conducted seven interviews, six observations of STAR's Community Advisory Committee, and three observations of relevant webinars; each category required distinct measures and data analysis strategies.

*Program Administrator Interviews:* I began each interview with program administrators by asking them how and why their program was developed. For STAR and SCRT (which were developed during 2020), I also inquired about any relationship that might exist between the racial justice protests of 2020 and the program's development. I then asked participants about the successes and challenges their program has faced. Next, I asked participants how their program and specific teams addressed racial equity in their work. Finally, I asked participants about the community and police responses to their programs and whether they saw any potential for expanding the program.

*Non-Police Mobile Crisis Response Teams Interviews:* For members of the crisis response teams, I focused interviews on their career paths and their interactions with community members. I asked about the participants' career paths and hours to gain a better understanding of the qualified staffing shortage common in many police alternative models. I then inquired about the participants' experiences treating clients of the mobile crisis response teams and their perceptions of the community's receptiveness toward their teams and services.

*Academic Interviews:* The main purpose of interviewing the academic experts was to gain an understanding of the feasibility of implementing the police alternative programs of interest across the United States. I first asked about their academic discipline's approach to and relevance in the subject of policing. Then, I asked about their familiarity with any of the specific programs of interest or police alternative programs in general. Lastly, I inquired about the perceptions of the future of police reforms and the factors that will be most relevant to the development of successful reforms.

## **Data Analysis**

In the following section, I will describe the data analysis techniques I used to organize the insights gained from my observations and interviews. To transcribe the recordings of each interview and observation, I relied on a transcription software called Descript. In order to analyze the transcripts of my interviews and observations, I utilized thematic qualitative coding in Dedoose, a desktop app for coding of qualitative and mixed methods research. After completing my first round of interviews, I reviewed the initial transcripts and created a preliminary descriptive codebook that highlighted the themes related to my research question and theoretical framework that came up during each observation. Specifically, I created broad thematic codes for each category of question I asked and each agenda topic area discussed in the meetings and



webinars. Following the application of the broad thematic codes, I also began creating a list of sub-codes with more specific details describing the perspectives shared by participants.

The qualitative coding process involved a great degree of progressive comprehension and adaptation; for each data source, I first coded the transcript using the existing codebook, and then created new codes for other ideas expressed that were not already coded. After establishing new codes, I reread previous transcripts and adjusted the coding to reflect the newly established theme categories as necessary. The use of descriptive coding allowed me to distill the meaning and implications of each participant's responses. During the qualitative coding process, I also created a code to mark notable quotes and phrases used by participants to reference throughout my paper.

### **Anticipated Challenges**

To avoid solely collecting information that is also readily available on each program's website during the interview process, I focused the interview questions on evaluations of the successes and challenges associated with the design and implementation of each program. Additionally, I interviewed people with a variety of experiences with the police alternative programs to ensure that diverse perspectives were gathered and that the data collected had a greater amount of depth than the short descriptions provided on the programs' websites. Because of the difficulty in contacting law enforcement officers for interviews, I was concerned about the potential for bias in favor of police alternatives due to the focus on interviewing people directly involved in the programs of interest. In order to mitigate the effects of this, I sought out webinars and academic experts who communicated varied opinions about policing and the necessity for reform in the criminal justice system. Yet, given the small volume of observations and interviews

involving academic experts, the data analysis approach of this analysis is not representative of the views of the broader academic community.

## **FINDINGS**

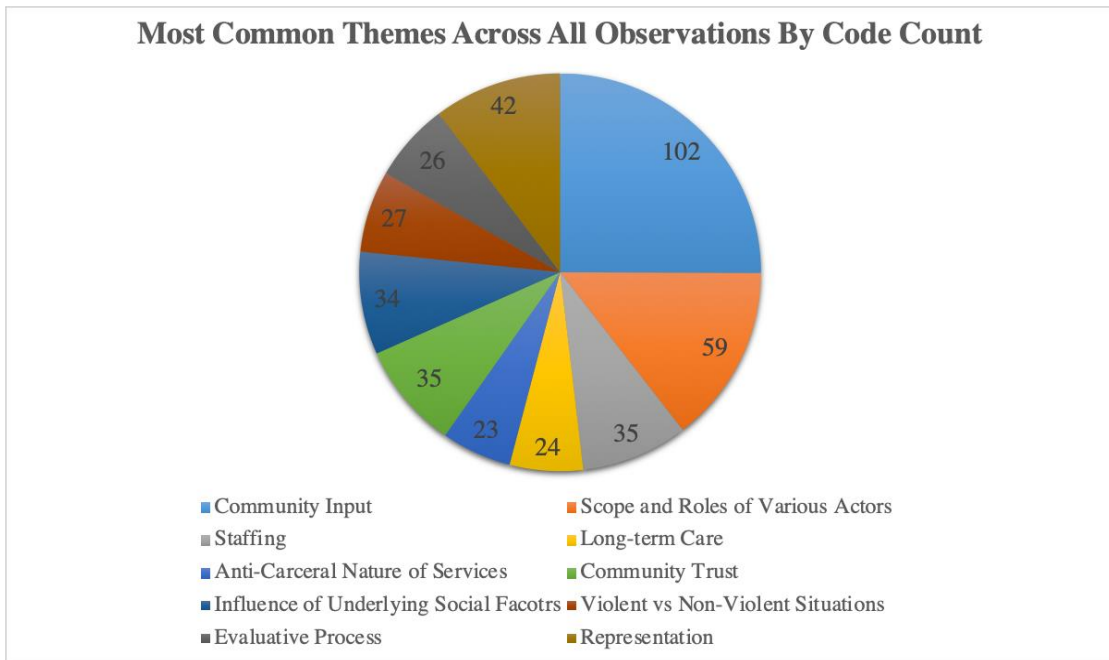
Through interviews with experts who work at the MCR programs of interest and by attending webinars involving program administrators, other cities looking to build similar models, and community members affected by the programs, I gained important insights into the successes and challenges of SCRT, STAR, and CAHOOTS. The results of this data collection are vital to addressing my research questions: what are the successes and challenges associated with non-police mobile crisis response teams? And, how can the lessons learned from CAHOOTS, STAR, and SCRT inform the establishment, design, and implementation of future non-police mobile crisis response programs? Overall, my findings highlight the feasibility of establishing MCR programs in cities across the country, but also illustrate many important considerations that must be addressed when designing and implementing these future programs.

Themes discovered through thematic qualitative coding are displayed in a word cloud in Figure 3; Figure 4 displays the ten most common themes that appeared in this analysis quantitatively.

**Figure 3: Word Cloud of Common Themes**



**Figure 4: Most Common Themes Across All Observations By Code Count**



From Figures 3 and 4, it is clear that community input, community trust, reputation of the program, human connections, representation, and the division of power between city officials, non-profits, and community members (scope and roles code) are just a few of the most

frequently referenced themes. These topics represent some of the greatest contributors to the successes and difficulties of implementing MCR programs; for instance, Community Trust was frequently mentioned as a factor increasing the effectiveness of the programs' services while defining the Scope and Roles of Various Actors was a difficult task that led to a significant amount of debate in many programs. Understanding the significance of these factors is essential to determining the potential for implementation of non-police mobile crisis response programs across the country and the modifications that would increase the effectiveness of both current and future programs. Overall, these findings highlight the importance of 1) strategically communicating relationships with existing government systems to community members; 2) establishing strong community relationships; 3) maximizing connections to culturally appropriate care and diversion from the criminal justice system; and 4) addressing structural barriers related to staffing, funding and the influence of underlying social factors.

### **1) Communicating Relationships with Government Systems to Community Members**

An important first step in evaluating the successes and potential barriers to implementation of MCR programs is recognizing the roles of these programs in relation to police and other emergency services. To gain an understanding of the MCR programs' positionality within existing systems, I asked interviewees from all three programs about their organization's origin, the types of calls their crisis response teams service, and the police's reactions to these programs. Their answers revealed a clear contrast in how each program communicates their mission in the context of criminal justice reform. Although all three programs have almost identical designs (modeled from CAHOOTS), interviewees from SCRT and CAHOOTS self-aligned their programs more closely with the concept of a true police alternative that strives to separate itself from traditional policing systems. On the other hand, STAR officials frequently

referred to their program as a piece of a larger city-led public safety response that includes and partners with the police in many instances.

During my interview with Kathleen Silk, the director of the Street Crisis Response Team (SCRT) in San Francisco, I learned that San Francisco Ordinance No. 300-19 called for the development of a mobile crisis response team to help individuals on the streets struggling with behavioral health issues or substance misuse in December of 2019 (Breed et al. 2019). Although the program began developing prior to the racial justice protests that occurred during the summer 2020 in response to police violence against people of color, Kathleen noted that Mayor London Breed was “calling for reform around police, and figuring out how to replace law enforcement responses to behavioral health crises” as these protests unfolded. This history suggested that SCRT functions as an alternative to policing that aims to minimize unnecessary contact between police and community members on the streets. Kathleen regarded this aspect of the program with a sense of pride when she states that “we are really proud to say that...we do not do a co-response model. We go totally on our own.” Kathleen’s appreciation for the independence of SCRT from traditional policing and the correlation between the timeline of SCRT’s establishment with racial justice protests are representative of the desire of many communities to achieve safety without the threat of police violence. SCRT’s independence from the operations of the police department highlights the increased community trust programs would experience if they make clear the distinction between non-police mobile crisis response teams and police officers.

Relatedly, in San Francisco Mayor London Breed’s speech commemorating the first anniversary of the SCRT program, she further emphasized the program’s status as an alternative to traditional policing for community members struggling with behavioral health issues:

This program came about in trying to find a non-police response to things that don't require a police response. We have a lot of challenges in San Francisco and we truly appreciate and value our police department and the work that they do to serve and protect the people of this city. But, we also understand that there are some calls that they are not necessarily needed. And so, my preference is that when the dispatchers get the call, they make the decision sometimes for there to be the Street Crisis Response, or a police officer, or a paramedic depending on the situation.

Mayor Breed's statement characterized SCRT as being similar to a third branch of public safety - a standalone program meant to respond to situations in which neither police nor paramedics provide the most appropriate care. Both Kathleen Silk's and Mayor Breed's arguments point to a need to explicitly define and communicate non-police mobile crisis response teams' areas of focus in order to maintain and build community trust. Moreover, explicitly recognizing that police are not always the best response to mental health emergencies strengthens the arguments in favor of MCR teams as partial alternatives to policing; rather than addressing issues that police already solve effectively, MCR programs help to address a failure in the current policing system.

In contrast, my interviews with Lorez Meinhold and Gary Sanford revealed that Denver's STAR has similar origins to SCRT but differs slightly in how the program self-identifies. Lorez Meinhold is the executive director of Caring for Denver, the foundation that helps fund the STAR program and a number of other mental health initiatives. Gary serves as the foundation's Director of Community Engagement. Caring for Denver is funded by a ballot initiative passed in 2018 which established a 0.25% sales tax increase to be used to help residents struggling with mental health issues and substance misuse (Chido 2020). One of the other mental health programs Caring for Denver funds using the ballot initiative tax revenue is Denver's co-responder program, which has paired mental health clinicians with police officers to respond to emergencies involving mental health issues and substance misuse since 2016.

Despite the co-responder's advantage over traditional law enforcement responses in diverting a vast majority of individuals they respond to away from the criminal justice system, the feelings of distrust and fear many marginalized identities experience when police responses arrive still extend to the co-responder model. As Gary highlighted, "in the fall of 2019, [Caring for Denver] did a big listening tour and those who were unhoused talked a lot about how folks show up when folks are in crisis;" during their interactions with community members, Gary and other Caring for Denver staff found that inherently, there is a "tension for folks with mental illness or addiction issues" when police are involved in these responses. The results of this listening tour, along with the efforts of community activists, ultimately led to the creation of the STAR program.

Whereas Kathleen from SCRT took pride in operating outside of a co-responder model, Lorez expressed pride in the interconnectedness of STAR and Denver's co-responder model. Although STAR itself responds to calls without the presence of police, Lorez argued that the option to send either STAR or a co-responder team is what makes the program so successful:

There's a whole set of calls that STAR will never be able to respond to if it's violence to self or others. And I'll say law enforcement, while they get a section on de-escalation, they have no understanding of de-escalation and what that is, so that when they get to ride with a mental health provider and really see de-escalation in practice, it changes the way they practice and interact with people.

From the institutional perspective, in Denver, both STAR and the co-responder program contribute to minimizing negative interactions between police and citizens. STAR eliminates interactions with police when possible, and when police must be involved due to violence, the co-responder program enables mental health professionals to de-escalate potential hostile police-citizen interactions. However, Lorez's recognition of the failures of the current policing system to appropriately de-escalate crises suggests that involving the police through the co-responder

model is only a relative improvement within the confines of the current system rather than the first best policy option.

Additionally, Carleigh Sailon, the director of STAR at Denver 911 who also played a key role in establishing STAR, echoed Lorez's sentiment regarding the importance of the connection between STAR and the co-responder program:

I think that the co-responder team and STAR operate very well simultaneously. When police officers need to show up to a call because of a weapon or some sort of risk component or some sort of criminal justice issue, we still want clinicians showing up on those calls to provide support and resources to folks who may be in crisis posing some sort of public safety risk or something. So, sort of looking at creating a menu of options for crisis response in Denver, and that STAR can take those lower level calls where that seems safety component is an initiative.

Carleigh and Lorez's points both illustrated the complexity in attempting to replace all police responses to behavioral health crises with civilian crisis response teams; in cases involving active violence, civilian responders may be unable to safely de-escalate the situation. However, despite these potential benefits, Lorez noted that "they're still working...on what's that division between STAR and co-responder." The extent to which STAR and the co-responder program are interconnected at an administrative level points to a disconnect between STAR's anti-carceral philosophy and its close operational proximity to the Denver Police Department that is difficult to resolve. These results point to a need for cities looking to establish non-police mobile crisis response teams to weigh their desire to establish community trust in a non-police system against their desire to improve de-escalation tactics in as many contexts as possible. Even though the interconnected nature of STAR and the co-responder model may increase the variety and number of 911 calls that receive mental health responses in some capacity, publicly aligning the two programs, as both Lorez and Carleigh do, can limit the extent to which marginalized community members who distrust the current policing institutions feel comfortable contacting either service.



Additionally, Tim Black, the director of consulting at CAHOOTS, spoke to the program's approach to its relationship with the Eugene Police Department during the TA Coalition Webinar on Alternatives to Policing. On one hand, Tim stated that “verbal de-escalation and [the program’s] interactions and...uniforms” aim “to send a message that [CAHOOTS is] not traditional public safety.” In this context, Tim’s response situated CAHOOTS closer to SCRT’s status as a stand-alone police alternative for behavioral health crises; by highlighting the aspects of CAHOOTS that are distinct from police practices, the program hopes to build trust with community members.

Yet, on the other hand, later in the webinar, Tim also pointed out some of the ways CAHOOTS has worked with the police department to change practices:

By responding alongside officers, we get to role model. Show them how we approach the work. We see that as officers spend more time engaging with CAHOOTS, rather than standing over somebody, when they are talking to them, that we see they are getting back down on to the level, maybe squatting so they can make direct eye contact, so that the person they are talking to can see they are not reaching for their gun or taser. We provide opportunities for debrief after there's been critical incident. Sometimes that's resulted in pulling over in a Wal-Mart parking lot to talk about how rough that was with the officer and recognize for a moment that we are all human, as well as first responders.

As Tim Black noted, when the CAHOOTS program interacts with police officers in any capacity, police officers’ de-escalation abilities tend to improve. There is a clear distinction between the ways that STAR and CAHOOTS communicate their similar relationships with police that may significantly affect the community’s trust in the programs. Whereas STAR emphasizes the *STAR teams*’ reliance on the police to respond to certain types of crises, CAHOOTS emphasizes the *police department’s* reliance on CAHOOTS teams. While this semantic distinction may at first glance seem insignificant, public image plays a significant role in how community members view each program and their likelihood of trusting non-police mobile crisis response programs.

Thus, even though in practice, CAHOOTS teams would call for police backup in a violent situation similar to the way STAR would, CAHOOTS's emphasis on its anti-carceral characteristics rather than STAR's emphasis on its police-partnership characteristics makes the CAHOOTS program more effective in instilling community trust. These results highlight the importance of clearly defining non-police mobile crisis response programs as anti-carceral in nature. Yet, at the same time, some may argue that STAR's characterization of its program as a police partnership is more transparent; if STAR clearly communication the relationship between the police, co-responder, and non-police mobile crisis response teams, community members would not be surprised when police respond alongside mental health workers in a potentially violent situation. Therefore, when establishing and designing their non-police mobile crisis response programs, cities must strike a balance between transparent communications and communications that are more likely to create trusting community relationships.

Moreover, in my interviews and observations of webinars involving academic experts, most subjects were not satisfied with the conclusion that a police response or co-response is the only approach to potentially violent situations. Professor Alex Vitale, a professor of Sociology and the coordinator of the Policing and Social Justice Project at Brooklyn College, discussed the historical failures of sending any form of police response to mental health emergencies during a webinar hosted by the University of Chicago entitled *The End of Policing? Rethinking Public Safety in a Time of Crisis*. Vitale argued that:

Another area has been getting the police out of crisis response - responding to mental health, substance abuse, homelessness related crises. I think everyone appreciates the idea now that it is a terrible idea to send police. Between a quarter and a half of all people killed by police in the United States are having a mental health crisis and police are just simply the wrong agency to send.

Vitale's argument against sending police to mental health emergencies due to lack of appropriate mental health training and qualifications echoed the viewpoints expressed by community members and city officials that ultimately led to the creation of the non-police mobile crisis response teams in the first place.

However, Vitale's black and white depiction of the realities of police violence against populations suffering from mental illness highlighted the possibility that even a co-responder might be the wrong response to these situations. With the current models, cities only send MCR teams to low risk calls, where the possibility of violence is already relatively low. Therefore, dispatchers are still sending police responses (either co-responders or only police) to the situations in which police and residents alike are most likely to become violent; this fact calls into question the level of success current models will have in reducing police killings and other police violence in the long run. Although MCR programs may be an improvement to the current system, the seemingly inevitable involvement of police in violent situations (given the confines of the current public safety system) may limit the extent to which the 911 calls that most require non-police responses to reduce violence actually receive them.

During my interview with Professor Andrew Papachristos, a professor of sociology at Northwestern University, he noted the potential for mixed results in attempting to address violent situations through police alternatives that rely on civilian responses. For instance, Papachristos discussed the varied results of violence interruption programs so far:

Violence interruption is the idea that you use individuals with lived experience with violence...as ways to connect with people who are currently involved... We know they can reach people. We know they can connect people to services... We don't know if it reduces violence. What we do know, they reach people and we do know that the workers are severely exposed. I think we should be building that profession and improving it, but it's one of those ones where, does it reduce violence? And is that the outcome we care about?

Papachristos used violence interruption as an example of a potential tactic that programs like STAR, CAHOOTS, and SCRT might be able to use to respond to potentially violent situations without the presence of police, which would address many of the issues with maintaining community trust while effectively responding to violent situations. Yet, Papachristos's concerns about civilians being exposed to violence in these professions further emphasized the concerns for civilian safety in non-police response models expressed by proponents of Denver's co-responder program. Thus, until programs like violence interruption become more robust to the extent that they can be safely paired with a non-police mobile crisis response program, few feasible alternatives that entirely exclude police from violent crisis response currently exist.

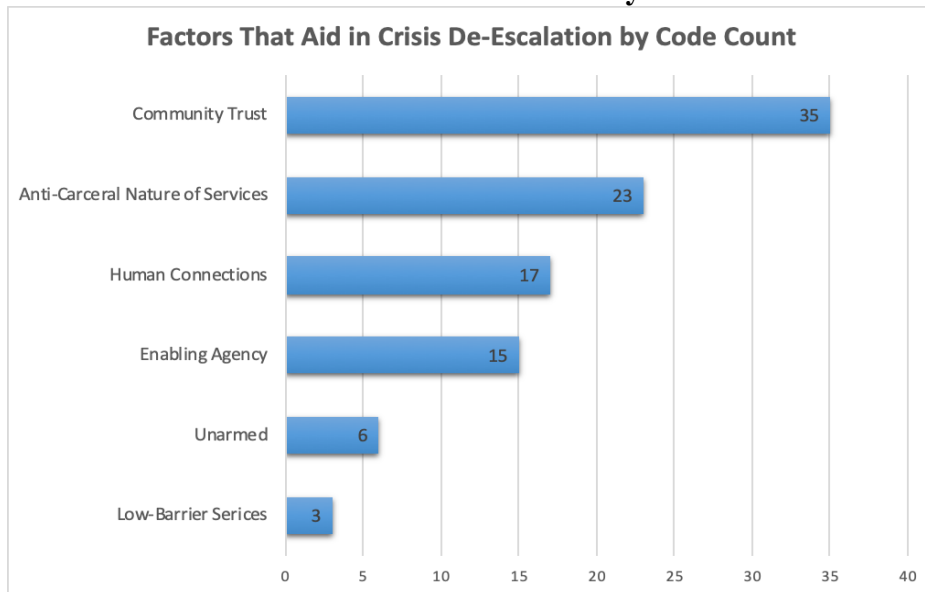
In almost every webinar, interview, and meeting analyzed, respondents highlighted the positive relationships their programs have with each city's police department. Lorez mentioned that focusing too heavily on the non-police aspect of the STAR program can harm the relationship between STAR and the Denver Police Department. As Lorez put it, "if you send an alternative response and police still show up" because of a lack of police buy-in to the program, "you've lost all the value and purpose." However, focusing too heavily on the police-partnership aspect of mobile crisis response also increases the possibility that the most marginalized members of society – those that would most benefit from non-police responses – may become fearful of the programs' ties to police and avoid engaging in the system at all. Based on these findings, it does not appear that SCRT, STAR, or CAHOOTS are ready to replace police responses in all instances. Yet, they can significantly reduce the number of police-citizen interactions, improve the de-escalation tactics of police departments, and replace police-citizen interactions that do not involve violence. Moreover, if new programs can strike a balance between dividing calls between police responses and non-police responses while still publicly

communicating their programs’ anti-carceral objectives, they can be effective in maintaining community trust and increasing mental health responses in many practical contexts.

## 2) Establishing and Sustaining Strong Community Connections

As alluded to in the previous section, connections with community members are vital to the success of non-police responses to behavioral health and substance misuse crises. Representatives from all three programs frequently discussed their approaches to creating strong community relationships. Figure 5 displays the main characteristics of non-police mobile crisis response programs that contribute to successful crisis de-escalation as described by participants.

**Figure 5: Factors That Aid in Crisis De-Escalation by Code Count**



As Figure 5 illustrates, establishing community trust was the most frequently mentioned factor affecting crisis de-escalation in non-police mobile crisis response teams. Similar factors highlighting the avenues for achieving trusting relationships were also frequently referenced, namely, emphasizing the anti-carceral nature of services, increasing humanity in interactions,

and enabling agency of citizens helped by the programs. Figure 6 displays the prevalence of the community trust code by program.

**Figure 6: Percentage of Community Trust Codes by Program**

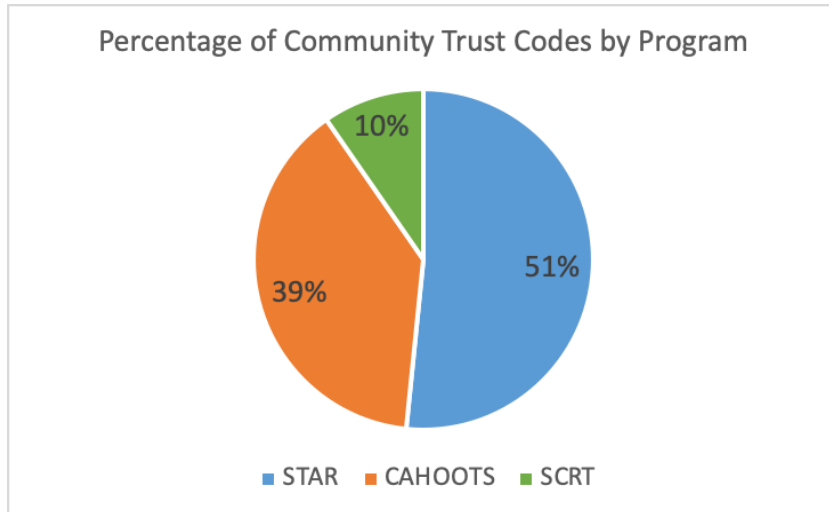


Figure 6 highlights that the theme of community trust was frequently discussed by participants associated with each program, but was more common in conversations about CAHOOTS and STAR than SCRT. Participants associated with SCRT primarily referenced the importance of establishing community trust in the early phases of the design and establishment process, while CAHOOTS and STAR officials also discussed the importance of continually building and maintaining trusting community relationships throughout the implementation process.

Because it is the oldest program, CAHOOTS has the most experience with building and sustaining trust with community members. Daniel Felts, an EMT and counselor for CAHOOTS, explained CAHOOTS’s reputation of mutual trust and respect in Eugene:

At least for our service, we've been around for over 30 years. So, the community knows that. They know when we show up, no one's gonna die...And so that's a great place to start from. If you show up and people feel less safe, it's going to be an uphill battle to de-escalate.

As Daniel mentioned, CAHOOTS’s relationship with the community is unique due to the long history of the program; as such, its strong trusting relationship with the community is one for

which new and emerging programs like STAR and SCRT should strive. Daniel also noted that one of the most important tactics he uses to build trust with residents on an individual level while riding on the CAHOOTS van is extremely simple, yet something that traditional law enforcement officials often neglect. “I like to introduce myself as a person...using my first name, which is shockingly uncommon,” Daniel said. In doing so, Daniel and other CAHOOTS responders treat residents with respect and communicate their role in attempting to help residents without creating unnecessary animosity.

Enabling residents to have agency in their interactions with CAHOOTS is another de-escalation technique Daniel uses frequently:

And I also like to tell people, you're in charge of this interaction. Like, if you don't want me here, I will leave. Like you can tell me to — and you know, depending on the client, I'll change how I phrase this — especially with people who are skeptical of systems and are really disenfranchised, sometimes it just really works to say like, you can tell me to fuck off at any point in time, and I will. As long as you're not going to kill yourself or someone else, like I will get out of your hair. And, people respond well to that.

Daniel pointed out a major distinction between MCR de-escalation tactics and police de-escalation tactics. Because civilian crisis response teams have no legal authority over residents they assist, the entire interaction is completely voluntary. This enables crisis responders to have honest and informational interactions with citizens, reduces the power differential that typically exists when residents are approached by public safety officials, and ensures that individuals feel safe when being connected to necessary resources.

While Daniel and his team at CAHOOTS had years to create trusting relationships with community members, teams at SCRT and STAR have each had just over a year to attempt to replicate these relationships. According to Kathleen, communicating with the public about SCRT and its services has been challenging for the program. In particular, she noted that “getting

people to understand when you call 911, it's not just police anymore" has been an important step in starting to form relationships between SCRT responders and residents. Without strong communication from SCRT to alert the community of its presence, distrust of law enforcement and cultural attitudes toward police might prevent individuals from accessing the program's services through 911. A peer support counselor with SCRT emphasized the role of the program in providing individuals who distrust institutions with alternative ways to receive behavioral health support from the city (San Francisco 2021). But, Kathleen also mentioned the difficulty in attempting to increase publicity given the program's relatively small region of practice in its early phases. According to Kathleen, "communication and public facing information has been a challenge" because people often say things like "I thought I would call 911 and I'd get SCRT but I didn't" due to the program's currently limited capacity. The issue of clear public communications is also complicated by the complex role police responses play in some violent contexts, as outlined in the previous section. Based on Kathleen's perspective, extensive public education campaigns about the services administered by SCRT can help newly established programs gain the trust of community members.

Like STAR and CAHOOTS teams, another way SCRT establishes community trust is by having team members wear casual clothing like t-shirts and hoodies with their program name when they respond to crises. This helps to signal to residents that the response team workers are themselves community members looking to help. However, without adequate advertising of services, these aspects of non-police mobile crisis response programs aimed at reducing carceral associations of programs could cause some community members in crisis who have not previously interacted with these programs to question their purpose and role in the city government apparatus. If an individual having a mental health crisis is approached by several



people not wearing traditionally recognizable public safety or public health clothing, citizens may become fearful of non-police mobile crisis response teams.

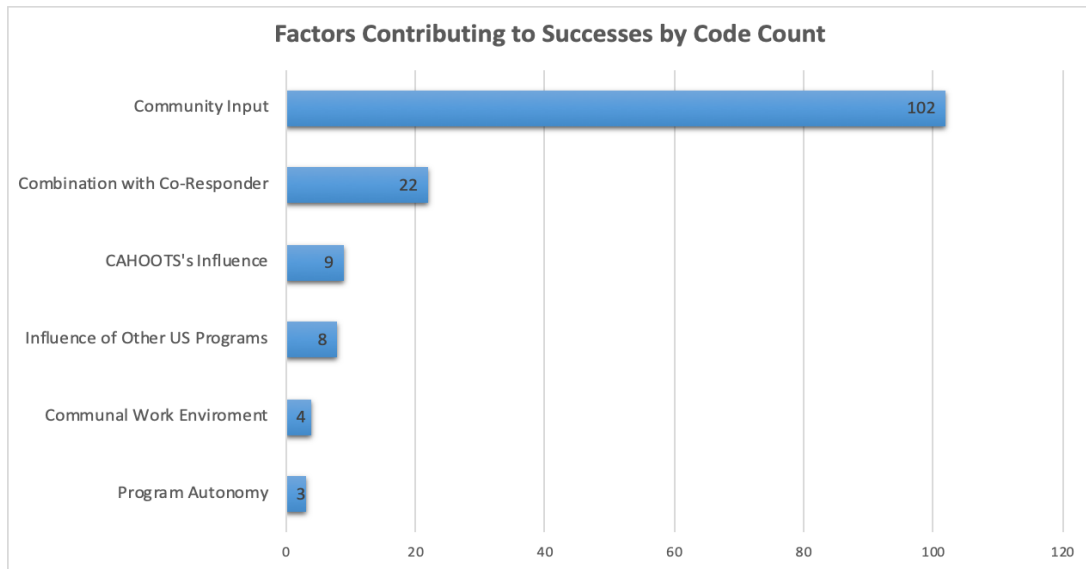
One way existing programs have reduced this possibility is by interacting with citizens during non-emergency situations as well. When teams are not directly responding to crises, SCRT units build community by driving through neighborhoods in their marked van and interacting with citizens on streets (San Francisco 2021). STAR uses similar techniques to connect with community members. By distributing supplies like socks, food, and shoes to unhoused populations on the streets when they are not responding to crises, STAR team members help to build trust and recognition of the program throughout the city. Additionally, as a new program, STAR has also faced dilemmas similar to SCRT's about when to start advertising their services to community members. As Carleigh Sailon of STAR mentioned during our interview:

We've always sort of struggled with when is the right time to do marketing. Because the last thing that we want to do is push out, far and wide, messaging of a program while we're still building capacity and bandwidth. The last thing I want is someone calling into the STAR line and... not getting a STAR response to that issue, losing faith in the program, and never calling back.

Carleigh's concern about reducing community confidence in STAR's services if lack of available teams results in a police response is one that any alternative response may face, particularly in the early implementation phase. Based on the experiences of SCRT and STAR, striking a balance between building capacity and communicating a new program's services to community members is vital to establishing trusting relationships. Thus, in any advertising campaigns newly established mobile crisis response teams make, clear messaging about start dates, geographic locations covered, and expansion plans is essential.

Another dimension of building strong community relationships is centering the voices of community members when making decisions about the program’s design, establishment and implementation. Figure 7 shows the great extent to which all three programs emphasized their consideration of community input during our discussions about their programs’ successes.

**Figure 7: Factors Contributing to Successes by Code Count**



As Figure 7 illustrates, community input was by far the most frequently mentioned factor contributing to the success of STAR, CAHOOTS, and SCRT, suggesting that community input and leadership in all phases of non-police mobile crisis response programs is what differentiates these programs from traditional policing and contributes the most to their success. This is consistent with the ultimate goal of non-police mobile crisis response teams to shift power away from historically oppressive policing systems and towards those that interact the most with these institutions.

STAR differs from CAHOOTS and SCRT in that, in addition to outreach efforts by crisis response teams themselves, the program also has a community advisory committee that meets monthly to discuss progress, responses from community members, and adaptations to be

considered. The committee is overseen by the Denver Office of Behavioral Health Strategies which lies under the Denver Department of Public Health and Environment (DDPHE). Although these meetings are open to the public, official committee members represent each district in Denver and contributed the most to these discussions. During my observations of six Community Advisory Committee meetings from September to March, I learned about many of the efforts employees of the city of Denver make to build relationships with and learn from community members.

Throughout all of these discussions, themes of community, privilege, power differences, and accountability frequently presented themselves. In particular, many of the committee members expressed concerns that the city officials who run the meetings fail to recognize the meaning and purpose of STAR's status as a community-led initiative. To support these claims, several members mentioned instances in which the committee provided recommendations which the city effectively ignored. Most notably, after community members worked together and wrote the advisory committee's official Core Values to be published through Denver Public Health and Environment, city officials removed one of the core values and published the list without consulting the committee. Specifically, the original core value that the city removed articulated that the STAR program should have Community-Driven Control:

CAHOOTS was a program that was initially started out of community efforts to create immediate response to urgent needs. Community-driven component of this program continues the spirit with which CAHOOTS was created that should in turn be embodied by the STAR program.

The unannounced exclusion of this value by the city officials without the knowledge of committee members added fuel to a months-long debate about the city's apparent lack of regard for the community's input in many situations.

Figure 8 below highlights the major themes regarding community involvement that arose in subsequent meetings as a result of this decision.

**Figure 8: Core Value Discussion Themes and Illustrative Quotes**

Figure 8. Concepts that emerged from observations of STAR Community Advisory Committee Meetings, with illustrative quotes. Community Members are denoted by CM and employees affiliated with the City of Denver are denoted as CD.

Theme	Meeting Date	Speaker Category	Quote
DDPHE's Ultimate Authority	9/14/21	City of Denver Official	"The city, as we put together programs like this, will always be involved...This program is going to reside within the Department of Public Health and Environemnt...From this point forward, this committee will and is hopefully creating the ability for the community not to be cut out and not to be left out and that as we move forward, that it comes not just from our understanding, but from also voices from the community" - CD1
Importance of Community Control	12/1/21	Community Member	"This program started in community and its success is because of community. And community is the foundational cornerstone of this entire program. Again, you can't leave us out... Do you understand why we would need the word control? Because historically we've had no control and no say and no autonomy, no advocacy. Can you understand why when we give you our work that we need to make sure that you're not going to screw it up in our name? ...There is a differentiation of power here, and community should have the power" - CM1
Importance of Community Control	12/1/21	Community Member	"Us being part of this committee already felt like an afterthought and a bone being thrown at us because of the amount of uproar that we created to be able to even have this seat at the table when we should've never had to work for it to begin with. And so if people have a chip on their shoulder in these meetings it's because the city created it" - CM3
DDPHE's Ultimate Authority	12/22/21	City of Denver Official	"From the perspective of DDPHE, we would be completely fine with... a core value that just says 'community driven' ...for the simple reason that the dictionary definition of the word control doesn't reflect the program as it is now situated in a city agency administered by the city agency and under that city agency's oversight" - CD1

The discourse outlined in Figure 8 about the STAR program’s core values highlighted both the importance and the difficulty of ensuring that community members have an active role in effective police alternatives. As Figure 8 illustrates, officials associated with the City of Denver attempted to walk the line between appeasing community members and establishing the city government’s ultimate authority over legislative processes and programs housed within the city government. At the first official STAR community advisory committee meeting, CD1’s attempts to both apologize for the removing the community-driven control core value and simultaneously affirm the city’s leadership of the program is reflective of DDPHE officials’ continued lack of true support for community leadership of the STAR program. While it is true that STAR is situated within a city department and that the city of Denver will always be the only party able to

pass legislative changes surrounding STAR, CD1's continued emphasis of DDPHE's control over the entire program oversimplifies the relationship community members were promised between themselves and city officials in the context of STAR.

Although STAR community advisory committee members cannot pass legislation the same way that city officials can, community members have argued that they can and should have a seat at every table related to STAR and be able to provide recommendations and feedback for all changes made to the program. Yet, at the 12/22/21 meeting, despite over three months of conversation with community members about the importance of true community leadership, CD1 continued to advocate for reducing the community's role in the program by replacing community-driven control with community driven in the core value statement. From the perspectives of community members, CD1 was effectively stating that community members can be consulted by city officials but will not have any significant level of influence or ability to provide their own proposals,

While the distinction between a "community driven" program and a program with "community-driven control" at first glance appears to be purely semantic, the perspectives of community members on this debate highlighted the substantive importance of this distinction. CM3's comment on the importance of community control highlighted the community's vital role in establishing the program and argued that this historical relationship is one reason community members should have control over the program. As CM3 described, it was the hard work and collaboration of community members, not DDPHE officials, that led to the establishment of the program. For months, community members held discussions brainstorming the potential implementation of police alternatives in Denver. Community members, not DDPHE officials, organized a trip to Eugene, Oregon to observe the CAHOOTS program in action and create a

proposal for adoption of a similar model in Denver. It was only from there, after community members did the work to prove the feasibility of a CAHOOTS like program in Denver, that city officials began to consider the implementation of such a program. Yet, as both CM1 and CM3 noted, even after playing a vital role in the establishment of the STAR program, the city attempted to exclude community members from influencing the program; community members had to fight for the establishment of a community advisory committee.

CM1's argument about the importance of historical relationships dates back to far before the establishment of the STAR program. When CM1 stated that, historically, marginalized communities have had no autonomy in policing and policymaking in general, they were emphasizing the important role STAR could have in changing these historical dynamics, if community members' perspectives were adequately considered by city officials. Thus, from CM1 and CM3's perspectives, DDPHE's removal of the community-driven control core value represented a shift away from community leadership and towards city officials leaving community members out of important decisions. Another community member, CM4 expressed pessimism that, given the initial shift in power that took place when the oversight of the program shifted from the Denver Department of Public Safety (DDPS) to the Denver Department of Public Health and Environment (DDPHE), community members would ever be able to regain control. CM4 discussed these concerns during the 12/22/21 meeting:

I understand what you're saying about the current realities of the program as it stands versus when that core value was originally written.... The disconnect here is that was not taken into real consideration as the program went forward. Now, we find ourselves in this position where that word control is no longer in any way, shape or form appropriate. But I think...it may have been possible previously. And now, it was removed arbitrarily, taken in a different direction...There's no potential for input from us that's going to change the current conception and reality of the program as it stands today.

As CM4 argued, the core values that were originally agreed upon by DDPS and the committee members were not adequately considered when DDPHE took over leadership. Since then, the community's faith in the city, as well as its influence over the STAR program, has continued to dwindle. Thus, for city officials attempting to establish non-police mobile crisis response teams, this situation highlighted the importance of establishing true community trust and keeping promises made to the community starting at the initial phases of the program's establishment. More so, the lack of the city leadership's consistency throughout the duration of the program further decreased the community's trust. Thus, this situation also highlights the need for accountability mechanisms to be created for public officials involved in non-police mobile crisis response programs to ensure that the community's voice is not lost.

After expressing their discontent with the current division of power in the STAR program, CM2 discussed ways that the city could help community members regain the power they desire over the committee and STAR program:

I wasn't sure about staying on this committee because - we're an advisory committee granted - but I felt like we're being fed stuff, but we're not leading....We need to have the opportunity, as a committee, to be actively involved in...the messaging....I think in our meetings that we need some time as a committee so that we organize ourselves, aside from everyone else joining in from the city.... I just want our voice to be as strong as it needs to be on behalf of our communities in our neighborhoods.

If, as CM2 suggested, community members set the agenda and led the discussion for portions of the advisory meetings, STAR could help ensure that the community perspective drives the meetings and the STAR program in general. As many members of the advisory committee discussed, from an observer's perspective (without knowing the details of this debate), the committee appeared to be almost entirely led by DDPHE officials. DDPHE officials set the meeting times and agenda and moderated each meeting; moreover, despite the title and stated purpose of the meetings, when community members outside of the committee attempted to ask

questions or raise concerns, they were told that non-committee members were only allowed to speak at the end of the meeting if time allowed. Out of six observations of community advisory committee meetings, non-committee community members were permitted to speak only twice. Thus, consistent with the viewpoints of many community members, much of the STAR program's emphasis on community participation was inconsistent with the actual operation of the committee and program in general.

Moreover, CM5's perspective on the issue highlighted the vitality of reforming the current leadership structure if DDPHE wishes to preserve community trust in the program:

If we're saying it's a community driven collaboration, it's nowhere near that. It's not a collaboration that has been driven by the community in terms of how these meetings have looked, what the program has looked like and expansion...And I don't know if we're getting anywhere close to that, especially given the extent to which we remain unheard on this issue.

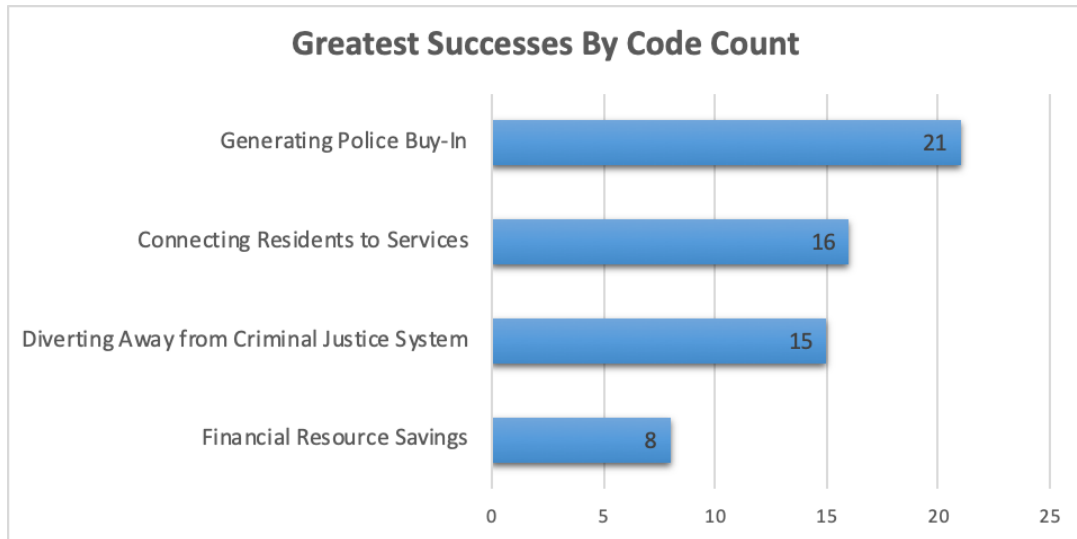
The comments of community members like CM5 highlighted their frustration with DDPHE's leadership and lack of consideration of community members' perspectives in a variety of contexts. In order to maximize community trust and willingness to provide useful insights to non-police mobile crisis response programs, the analysis of STAR, SCRT, and CAHOOTS points to a need to center community perspectives throughout the implementation process and design systems that are flexible and adaptable depending on community feedback.

### **3) Maximizing Connection to Culturally Appropriate Care and Diversion**

Throughout my interviews and observations, two main measures of the success of non-police crisis response programs emerged. Specifically, aside from police buy-in and financial resource savings (which will be discussed in section 4), as Figure 9 illustrates, diversion from the justice system and connection to care are important considerations that contributed to the success of the programs of interest.



**Figure 9: Categories of Greatest Successes by Code Count**



***A) Connecting those in Crisis to Culturally Appropriate Care***

One important function of non-police crisis response programs is connecting people suffering from short-term crises to services that can help them find longer-term solutions. During my interview with Kathleen from SCRT, she highlighted the importance of remaining “rooted in the community” when choosing “peer clinicians and mental health workers” with whom to connect community members; this intention is why SCRT decided to rely on community-based organizations for these roles instead of city employees. More so, given that San Francisco has an unhoused population of over 8,000, Kathleen highlighted SCRT’s crisis diversion programs that serve unhoused individuals:

San Francisco's lucky we have the crisis diversion programs. We have 24-hour places and we still don't have enough beds. We also have way too many people living on the street and we have a lot of them in crisis, and...there's still a need for more beds. And so, the city has heard that, the Department of Public Health is certainly working on it. Different individual organizations are working on that, but low-barrier crisis beds [are] huge. And then, ongoing permanent housing for people is a huge problem in our city. So those are barriers and those are not unique to Street Crisis, but it's highlighted in our work because it's very fast paced and it's very immediate need oriented.

As Kathleen described, the lack of adequate permanent housing opportunities throughout the city of San Francisco is a barrier to the success of SCRT in its goal to connect all residents with whom the team interacts to the resources they require. Like many new programs, the success of non-police mobile crisis response programs depends on the context in which it is established. If a city has strong social infrastructure and a variety of community-led mental and behavioral health services available, crisis workers can easily connect community members to the most appropriate care. However, if a city lacks a strong network of resources providers to connect those in crisis with, the ability for non-police mobile crisis response teams to improve the long-term conditions of clients will be limited.

Lorez Meinhold with STAR similarly highlighted the need for crisis response programs to provide individuals with access to long-term care and solutions to behavioral health issues to avoid getting stuck in a recurring harmful cycle:

We're trying to build out...those community partnerships. So again, it's great to help people while they're in crisis, but if we don't get them connected to care - whatever that care might be, whatever those resources, supports may be - then we're not really moving them out of this system. They get stuck.

As Lorez highlighted, creating a strong network of providers is vital to ensuring individuals served by crisis response teams have access to the resources they require. Adequate access to mental and behavioral healthcare can decrease the likelihood that individuals will require crisis-intervention services in the future; more so, establishing relationships between providers and residents helps to ensure that when community members are in a crisis, they have the support systems necessary to better address it.

Importantly, Lorez also discussed the importance of representation when selecting community partners with which to connect residents:

Given the diversity of the population being served, our Mental Health Center of Denver, the public provider for Denver of mental health services, they're not always the best fit for all of our populations for unhoused on house youth, for some people of color... And so, it's a recognition. What are those partnerships you need and where do you need to focus?...I think we're still really figuring it out.

Public health organizations funded and operated by the city serve many communities, but are not the most effective resources for all individuals. For people who refuse care because of distrust in government institutions or lack of cultural representation in city programs, alternative community health providers are a necessity. Thus, as Lorez noted, it is important for non-police mobile crisis response programs to consider cultural fit when determining the best services to refer residents to.

The Harm Reduction Action Center (HRAC) is one such program that works closely with the STAR program. My interview with Lisa from HRAC illustrated the need for strong connections with community-based organizations that specialize in the needs of communities commonly served by mobile crisis response teams. Through her role at HRAC, Lisa runs “the state’s largest syringe exchange program” which aims to replace shame, incarceration and other punitive responses to substance misuse with a more person-centric approach that “meets people where they are at.” Importantly, HRAC, like STAR’s other community partners, has an anti-carceral philosophy and targets its resources toward historically marginalized groups. Lisa described the reciprocal nature of HRAC’s relationship with STAR:

I can usually de-escalate my clients because they know me but random people often don't care about my services. We will only call STAR in the case of an extreme emergency and often to diffuse other folks from calling 911. We've also done tours of my agency for their staff so they can do referrals out in the field. Connections to our orgs are essential because many folks need to be referred to the experts. So, if someone injects or smokes drugs, I want them coming to us.

As Lisa described, community partnerships with non-police mobile crisis response teams provide significant benefits for both types of programs and strengthen the networks of mental and

behavioral health care cities offer. Crisis responders require these relationships to connect people in crisis with experts who can offer them informed and sustained long-term service options. Community resource providers like HRAC rely on STAR to de-escalate extreme crises to which police previously responded.

This need for mental and behavioral health resources with strong community connections is what led to the establishment of the White Bird Clinic, the health center under which CAHOOTS is housed. According to Tim Black, the White Bird Clinic’s recovery services utilize the “induction model, recognizing [that] there isn’t one clear path to recovery...and that we need to be able to meet people where they are at.” The interconnected nature of CAHOOTS and the White Bird Clinic enables CAHOOT’s crisis responders to seamlessly refer residents to free, culturally competent care. However, as previously mentioned, the availability of comprehensive and culturally appropriate resources provided by the White Bird Clinic in Eugene is the exception, not the rule. Most cities do not have clinics like the White Bird Clinic that have established strong community relationships for decades; thus, cities that lack similar resources may struggle to connect citizens with community-based care. In fact, in such areas, it could be argued that the publicly funded and run mental and behavioral health services are better equipped to deal with many crises.

While, as representatives from all three programs have highlighted, representation plays a significant role in the success of behavioral health interventions, connecting individuals to a well-resourced program may be more effective than prioritizing culturally relevant care at the sake of quality. In an ideal world, all cities would have access to many organizations like the White Bird Clinic and the Harm Reduction Action Center to connect individuals in crisis with, but when these resources are not available, non-police mobile crisis response programs may be

less effective at increasing access to behavioral health care for historically marginalized populations. Analysis of the community partnerships of all three crisis response programs of focus highlighted the importance of going beyond conventional mental health systems to provide appropriate care to the communities they serve. Populations who have been historically disenfranchised and excluded from countless public institutions require and deserve access to health services they can trust; by partnering with, supporting, and helping to expand these services, non-police mobile crisis response programs can help ensure residents' access to appropriate care.

### ***B) Success in Diverting Individuals Away from the Criminal Justice System***

Another vital goal and success of non-police mobile-crisis response programs is diverting individuals with whom they interact away from the criminal justice system. As Lorez from STAR noted, STAR and other non-police mobile crisis response programs arose out of city officials, community members, and community-based organizations asking themselves how they could “divert folks with mental health and substance misuse away from the justice system.” In practice, diverting away from the criminal justice system generally entails de-escalating a crisis on-scene and enabling the individual to remain in the community; however, in more serious cases, diversion can also include transporting an individual to a hospital or other service provider for immediate mental and behavioral health care.

Figure 10 illustrates the diversion rates and rates of police being called for backup for all three programs as reported through interviews, community advisory committee meetings, and their respective websites.

### **Figure 10: Diversion Rates as Published by Programs**

Figure 10: Diversion Rates as Published by Programs			
Program	Diversion Rate	Not Diverted (Citations, Arrests, etc.)	Percentage of Calls Requiring Police Back-Up
SCRT	100%	0%	0%
CAHOOTS	98.5%	1.5%	1.5%
STAR	100%	0%	0%

Supplementary data for Figure 10 from: (Eugene Police Crime Analysis Unit 2020).

The statistics displayed in Figure 10 appear to highlight the great success of non-police mobile crisis response teams in diverting individuals away from citations, arrests, and other involvement with police due to crises. Specifically, STAR and SCRT have thus far reported 100% diversion rates while CAHOOTS reported a 98.5% diversion rate. CAHOOTS’s diversion rate illustrates the potential success of a long-established program in reducing arrests and unnecessary interactions between police and citizens. Even though the demographics and crime rates of Eugene, San Francisco, and Denver differ greatly, the current diversion results suggest that non-police mobile crisis response programs can significantly reduce police-citizen interactions that often previously resulted in violence and incarceration.

Yet, while it is true that all three programs have had high rates of diversion and low rates of requiring police back-up thus far, it is also important to note that SCRT and STAR have been operating for less than two years; thus, it is likely that their 100% diversion rates will decrease with time as the programs begin to expand to other geographic areas. Additionally, the variety of dispatch options available in each city also slightly dampen the meaningfulness of the programs’ diversion rates. Non-police mobile crisis response teams only respond to non-violent crises where arrests may have been rare regardless; therefore, diversion rates may not provide conclusive evidence about the programs’ capacity to reduce arrests relative to law enforcement. For example, while Lorez mentioned that “100% of folks were diverted away from the justice system” through the STAR program, she also noted that Denver’s co-responder program results

in “about 2% [ending] up with citations or outstanding citations.” Therefore, particularly when evaluating systems as connected as STAR and the co-responder model, it is important to consider the broader context of such programs.

Even program administrators of STAR were hesitant to accept the 100% diversion rate they calculated from the available data. As one program administrator discussed during the October community advisory committee meeting,

I don't want to just say that because STAR showed up, we're diverting a hundred percent of people, you know, I don't know if they would have gone to jail. We need experts to come in and to be able to, to show us really factual data on what would have happened if not for STAR, what did happen because STAR was there.

As the STAR program administrator highlighted, all three programs require rigorous evaluation of their impact prior to being able to make any concrete claims about their long-term impacts on diverting individuals from the criminal justice system; attempting to establish counterfactuals to the current trends is difficult given the limited volume of data, but would help to ascertain the causal effect generated by non-police mobile crisis response programs. Thus, other cities should be hesitant to view the stated success of STAR, CAHOOTS, and SCRT in diversion as predictive evidence. More so, although efforts were made to choose three cities with vastly different populations in order to increase the generalizability to other areas, each city has its own unique demographics, crime rates, unhoused populations, and incidence of mental and behavioral health issues, which will all affect the diversion rate of their programs.

Nevertheless, despite the lack of concrete quantitative empirical evaluations of the success of non-police mobile crisis response programs in achieving this goal, anecdotal evidence provided by Daniel Felts of CAHOOTS suggests that, unlike the current system, non-police mobile crisis response workers do everything in their power to divert as many people from the criminal justice system as possible. According to Daniel,

Just because the power dynamic isn't quite as stark, that's not to say that there is not a power dynamic. There's always going to be a power dynamic with a provider client relationship, and I'm also wearing a police radio. So, if I need police there and I'm on shift, I can summon them, oftentimes in less than a minute. So, that is still there, but we try to be really sensitive to that and we don't call the police often. I think one out of a hundred times we have an interaction with somebody we have to involve the police. Only ever out of an immediate concern for someone's safety, someone is actively attempting suicide, or someone is actively attempting to harm someone else... But, by our existence, by our bylaws, our philosophy we're inherently anti carceral.

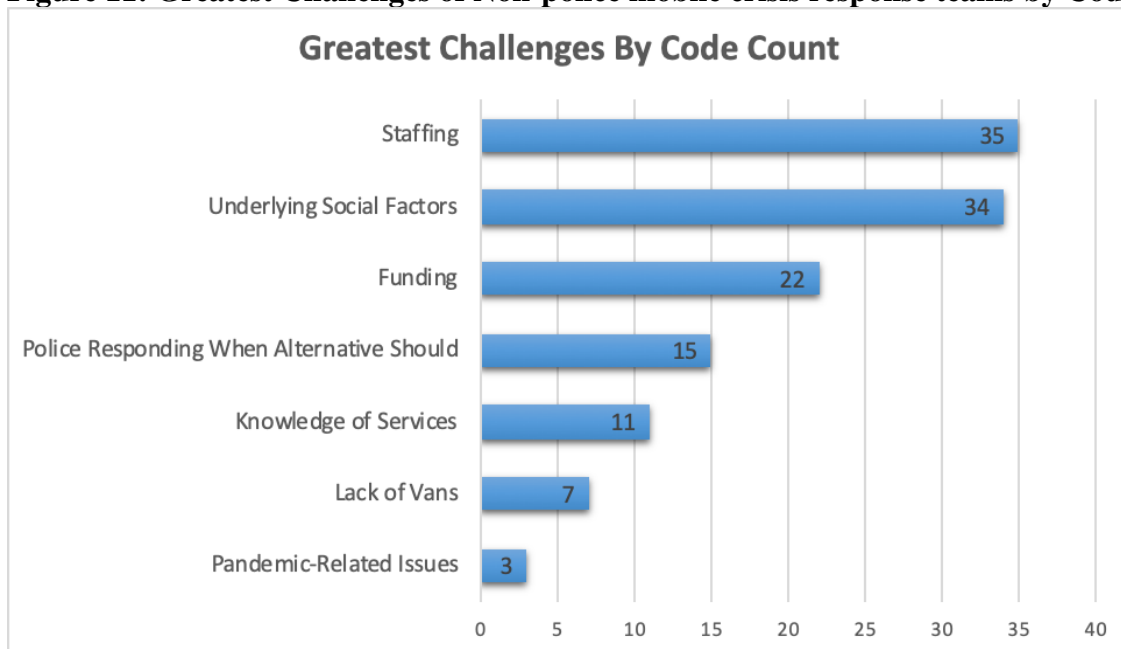
In Daniel's experience, mobile crisis responders recognize the historical relationships of distrust and violence between police and marginalized communities and are trained to prioritize diversion from the criminal justice system by avoiding calling police for backup whenever possible. Whereas the current policing system spends significant resources citing and arresting many individuals in crisis, non-police mobile crisis response teams use their resources to connect with and de-escalate community members, which inevitably causes decreases in police-citizen interactions.

#### **4) Structural Barriers of Staffing, Funding, and Underlying Social Failures**

Despite demonstrated successes in connecting individuals to care and diverting them away from the criminal justice system, there are many challenges non-police mobile crisis response programs must overcome to maximize the effectiveness of their programs in these goals. Figure 11 displays some of the greatest challenges CAHOOTS, STAR, and SCRT have faced in implementing their programs as described by participants.



**Figure 11: Greatest Challenges of Non-police mobile crisis response teams by Code Count**



As Figure 11 illustrates, staffing, funding, and underlying social factors were a few of the main barriers to successful implementation discussed by individuals affiliated with the three programs. Several of these challenges feed into each other; for instance, lack of qualified staffing limits the success (and therefore funding) of non-police mobile crisis response programs. Yet, at the same time, lack of funding limits the extent to which programs can hire and retain qualified staff. To increase the widespread feasibility of non-police mobile crisis response programs, communities and policymakers must work together to attempt to address these issues.

***A) Hiring and Retaining Qualified and Diverse Staff***

Staffing was the challenge most frequently mentioned by mobile crisis response programs; crisis responders, program administrators, and community members expressed the difficulty and importance of finding and retaining qualified staff. Each program had a slightly different definition of what backgrounds made individuals qualified to work on crisis response teams. Tim Black highlighted the staffing requirements of CAHOOTS during the TA Coalition Webinar:

Our staff teams are made up of a crisis worker and EMT. Our crisis workers don't need to be a licensed clinical social worker. We are not looking for mental health professionals. The basic requirements for entry as a crisis worker for CAHOOTS [are] a combination of education and experience that would qualify you to be credentialed as a mental health associate in the state of Oregon...Regardless of what your background is, there's going to be about 30 hours of instruction in the classroom, followed by 500 hours of field training.

Tim emphasized the importance of practical experience in mental health work above specific education degree requirements for mental health workers riding on CAHOOTS vans.

Additionally, while the mental health workers need to have a background in the subject, much of crisis de-escalation requires adaptation to real-world situations; thus, Tim also highlighted the significant role training plays in ensuring CAHOOTS staff is qualified to help serve the needs of community members in crisis.

While this approach may increase the number and diversity of staff eligible to work with CAHOOTS, critics might argue that straying too far from traditional mental health worker qualifications and EMT certifications could decrease the effectiveness of CAHOOTS in successfully de-escalating crises and providing quality mental health care. Yet, there are many instances in which formal education does not translate to improved ability to execute job requirements; for instance, even though police officers must meet degree requirements, many would argue that some officers are ineffective at many aspects of enforcing public safety. Thus, particularly in the case of crisis intervention, which requires skills of quick thinking and adaptability, significant training programs may be sufficient to ensure a high-qualified staff.

In contrast, during the September 2021 Community Advisory Committee Meeting, a program administrator from STAR communicated STAR's differing stance on official qualifications of mental health clinicians:

The clinicians currently working on STAR, the clinicians that are being hired, [are] licensed or near licensure. As we get additional staff, there'll be room to potentially open that up from such a high-level, credentialed clinician. The thought behind that was that if

a mental health hold needed to be initiated and STAR was there, and the person wasn't licensed, it would wind up calling the police to initiate that hold. And we just didn't think that that makes sense for this program.

STAR's policy recognizes one potential complication that can arise from CAHOOTS's less stringent education requirements; if an individual needs to be held for involuntary psychiatric hospitalization due to an extreme mental health crisis, the law requires that a licensed mental health worker or a police officer initiate that process. Thus, when CAHOOTS workers are not licensed, police back-up will always be required in situations involving involuntary psychiatric hospitalization. This characteristic of the CAHOOTS program might be one factor contributing to the lower diversion rates of CAHOOTS compared to STAR and SCRT. Situations involving a psychiatric hold, while rare, can be arguably the most volatile situations to which non-police mobile crisis response programs respond; therefore, over time, data might suggest that CAHOOTS's approach to qualification requirements decreases the ability of the program to reduce police violence against those experiencing mental health emergencies.

Unlike CAHOOTS's approach, STAR's licensure requirement helps to minimize interactions between police and community members in extreme crises, which is a vital step in preventing potential escalation and violence. However, a STAR program administrator also mentioned the difficulty in striking a balance between having staff be "self-reliant in the field" through hiring "high level prudential clinicians" and ensuring "diversity in hiring and staffing." All three programs frequently discussed the vital role representation of identity and experience has in the success of their programs.

Daniel from CAHOOTS provided the perspective of a crisis worker on the topic:

I think [it] is so essential that you have adequate representation and it's not just relegated to this world of people with master's degrees in social work. Some of the best CAHOOTS workers, maybe they get degrees later in their careers...I currently don't have a bachelor's

degree, and it's work that I'm very passionate about from my own lived experience, and work that I am effective in. I think that is getting missed by a lot of cities. And, I think that one of the secret elements of CAHOOTS is that there's a lot of people who work here that grew up here. And, there is a high degree of certifications and book learning and liabilities and boxes that need to be checked. But, that lived experience is also like totally, totally precious.

As Daniel highlighted, non-police mobile crisis response programs face a tradeoff between minimizing police-citizen interactions in extreme mental health crises that involve involuntary hospitalizations and prioritizing representation of identity and experience in hiring processes. A balance between the approaches of STAR and CAHOOTS regarding representation and required qualifications was illustrated in SCRT's design. As Kathleen mentioned, SCRT involves "a paramedic, a mental health clinician, and somebody with lived experience" riding on the SCRT vans. By having both a mental health clinician and a peer support counselor with lived experience with mental and behavioral health on SCRT teams, SCRT is able to avoid requiring police back-up for situations involving involuntary hospitalizations and still prioritize community representation. These results point for CAHOOTS, STAR, and new programs to consider adapting their program designs to include a peer health specialist or person with lived experience in order to build strong community connections while checking the required legal boxes previously discussed.

In addition to hiring qualified clinicians, another staffing difficulty discussed by community members, crisis workers, and program administrators was high turnover rates of mobile crisis response team members caused by burnout. Figure 12 illustrates a few of the perspectives participants provided on this subject.

**Figure 12: Staffing Concerns Themes and Illustrative Quotes**

Figure 12: Concerns about staffing that emerged from observations of STAR Community Advisory Committee Meetings, Webinars, and Interviews by theme.

Program	Theme	Data Source	Speaker Category	Quote
CAHOOTS	Burnout	Interview with Daniel from CAHOOTS	Crisis Response Worker	"Something that contributes to burn out is, you'll come on shift and we're a 24 hour service...So, sometimes I come on shift...there's 16 calls for service holding. And some of them have been waiting for 5, 6, 7, 8, 9, 10 hours. And so... if we had more robust staffing, we would be in a better place, but...we keep trying to expand our service hours, but then invariably, we'll kind of lose staff and it also gets to this place where it's like you're social work staff, but then you end up working yourself to death."
CAHOOTS	Burnout	Interview with Daniel from CAHOOTS	Crisis Response Worker	It's nonstop. It's 12 hour shifts and... when I came to the team, I was making \$15 an hour to do this work...So we have people quit all the time to go to nursing school, to go to PA school, to get a master's in social work, not because they don't love the work, but because there's no way to kind of save money to the point where you could ever like buy a home or comfortably afford everything you need for having kids, or just kinda like general life stuff."
CAHOOTS	Approaches to Minimizing Burnout	Webinar	Program Administrator Webinar Panelist	"The environment can be traumatic at times and we need to pay attention to the impacts on new staff and we try to create a supportive process."
STAR	Approaches to Minimizing Burnout	Community Advisory Committee - September	Program Administrator 1	"So far we have it scheduled for a 12 hours a day, three days a week, rotating weekends. We did that specifically to promote mental health and being able to check out of crisis based jobs, four days or five days. That way we can have longevity with people."
STAR	Approaches to Minimizing Burnout	Community Advisory Committee - October	Program Administrator 2	"The responder program has been running since 2016 and has several clinicians that do the same sort of work just alongside police. And we have had very low turnover on that team, really prioritizing staff wellness."

As Figure 12 highlights, long hours of responding to mental and behavioral health emergencies take a significant toll on providers, resulting in burnout and high turnover rates. Specifically, as Daniel Felts discussed, the lack of robust staffing simultaneously decreases the responsiveness of non-police mobile crisis response teams and increases staff burn out. Long response times pose a significant problem for non-police mobile crisis response teams because they specialize in immediate crisis de-escalation; thus, if, as Daniel alluded to, a person in crisis has to wait several hours before receiving the mental health response they need, communities’ access to the care of non-police mobile crisis response teams is significantly negatively affected by lack of adequate staffing.

In contrast, as Figure 12 highlights, Program Administrator 2 claimed that employee turnover may not be as significant of an issue for STAR as it has shown to be with CAHOOTS, specifically arguing that in the eight years that the Denver co-responder program has been in

operation, they have not faced significant turnover issues for mental health staff. Yet, it is possible that one of the reasons the co-responder program has faced fewer issues with turnover is that when mental health workers respond with police, a well-recognized and armed authority, they may experience less trauma or fear of their safety than with the non-police model Daniel commented on. It is also likely that in some instances, particularly in a public forum setting, those involved in the leadership of these programs have an incentive to emphasize the successes while minimizing the potential failures the program has experienced

Additionally, Daniel highlighted another factor that limits the retention of crisis response staff. Namely, he noted that the low salaries provided by mobile crisis response teams compared to other healthcare providers is a factor contributing to high turnover rates. As Daniel described, even though many mobile crisis responders are passionate about the work, the major pay discrepancies between working as a crisis responder compared to working as a nurse, physician's assistant, or other medical worker causes many individuals to seek greater training and transfer fields. A Webinar Panelist Program Administrator highlighted that MCR team leadership members are aware of these burnout and transfer trends and attempting to create supportive environments for new staff to reduce the potentially traumatic effects of the job. Specifically, Program Administrator 1 discussed efforts STAR has made in an attempt to increase staff wellness; by reducing the number of hours crisis workers work per week and providing support systems to minimize burnout, STAR hopes to improve employee retention, which would improve the quality of their services.

Yet, the solutions posed by program administrators fail to address the biggest reason Daniel argued his colleagues were leaving non-police mobile crisis response: money. Without significant increases in funding translating to higher salaries, these results suggest that non-

police mobile crisis response programs will continue to be short staffed. If these programs can strike a balance between appeasing staff members through workplace improvements for a significant amount of time, they may be able to increase the success of their programs at reducing arrests. Down the road, this success could translate to increased public funding for their programs, enabling them to increase salaries and better retain qualified staff.

### ***B) Establishing Sustainable Funding Sources***

An essential component of scaling up non-police mobile crisis response teams is funding. In order for these programs to function as potential alternatives to policing, funding must come from police department budgets. Currently, CAHOOTS is the only program that was studied that receives funding from the police department's budget. Specifically, CAHOOTS's \$2.1 million annual budget comes from the Eugene Police Department's budget and represents less than 2% of EPD's total budget (Beck et al. 2020). SCRT receives its \$13.5 million budget through the City of San Francisco under the Mental Health SF initiative (San Francisco Department of Public Health 2021). STAR's funding of \$3.9 million comes from Caring for Denver and general funds from the City of Denver (Schmelzer 2022). Lorez from STAR discussed the reasoning behind acquiring funding from alternative sources rather than police department budgets:

In order for STAR to work well, in order for these alternative responses to work well, you have to have the buy-in of public safety and police...And some of the challenges — not that we have run into because Caring for Denver was able to be a funding source — but in a lot of other places, the way they want to build the alternative police response is by defunding the police. And that...sort of then starts to work against what you need in order to make it succeed.

From Lorez's perspective, programs that divert funding away from the police struggle to gain police buy-in, which Lorez described to be an essential component of success. Lorez argued that by securing outside funding, STAR and other programs are able to generate police buy-in for the program and avoid police non-compliance in newly established systems.

In contrast, Professor Papachristos argued that, given the realities of police violence in many communities, this framing might not be necessary:

I don't think you wait for buy-in from the police. You tell police what to do and they do it. Period. It is not a democracy... Trying to change the hearts and souls of police officers should not be the goal of police reform. It should be changing behaviors, because otherwise it's gonna never happen... Police are going to be, need to be instructed, 'we're doing this program, you will cooperate, and if you don't, you're gonna not be here... or we're going to shift you to some crappy job that you don't want to do ... This is what it means in our department. You don't like it, too bad.' There's no changing police officers' minds, in my opinion, we're way past that.

Professor Papachristos's perspective is useful when considering the potential implementation of non-police mobile crisis response programs in cities that are less progressive and receptive to change than Eugene, Denver, and San Francisco. In other areas, STAR's approach of attempting to generate police buy-in prior to changing funding allocations may never result in the desired attitudinal changes, particularly at the individual officer level. More so, this approach could limit the effectiveness of non-police mobile crisis response programs by limiting available funding; if outside sources become unwilling to finance a program like STAR indefinitely and no efforts have been made to seek funding from police officers, issues caused by limited funding may be further exacerbated, resulting in decreased effectiveness and even higher turnover rates.

Instead, Professor Papachristos argued that buy-in of police leadership, rather than the entire force as Lorez suggested, is what is necessary for successful implementation. According to Papachristos's argument, as long as police leadership is in strong support of reforms, police cooperation with non-police mobile crisis response programs can be achieved through disciplinary measures as necessary. However, Papachristos's argument does not address the course of action that should be taken regarding funding when no one in the police leadership supports the implementation of non-police mobile crisis response teams. In these situations, it may be beneficial to combine the two extremes of the viewpoints expressed by Lorez and



Papachristos. Instead of completely avoiding police funding in any capacity or immediately forcing police leadership to adopt these programs, the combination of their analyses points to gradually increasing the funding that comes from police department budgets as non-police mobile crisis response programs continue to save police departments millions of dollars each year (see Policy Recommendations). This would enable gradual increases in officer buy-in from the non-police mobile crisis response programs proving their success while still securing adequate funding sources. Diverting funds from police involves recognizing the financial benefits non-police mobile crisis response programs can achieve and avoids the potential for these anti-carceral programs to result in increased policing in other areas due to the cost savings provided.

### ***C) Complications Resulting from Underlying Structural Factors***

In addition to these issues, non-police mobile crisis response teams face other complications that need to be addressed for successful widespread implementation. Underlying social factors affect non-police mobile crisis response programs' capacities to help historically excluded groups. Attempting to address mental and behavioral health crises at the street level inherently involves grappling with the systematic failures that cause these crises to be so common. Namely, racism, poverty, lack of affordable housing, and lack of adequate mental and behavioral health services are just a few of these failures that contribute to the high percentages of unhoused populations and widespread untreated mental and behavioral health issues observed in the United States. As Tim Black from CAHOOTS stated:

It's important to recognize, many of the crisis situations that we encounter on CAHOOTS are related to access to basic needs, whether that's a safe, reliable place to sleep, getting food, access to hygiene resources. That's why we recognize the role that poverty plays.

According to Tim, recognizing the influence of these social failures can help to increase the capacity for non-police mobile crisis response programs to address them. Yet, as discussed in the context of community resource provision, failing public resources that non-police mobile crisis programs connect individuals to can limit the success of these efforts.

One way non-police mobile crisis response programs attempt to more concretely address social factors is by providing individuals with immediate access to resources they may need like food, clothing, and shelter. However, until city, state, and federal governments work together to address these broad social issues, non-police mobile crisis response teams will be forced to continue to retroactively respond to the impacts of failing social systems. For instance, community member at a STAR Community Advisory Committee Meeting in February mentioned that:

Almost  $\frac{3}{4}$  of the calls that come into STAR are for an unhoused neighbor...If we can really quantify what we're spending in managing people who are unhoused, rather than moving people into housing, we could free up almost  $\frac{3}{4}$  of what we're doing in STAR so that we can expand alternatives to policing...to people who actually need the mental health services.

As this community member highlighted, non-police mobile crisis response teams could significantly expand the reach of their other mental and behavioral health services if adequate permanent housing was provided for unhoused residents. However, correction of this and other major social challenges requires significant funding and the establishment of effective social infrastructure systems, which both appear to be unlikely in the short run.

Furthermore, distrust in public institutions due to these historical failures and the prevalence of police violence impact the extent to which non-police mobile crisis response programs successfully reach community members. Currently, all three programs require residents to access their services by calling numbers connected to the police in some capacity:

either through 911 or non-emergency public safety numbers. Tim from CAHOOTS articulated the difficulty in reaching intended populations through the current system:

All calls for service are routed through the non-emergency public safety dispatch system...for CAHOOTS. You fall into this basic phone tree. And that means, while it's accessible to anyone that has a phone, it does require folks in crisis to have a certain level of privilege...you have to be comfortable calling the public safety system when you're in crisis, in order to access CAHOOTS in our community.

According to Tim, many communities feel uncomfortable calling the police and programs that are associated with police departments because of histories of police brutality. Additionally, by requiring individuals to call 911, where police presence is always a possibility, even individuals facing an emergency that wouldn't require police back-up may be discouraged from attempting to receive assistance from non-police mobile crisis response teams.

Because of this issue, Kathleen mentioned that SCRT is currently shifting away from the police dispatch side of 911:

We're currently using police dispatch, but we are scheduled to utilize medical dispatch. And, that would actually increase our impact of diverting all behavioral health calls from law enforcement, because the backstop right now, when somebody calls 911...and dispatch puts it out to SCRT. SCRT might say, 'that's not in our scope [or] we don't have a team available.'...The backstop currently is that then police are dispatched. When we go to the medical dispatch system, EMS or an ambulance with... paramedics would be dispatched instead of SCRT. The backstop of police has been completely removed.

As Kathleen and Tim both argued, the mechanisms through which individuals contact non-police mobile crisis response teams play a significant role in who is able to access services. A system like the one outlined by Kathleen, which changes the default from public safety to medical responses, can help to minimize the likelihood that an individual attempting to receive care from a non-police mobile crisis response team is ultimately met by police. However, because this dispatch model differs from traditional ones, providing public education about the system is vital to its success in establishing community trust in crisis response team programs.

Additionally, critics might argue that even SCRT's proposed dispatch solution might not be enough to overcome some communities' distrust of public institutions. As Lisa from Harm Action Reduction Center highlighted, the problem of oppression of marginalized groups by public institutions is not limited to policing. Rather, in Lisa's experience working in substance misuse assistance, she found that oftentimes, "many paramedics are not very kind, loving, and generous," which she argued is "one of the many reasons folks don't call 911 in the event of an overdose." Thus, the utilization of any public safety systems as backstops in the case of lack of available resources runs the risk of preventing some segments of communities from engaging in the system entirely. Therefore, these perspectives highlight the necessity for future non-police mobile crisis response teams to make every attempt to expand their resources and respond to as many eligible calls as possible without other public institutions in order to improve community trust and safety.

## **POLICY RECOMMENDATIONS**

Given the findings of this analysis, cities across the country should seek to implement mobile crisis response units. Mobile crisis response programs should target their services toward unhoused populations, individuals struggling with substance misuse, and those facing other behavioral health issues. While non-police mobile crisis response programs cannot solve all the issues in the criminal justice system, they can improve access to mental health care and substance misuse treatment, have widespread success in diverting individuals away from the criminal justice system, and provide marginalized communities with access to culturally appropriate resources. This case study also highlighted the challenges associated with establishing these programs. To overcome current barriers limiting the large-scale success of

mobile crisis response programs, cities should: 1) establish clear protocols for determining appropriate responses to different categories of crises; 2) emphasize community leadership in their design; 3) partner with community behavioral health providers for appropriate long-term care, and 4) devise funding plans that gradually increasing funding from police department budgets. Additionally, cities with non-police mobile crisis response teams should commission regular third-party analyses to determine the success of their programs.

**1) Relationships with Existing Systems: Division of Crises to Different Responders**

Clear dispatch policies are required to ensure community trust and confidence in mobile-crisis response teams. Lack of adequate staffing, insufficient program hours, and the potential threat of violence are a few reasons that police or a co-responder team (police and member(s) of non-police mobile crisis response teams) may respond to crises that would otherwise fall in the domain of non-police mobile crisis response teams. As discussed by interview subjects and community advisory committee members alike, residents lose faith in these programs when police or co-responders are dispatched to a situation the caller thought would warrant a non-police response. Several interview subjects associated with STAR raised strong arguments in favor of pairing mobile crisis response team programs with co-responder models. Rather than having the default for crises potentially involving violence be police responses alone, establishing co-responder programs allows these teams to serve as the default for potentially violent situations.

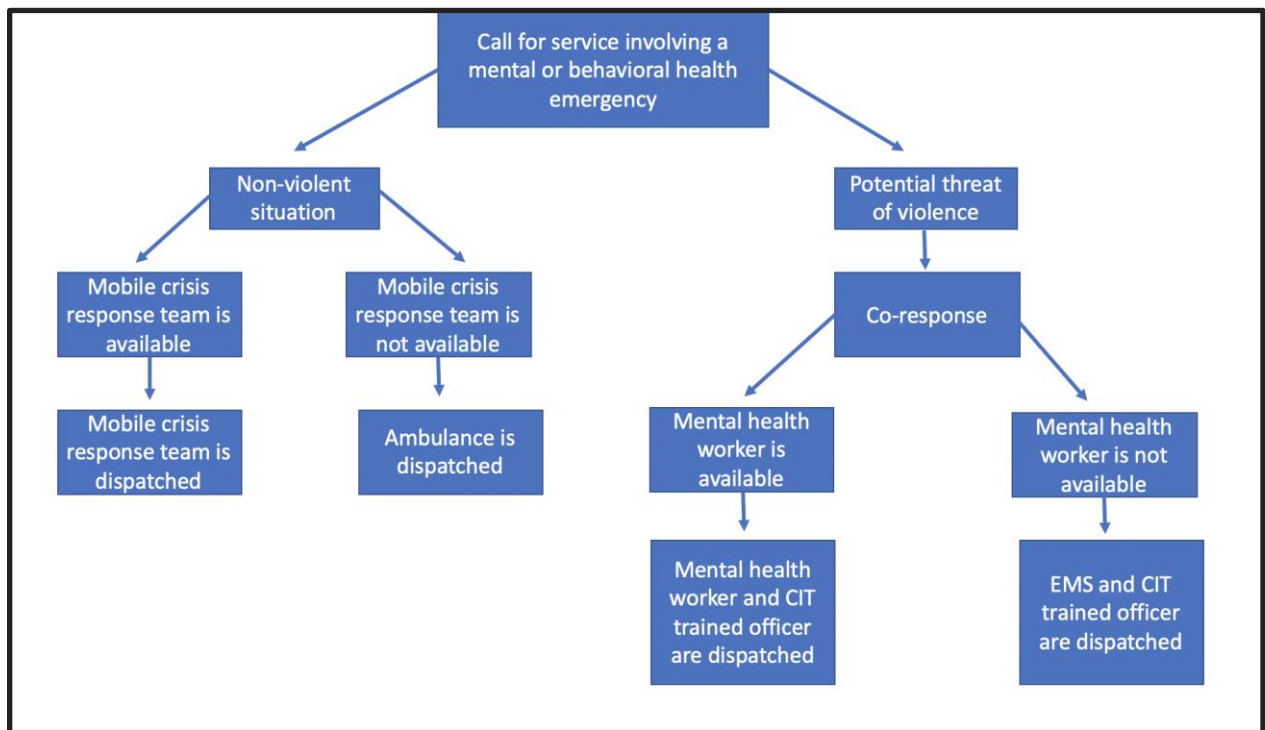
Therefore, I propose that cities looking to establish non-police mobile crisis response teams also consider creating co-responder programs to enable mental health workers to de-escalate behavioral health crises and any potential conflicts between police officers and civilians. In order to maintain community trust and minimize carceral associations, non-police mobile

crisis response programs should emphasize the separation between the co-responder programs and non-police responses. One way to establish this separation is to have a separate funding source, pool of mental health workers, and leadership for co-responder programs, which is the system currently in place in Denver. Instead of having a CAHOOTS or SCRT co-responder division, separating these services can help to communicate the distinction between them and improve public confidence in the anti-carceral nature of non-police responses.

Additionally, STAR's community advisory meetings' discussions often centered around a well-established reality of resource constrained programs: many programs lack the funding and staffing capacity to respond to all eligible emergencies. Thus, programs should also establish contingency plans for situations in which non-police mobile crisis response programs and co-responders are unavailable. As Kathleen from SCRT highlighted, in many mental and behavioral health crises, dispatching health services improves crisis de-escalation relative to spending public safety responses. Therefore, in non-violent situations in which non-police mobile crisis responders are not available, EMS should be dispatched rather than police. Because EMS workers are unarmed and have medical training, they are often relatively better equipped to establish trusting relationships with individuals in crisis.

However, as alluded to in community advisory committee meetings and my interview with Daniel from CAHOOTS, there are also situations in which a crisis is potentially violent and co-response teams that pair police with mental health workers are unavailable. In these situations, cities should devise a last resort alternative co-response involving EMS workers who are not employed by non-police mobile crisis response teams and police officers. Figure 13 details the proposed dispatching breakdown outlined above.

**Figure 13: Recommended Dispatch Breakdown**



It is important to note that despite the positive characterizations of Denver’s pairing of the co-responder model with the non-police mobile crisis response model expressed by STAR program administrators, community members were very wary of the ability for the STAR program to gain and maintain community trust given its association with the co-responder model, a police response. Opponents of the co-response model’s association with mobile crisis response programs argued that the presence of police in behavioral and mental health crises can cause populations historically victimized by police violence to feel afraid and unsafe, thus hindering the crisis de-escalation process. Despite these concerns, however, cities are currently unable to send unarmed civilian responses to potentially violent situations; therefore, for violent situations, the choice is not between a police response or a non-police response, but rather, a traditional police response or one that includes a mental health expert. In order to mitigate potential distrust, programs should clearly communicate the dispatch breakdown for mental and behavioral health

crises to the public. By explicitly identifying these policies in their outreach efforts with citizens and partner community organizations, programs can improve community confidence by emphasizing transparency and communicating the potential response outcomes of different call types.

One important practical consideration with this recommendation is that the establishment of co-responder models outlined above will require a significant amount of additional funding and staffing, which were both shown to be in short supply for non-police mobile crisis response teams themselves. However, if co-response programs model their structure off of Denver's model, they may be able to house their newly established co-responder program under the police department and receive at least some of the funding for the co-response from police department budgets. Additionally, given that Denver is one of the only cities in the country with both a co-responder and a non-police mobile crisis response program, and due to the mixed community attitudes toward the programs in Denver, cities attempting this model should regularly survey community advisory committee members and those who interact with both programs to evaluate the policy's success in improving access to resources and minimizing negative police-citizen interactions.

## **2) Emphasizing Community Leadership**

The effectiveness of current and future non-police crisis intervention teams in providing resources for marginalized communities facing behavioral health and substance misuse crises largely depends on the extent to which city institutions involve community members. Although city-community relationships prove challenging given the often competing interests of the two parties, STAR, SCRT, and CAHOOTS illustrate the vast insights with which community members and non-government organizations provide police alternative programs. However,



involvement of community members must not stop at simply alerting community members of changes in programming or even consulting community members. Rather, the fundamental designs of such programs should represent the true spirit of shifting power from the oppressor to the oppressed. As many of STAR's community advisory committee members stressed, community leadership and community control require community members to have an autonomous seat at the table and strong voice in the legislative processes associated with the programs.

Therefore, I recommend that non-police mobile crisis response programs establish community advisory committees with elected members, similar to the current design of the STAR community advisory committee. Cities should make every effort to ensure that at least one resident per city council district is on the advisory committee. Importantly, following STAR's example, cities should also aim to have several committee members who are currently facing or have previously faced the mental and behavioral health issues the programs seek to address. Unlike STAR's current design and in line with the recommendations of community members, these committees should be self-run and self-governed; committees should also have significant influence in creating, approving, and denying recommendations for program changes, expansions, and policies.

During my observations of community advisory committee meetings, city officials often expressed discomfort with increasing the autonomy and power of committee members in the STAR program. However, as committee members mentioned, community leadership is not synonymous with community members holding more power than policy makers and city departments under which these programs are housed. Rather, emphasizing community-driven control of non-police mobile crisis response programs ensures that community members'

concerns and perspectives will be strongly considered by officials while making legislative decisions. Much like the staffing issues for the non-police mobile crisis response teams themselves, there is also the potential for community advisory committees to face issues with finding an adequate number of members. When funding allows, cities should utilize small financial incentives to increase community advisory committee participation.

### **3) Creating Strong Community Partnerships**

All of the programs investigated expressed the importance of providing individuals with access to long-term resources instead of purely focusing on immediate crisis de-escalation. Particularly when observing the STAR community advisory committee meeting and speaking with Lorez from STAR, I found that many community members do not feel that they are being represented and adequately served by resources offered by city departments. Lisa from Harm Reduction Action Center in Denver also emphasized the importance of having strong partnerships with community-based programs that focus on harm reduction responses to substance misuse rather than the more punitive approaches often seen in city programs.

Therefore, I recommend that when designing their police alternative programs, cities identify and form partnerships with community organizations that can provide mental health care, substance misuse treatment options, and resources for unhoused populations. STAR, CAHOOTS, and SCRT all partner with community organizations to provide this care to differing extents. While SCRT and CAHOOTS refer a large number of clients to community health providers, Lorez noted that expanding community partnerships will be a primary goal of the upcoming STAR expansion efforts. One challenge in implementing this recommendation is that some cities might not have an adequate number of high-quality community organizations willing and able to provide these resources. In these situations, cities should make efforts to increase

diversity (of culture and experience) in the staffing of city-led behavioral and mental health resources.

#### **4) Strategies for Securing Funding**

Government agencies should consider funding non-police mobile crisis response programs through several potential sources. At the city level, officials can look to the structure of Denver's ballot initiative funding Caring for Denver:

In 2018, Denver voters approved a 0.25% increase and sales and use tax to fund behavioral health services for city residents. As part of the ordinance, supporters created a nonprofit organization called the Caring for Denver Foundation. Under a contract with the city, the foundation awards grants to city agencies and community-based organizations supporting behavioral health (O'Brien 2020).

This 0.25% tax increase resulted in the collection of approximately \$37 million in 2019, but Caring for Denver used these funds to pay for many city programs, not just STAR. According to the cost information illustrated in Figure 14, the annual costs of non-police mobile crisis response programs are significantly less than \$37 million, thus a much smaller tax increase would provide more than enough funding to support the establishment of mobile crisis response units in other cities.

**Figure 14: Financial Costs and Savings of Mobile Crisis Response Unit Programs**

Figure 14: Financial Costs and Savings of Mobile Crisis Response Unit Programs					
Program	Annual Cost	Population of City	Annual Per Capita Cost	Estimated Annual Savings	Estimated Annual Net Costs
STAR	\$3.9 Million	705,000	\$5.53	\$6.9 Million	-\$4 Million
SCRT	\$13.5 Million	874,000	\$15.50	*	*
CAHOOTS	\$2.1 Million	168,000	\$12.50	\$8.5 Million	-\$6.4 Million

\* Due to the recent establishment of the SCRT program, SCRT's independent evaluator will not be finished collecting data on annual savings of the program during its pilot phase until June 2022. Based on the relatively small number of non-police mobile crisis response teams relative to the size of San Francisco, the initial cost savings are likely less significant than the results of the other two programs and may yield a positive estimated annual net cost until the program expands to a greater number of teams addressing a larger geographic area.

Figure 14 Data Sources: Data primarily gathered from interviews and observations. Additional Data: Population data from (Data USA 2022); CAHOOTS savings data from (White Bird Clinic 2020); STAR budget data from (Metzger 2021).

Although the Estimated Annual Net Costs column in Figure 14 displays significant annual cost savings for both the STAR and CAHOOTS program, policy makers should avoid using these cases as predictions for immediate financial returns of establishing similar programs. CAHOOTS has had decades to invest in necessary program resources, and much of STAR’s startup costs were covered by the Caring for Denver grant. Because of this, programs should anticipate greater costs during the first few years of implementation and should utilize tax increases similar to that which fund Caring for Denver. Of course, the exact revenue generated from tax increases will depend on the population size, current tax rates, and other factors that differ by city. Similarly, even after programs increase their capacities, the annual costs and savings will depend on population size, demographic information, and prevalence of behavioral health and substance misuse issues in each city.

On a federal level, legislators can support the development of non-police mobile crisis response teams by providing additional federal grants similar to those established in 2021. Specifically, “the American Rescue Plan Act (ARP) of 2021 amended Title XIX of the Social Security Act (the Act) by adding...the following new section: “SEC. 1947. State Option to

Provide Qualifying Community-Based Mobile Crisis Intervention Services”” (*State Planning grants for qualifying community-based Mobile Crisis Intervention Services 2021*). This amendment also enabled the Center for Medicare and Medicaid services to provide \$15 million to 20 state Medicaid agencies to develop plans to “provide qualifying community-based mobile crisis intervention services” (*State Planning grants for qualifying community-based Mobile Crisis Intervention Services 2021*). States already listed in this legislation can currently use these funds to plan and develop mobile crisis response programs. Providing these states with more funding through this avenue and providing states not listed in this legislation with similar funds can help communities across the country to build and sustain such programs.

Aside from these funding mechanisms, as programs develop and gain recognition, cities should seek to redirect a portion of funds previously allocated to police department budgets into mobile crisis response programs. Many of the parties I interviewed - some of whom worked for the same programs - disagreed on the potential successes and complications associated with defunding police departments to finance non-police alternative responses. While STAR community advisory committee members highlighted the necessity of such interventions to avoid police responding to cases in STAR’s domain, Lorez of Caring for Denver cautioned that reducing police department funds to support mobile crisis responses might generate resistance among police departments and limit the ultimate success of programs.

Looking at CAHOOT's track record and design can be helpful in providing empirical evidence on this debate. The Eugene Police Department funds CAHOOTS in its entirety, and the program has generated extremely positive results for over 20 years (Gerety 2021). Moreover, as Figure 15 illustrates, the program’s budget represents less than 2% of the police department’s \$66 million budget (White Bird Clinic 2020).

**Figure 15: Program Costs Relative to Police Department Budgets**

Figure 15: Program Costs Relative to Police Department Budgets				
Program	Annual Cost	Police Department Budget	Annual Cost as a Percentage of Current Police Department Budget	Current Funding Source
STAR	\$3.9 Million	\$245.9 Million	1.6%	Caring for Denver, general City of Denver funds
SCRT	\$13.5 Million	\$706.2 Million	1.9%	City of San Francisco under Mental Health SF initiative
CAHOOTS	\$2.1 Million	\$90 Million	1.8%	City of Eugene through Eugene Police Department

This percentage is similar to the cost of STAR and SCRT relative to their city police departments’ budgets. As illustrated in Figure 15, if STAR’s funding came from the Denver Police Department’s current budget, the total cost of the program would represent just 1.6% of DPD’s funding (Metzger 2021). Similarly, SCRT’s current funding is just 1.9% of San Francisco Police Department’s current budget (Learish 2021). Given the cost savings illustrated in Figure 14, cities should have more than enough financial capacity to fund non-police mobile crisis response programs through police departments’ budgets. More so, my interview with Daniel from CAHOOTS provided evidence against Lorez’s claim that diverting funds would decrease police buy-in in the long run; the Eugene Police Department has been very receptive to the CAHOOTS program and maintains a positive and collaborative working relationship with the program’s crisis responders.

With regard to funding, I ultimately recommend that cities looking to implement mobile crisis response teams acquire initial funding through a combination of federal grants and diverting funding from police departments. After pilot programs, I recommend that cities begin redirecting funds from police departments to mobile crisis response team programs by the

amount of money saved annually through the programs. Finally, I recommend that mobile crisis response programs receive all their funding from police department budgets in the long term. This solution of gradually reducing funding from other sources and increasing funding from police departments would help to foster police support for the program prior to reallocating funding, thus improving the long-term efficacy of mobile-crisis response programs.

#### **5) Evaluation Plan and Future Avenues for Research**

Non-police mobile crisis response programs arose as a potential solution to reducing police violence relatively recently. Other than the CAHOOTS program, most other programs have existed for less than three years. Thus, there is a significant lack of rigorous research on the long-term success of these programs. In order to expand the literature base and inform potential changes to the structure of non-police mobile crisis response programs, it is crucial that each program establish a detailed system of evaluation. Consistent with the perspectives expressed by community members and program administrators alike, I recommend that each non-police mobile crisis response program mandates an independent third-party evaluation of its program's effectiveness at increasing financial savings, diverting individuals away from the police, and connecting those in crisis to quality long-term care that will be conducted every three years. As programs continue to mature and expand, future research and evaluative studies should also investigate non-police mobile crisis response programs' influence on larger social factors including incarceration rates, volume of unhoused populations, and police violence.

Future academic research in this area should also focus on comparison of the success of non-police mobile crisis response programs compared to other models of police reform including CIT programs, community policing, and violence interruption, specifically assessing the metrics of reducing violent police-citizen interactions, arrests, and police killings.

## **CONCLUSION**

The story of Brendon Glenn's death at the hands of LAPD highlights a gap in the criminal justice system that can be solved by widespread implementation of non-police mobile crisis response teams. If a CAHOOTS, SCRT, or STAR team arrived at the restaurant Brendon stood outside instead of police, Avery's father might have been present at his 9th birthday this past year. Brendon's mother might still have her son. Police officers lack the appropriate training, positive community relationships, and resources to properly de-escalate situations like the one that resulted in Brendon Glenn's death. Peer health specialists, community paramedics, and peer counselors from the communities they serve understand the needs of people facing homelessness, substance misuse, and other behavioral health crises.

This study aimed to determine the successes and challenges experienced by three non-police mobile crisis response programs: CAHOOTS, SCRT, and STAR. The purpose of identifying these factors was to evaluate the extent to which these programs can be implemented in other cities throughout the country. Through the comparative analysis conducted during this study, I sought to address several gaps in the literature about alternatives to policing. Primarily, due to the recent establishment of SCRT and STAR, few existing studies evaluated their merits, and none appeared to consider the strengths and weaknesses of all three programs in relation to each other. Additionally, existing studies primarily focused on the perspectives of city officials, academics, and police departments, but few investigated the multitude of community stakeholders that this program did. Interviews, community advisory committee meetings, and webinars provided key insights regarding the necessity of meaningful leadership by community members, strong partnerships with community-based providers, clarity in defining positionality within existing systems, and carefully designed funding plans.



Because community-led mobile crisis response programs do not have the same violent and oppressive histories that policing institutions have, they build strong trusting relationships that enable them to connect community members with long-term care to avoid future challenges. By removing non-violent behavioral health crises from police responsibilities, mobile crisis response units help to democratize policing and the criminal justice system in general. True community leadership and power are essential to adopting a power shifting lens of policing in which those who interact with and are victimized the most by policing institutions have the greatest influence on its policies and practices. Thus, mobile crisis response programs like CAHOOTS, STAR, and SCRT democratize policing in such a way that distributes power not to the majority of city populations in general, but rather, to those who, due to historical marginalization and bias, experience the majority of interactions with police.

The diverse insights shared by interviewees and community advisory committee members illustrate the importance of tailoring police alternative programs to the specific needs of the community. For example, cities where overdoses present a larger problem than issues with unhoused populations can and should modify the mobile crisis response model to fit the needs of their citizens. Additionally, systems should be designed to be adaptable as populations and needs change. As STAR and SCRT continue to expand, future research should analyze quantitative relationships between the presence of these programs and use of excessive force. Attention should also be paid to potential financial savings of these programs, measured effects on access to long-term care, and community attitudes toward mobile crisis response teams. Longitudinal studies related to these topics should be conducted to continue to inform policies surrounding policing, mental health, unhoused populations, and substance misuse both related to and outside of mobile crisis response teams.

The current system of policing is not sustainable. It results in discrimination, unnecessary violence, and inhumane deaths in cities across the country. Mobile crisis response units pose a solution to these problems that should not be ignored. Although not an alternative for the entire policing system, implementing these programs throughout the United States represents an important step in defunding biased and corrupt policing institutions while improving the lives of millions of marginalized individuals. A lack of feasible alternatives no longer presents a valid reason to continue with the current system of policing despite its flaws. When institutions continue to fail citizens, they must be replaced.

## **BIBLIOGRAPHY**

- Afrofuturism*. Oxford Bibliographies. (2019, May 20). Retrieved December 3, 2021, from <https://www.oxfordbibliographies.com/view/document/obo-9780190221911/obo-9780190221911-0004.xml>.
- Alex S. Vitale: The End of Policing? Rethinking Public Safety in a Time of Crisis*. (2022).
- Angell, J. E. (1971). Toward an Alternative to the Classic Police Organizational Arrangements: A Democratic Model. *Criminology*, 9(2–3), 185–206.
- Brendon Glenn*. Dangerous Objects. (n.d.). Retrieved December 3, 2021, from <https://www.dangerousobjects.org/brendon-glenn>.
- Batko et al., (2020). Alternatives to Arrest and Police Responses to Homelessness. *Urban Institute*.
- Beck, J., Reuland, M., & Pope, L. (2020). *Case Study: Cahoots*. Vera Institute of Justice. Retrieved April 19, 2022, from <https://www.vera.org/behavioral-health-crisis-alternatives/cahoots>
- Bell, M. (2021). *Next-generation policing research: Three propositions*. Retrieved April 18, 2022, from <https://pubs.aeaweb.org/doi/pdfplus/10.1257/jep.35.4.29>
- Bell, M. C. (n.d.). *Police Reform and the Dismantling of Legal Estrangement*. Retrieved November 9, 2021, from <https://www.yalelawjournal.org/essay/police-reform-and-the-dismantling-of-legal-estrangement>
- Breed, M., & Supervisors Ronen, Haney, Mar, Walton, Yee, Brown, Safa, Fewer, Peskin, Mandelman, Stefani, Supervisors R. H. M. W. Y. B. S. F. P. M. S. (2019, December 6). *FILE NO. 191148. ORDINANCE NO. 300-19*. SFgov.legislator.com. Retrieved from <https://sfgov.legistar.com/View.ashx?M=F&ID=7977077&GUID=A53A3BD6-2B5F-4DBE-8CB6-9161964AD5CC>.
- Butler, P. (2020). *The System Is Working the Way It Is Supposed to: The Limits of Criminal Justice Reform*. 2019, 61.
- Capers, I. B. (2019). AFROFUTURISM, CRITICAL RACE THEORY, AND POLICING IN THE YEAR 2044. *NEW YORK UNIVERSITY LAW REVIEW*, 94, 60.
- Chiodo, M. (2020, February 4). *Caring for Denver issues first grants worth about \$2 million*. 5280. Retrieved December 3, 2021, from <https://www.5280.com/2020/02/caring-for-denver-issues-first-grants-worth-about-2-million/>.

- Data USA. (2022). Retrieved April 19, 2022, from <https://datausa.io/>
- El-Sabawi, T., & Carroll, J. J. (2020). *A Model for Defunding: An Evidence-Based Statute for Behavioral Health Crisis Response* (SSRN Scholarly Paper ID 3683432). Social Science Research Network. <https://doi.org/10.2139/ssrn.3683432>
- Eugene Police Crime Analysis Unit. (2020). *Cahoots Program Analysis - Eugene, Oregon*. Eugene-or.gov. Retrieved April 19, 2022, from <https://www.eugene-or.gov/DocumentCenter/View/56717/CAHOOTS-Program-Analysis>
- George, J. (2021, January 11). *A Lesson on Critical Race Theory*. American Bar Association. Retrieved December 3, 2021, from [https://www.americanbar.org/groups/crsj/publications/human\\_rights\\_magazine\\_home/civil-rights-reimagining-policing/a-lesson-on-critical-race-theory/](https://www.americanbar.org/groups/crsj/publications/human_rights_magazine_home/civil-rights-reimagining-policing/a-lesson-on-critical-race-theory/).
- Gerety, R. M. (2021, February 16). *An alternative to police that police can get behind*. The Atlantic. Retrieved December 3, 2021, from <https://www.theatlantic.com/politics/archive/2020/12/cahoots-program-may-reduce-likelihood-of-police-violence/617477/>.
- Harder and Company. (2021). *Street Crisis Response Team Pilot - sfdph.org*. Retrieved April 18, 2022, from [https://www.sfdph.org/dph/files/IWG/SCRT\\_Preliminary\\_Report\\_071521.pdf](https://www.sfdph.org/dph/files/IWG/SCRT_Preliminary_Report_071521.pdf)
- Harkin. (2015). (PDF) *police legitimacy, ideology and qualitative methods: A critique of procedural justice theory*. ResearchGate. Retrieved April 19, 2022, from [https://www.researchgate.net/publication/276104116\\_Police\\_legitimacy\\_ideology\\_and\\_qualitative\\_methods\\_A\\_critique\\_of\\_procedural\\_justice\\_theory](https://www.researchgate.net/publication/276104116_Police_legitimacy_ideology_and_qualitative_methods_A_critique_of_procedural_justice_theory)
- Hassett-Walker, C. (2021, January 11). *How You Start is How You Finish? The Slave Patrol and Jim Crow Origins of Policing*. American Bar Association. Retrieved December 3, 2021, from [https://www.americanbar.org/groups/crsj/publications/human\\_rights\\_magazine\\_home/civil-rights-reimagining-policing/how-you-start-is-how-you-finish/](https://www.americanbar.org/groups/crsj/publications/human_rights_magazine_home/civil-rights-reimagining-policing/how-you-start-is-how-you-finish/).
- Jacobs, L. A., Kim, M. E., Whitfield, D. L., Gartner, R. E., Panichelli, M., Kattari, S. K., Downey, M. M., McQueen, S. S., & Mountz, S. E. (2020). Defund the Police: Moving Towards an Anti-Carceral Social Work. *Journal of Progressive Human Services*. <https://www.tandfonline.com/doi/full/10.1080/10428232.2020.1852865>
- Kisely, S., Campbell, L. A., Peddle, S., Hare, S., Pyche, M., Spicer, D., & Moore, B. (2010). A Controlled Before-and-after Evaluation of a Mobile Crisis Partnership between Mental Health and Police Services in Nova Scotia. *The Canadian Journal of Psychiatry*, 55(10), 662–668. <https://doi.org/10.1177/070674371005501005>
- Laniyonu, A., & Goff, P. A. (2021). Measuring disparities in police use of force and injury among persons with serious mental illness. *BMC Psychiatry*, 21(1), 500.

<https://doi.org/10.1186/s12888-021-03510-w>

Learish, J. (2021, September 30). *Defund the police? police budgets of major U.S. cities*. CBS News. Retrieved April 19, 2022, from <https://www.cbsnews.com/pictures/defund-the-police-police-budgets-of-major-us-cities/>

Macauley, N. (2021). Alternative Response to Mental Health- Related 911 Calls. *PCOM Capstone Projects*. [https://digitalcommons.pcom.edu/capstone\\_projects/41](https://digitalcommons.pcom.edu/capstone_projects/41)

Meares, T. (2015). *Balkinization: A Third Reconstruction?*. Retrieved November 9, 2021, from <https://balkin.blogspot.com/2015/08/a-third-reconstruction.html>

Metzger, H. (2021, September 22). *Denver's 2022 city budget proposal dominated by Public Safety*. Denver Gazette. Retrieved April 19, 2022, from [https://denvergazette.com/news/government/denvers-2022-city-budget-proposal-dominated-by-public-safety/article\\_9d1dec2c-1b32-11ec-bdc9-d3619f1c3c58.html](https://denvergazette.com/news/government/denvers-2022-city-budget-proposal-dominated-by-public-safety/article_9d1dec2c-1b32-11ec-bdc9-d3619f1c3c58.html)

Mulvey, P., & White, M. (2014). The potential for violence in arrests of persons with mental illness. *Policing: An International Journal of Police Strategies & Management*, 37(2), 404–419. <https://doi.org/10.1108/PIJPSM-07-2013-0076>

*National Association of State Mental Health Program directors. TA Coalition Webinar: Alternatives to Police Response for People in Mental Health Crisis - Ideas, Barriers and Ways to Work to a Solution | National Association of State Mental Health Program Directors. (2021, June 24). Retrieved April 19, 2022, from <https://www.nasmhpd.org/content/ta-coalition-webinar-alternatives-police-response-peop>  
[le-mental-health-crisis-ideas-barriers](https://www.nasmhpd.org/content/ta-coalition-webinar-alternatives-police-response-peop)*

*Office of the Mayor. Mayor London Breed Announces Plan to Create Behavioral Health Street Crisis Response Team | Office of the Mayor. (2020). Retrieved December 3, 2021, from <https://sfmayor.org/article/mayor-london-breed-announces-plan-create-behavioral-health-street-crisis-response-team>.*

O'Brien, T. M. (2020, October). *Audit report - denver auditor*. Denver Auditor. Retrieved December 3, 2021, from [https://www.denverauditor.org/wp-content/uploads/2020/10/CaringforDenver\\_October2020.pdf](https://www.denverauditor.org/wp-content/uploads/2020/10/CaringforDenver_October2020.pdf).

O'Rourke, A., Su, R., & Binder, G. (2021). DISBANDING POLICE AGENCIES. *Columbia Law Review*, 121(4), 1327–1404.

Ralph, L. (2020, October). To Protect and to Serve. *Foreign Affairs*, 99(5), 196–202.

Reimagining Public Safety Recommendations. (2021). Retrieved November 8, 2021, from

- [http://www.denvertaskforce.org/uploads/1/2/5/5/125541169/reimagining\\_\\_public\\_safety\\_\\_recommendations\\_.pdf](http://www.denvertaskforce.org/uploads/1/2/5/5/125541169/reimagining__public_safety__recommendations_.pdf)
- Resnikoff, N. (2015, March 2). *Why the homeless might be especially vulnerable to police violence*. Retrieved November 7, 2021, from <http://america.aljazeera.com/articles/2015/3/2/why-the-homeless-might-be-especially-vulnerable-to-police-violence.html>
- Sachs, D. In the first six months of health care professionals replacing police officers, no one they encountered was arrested. (2021). *Denverite*. Retrieved November 8, 2021, from <https://denverite.com/2021/02/02/in-the-first-six-months-of-health-care-professionals-replacing-police-officers-no-one-they-encountered-was-arrested/>
- Salter, A. (2021). *A Psychological Perspective on Police Brutality: Current Statistics, Characteristics, and Trends Regarding Excessive Use of Force*. 136. *SCRT September Update (1).pdf*. (n.d.). Retrieved November 9, 2021, from <https://sf.gov/sites/default/files/2021-10/SCRT%20September%20Update%20%281%29.pdf>
- San Francisco Department of Public Health. (2021). *Street Crisis Response Team Issue Brief - SF, DPHSa*. [https://www.sfdph.org/dph/files/IWG/SCRT\\_IWG\\_Issue\\_Brief\\_FINAL.pdf](https://www.sfdph.org/dph/files/IWG/SCRT_IWG_Issue_Brief_FINAL.pdf). Retrieved April 18, 2022, from [https://www.sfdph.org/dph/files/IWG/SCRT\\_IWG\\_Issue\\_Brief\\_FINAL.pdf](https://www.sfdph.org/dph/files/IWG/SCRT_IWG_Issue_Brief_FINAL.pdf)
- San Francisco. (2021). *Street Crisis Response Team 9-2-21*. Retrieved from Street Crisis Response Team 9-2-21.
- Schmelzer, E. (2022, February 21). *Thousands of calls later, Denver's acclaimed program that provides an alternative to police response is expanding*. The Denver Post. Retrieved April 19, 2022, from <https://www.denverpost.com/2022/02/20/denver-star-program-expansion/>
- SCRT September 2021 Update*. SF.gov. (2021). Retrieved from <https://sf.gov/sites/default/files/2021-10/SCRT%20September%20Update%20%281%29.pdf>
- SFDPH Health Commission. (2021, March 16). *Street Crisis Response Team*. sf.gov. Retrieved from <https://sf.gov/sites/default/files/2021-03/SCRT%20Presentation%20to%20Health%20Commission%203.16.21%20%282%29.pdf>
- Simonson, J. (2021). Police Reform through a Power Lens. *Yale Law Journal*, 130, 778.
- Simpson, K. A., Gevorgian, H., Kral, A. H., Wenger, L., Bourgois, P., & Bluthenthal, R. N. (2021). Prevalence and predictors of recent temporary psychiatric hold among a cohort of people who inject drugs in Los Angeles and San Francisco, California. *Drug and Alcohol Dependence*. <https://doi.org/10.1016/j.drugalcdep.2021.108916>

- STAR Program Evaluation. (2021).  
[https://wp-denverite.s3.amazonaws.com/wp-content/uploads/sites/4/2021/02/STAR\\_Pilot\\_6\\_Month\\_Evaluation\\_FINAL-REPORT.pdf](https://wp-denverite.s3.amazonaws.com/wp-content/uploads/sites/4/2021/02/STAR_Pilot_6_Month_Evaluation_FINAL-REPORT.pdf).
- State Planning grants for qualifying community-based Mobile Crisis Intervention Services.* Medicaid. (2021). Retrieved December 3, 2021, from  
<https://www.medicaid.gov/medicaid/benefits/behavioral-health-services/state-planning-grants-for-qualifying-community-based-mobile-crisis-intervention-services/index.html>.
- Street Crisis Response Team (SCRT) Pilot - October 2021 Update.* SF.gov. (2021).  
 Retrieved December 3, 2021, from <https://sf.gov/sites/default/files/2021-11/SCRT%20November%20Update.pdf>.
- Street Crisis Response Team Pilot.* (2021) Retrieved November 9, 2021, from  
[https://www.sfdph.org/dph/files/IWG/SCRT\\_Preliminary\\_Report\\_071521.pdf](https://www.sfdph.org/dph/files/IWG/SCRT_Preliminary_Report_071521.pdf)
- Tatem, R. M. (2021). *Social Work Policing: An Embedded Autonomous Model* [M.S., Arizona State University].<https://www.proquest.com/docview/2532491189/abstract/F160F880371E4FC1PQ/1>
- Waters, R., S, D. G., J, T., & J, D. (2021, June 1). *Enlisting mental health workers, not cops, in mobile crisis response: Health Affairs Journal.* Health Affairs. Retrieved April 19, 2022, from <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2021.00678>
- Watson, A. C., & Compton, M. T. (2019). What Research on Crisis Intervention Teams Tells Us and What We Need To Ask. *The Journal of the American Academy of Psychiatry and the Law*, 47(4), 5.  
<https://citinternational.org/resources/Documents/Press%20Releases/What%20Research%20on%20Crisis%20Intervention%20Teams%20Tells%20Us%20and%20What%20We%20Need%20To%20Ask.pdf>
- Weichselbaum, S. Tribune, R. T.-T., & Press, V. A. (2020, June 9). *Support For Defunding The Police Department Is Growing. Here's Why It's Not A Silver Bullet.* The Marshall Project. <https://www.themarshallproject.org/2020/06/09/support-for-defunding-the-police-department-is-growing-here-s-why-it-s-not-a-silver-bullet>
- Westervelt, E. (2020, October 19). Removing Cops From Behavioral Crisis Calls: “We Need To Change The Model.” *NPR*.  
<https://www.npr.org/2020/10/19/924146486/removing-cops-from-behavioral-crisis-calls-we-need-to-change-the-model>ence, 227, 108916.
- White Bird Clinic.* What is CAHOOTS? (2020). Retrieved April 19, 2022, from  
<https://whitebirdclinic.org/what-is-cahoots/>