

## RESOURCE GUIDE

# Taking Mental Health Crises Out of Police Hands



MacArthur  
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70 Million is made possible by a grant from the Safety and Justice Challenge at the John D. and Catherine T. MacArthur Foundation.



# million

ONE JAIL AT A TIME.

*story*

# Community Mental Health Responses THAT DON'T RELY ON THE POLICE

TAUN HALL OUTSIDE HER HOME WHERE HER SON MILES, WHO SUFFERED FROM SCHIZOAFFECTIVE DISORDER, WAS FATALLY SHOT BY WALNUT CREEK POLICE IN 2019. PHOTO BY JAN STURMANN.



People with untreated mental illnesses are 16 times more likely to be killed by law enforcement, comprising at least 25% of fatalities caused by police. If their interaction does not end in death, people with a mental illness could still be incarcerated, end up with a criminal record, and not receive the help they need. Additionally, police interaction can exacerbate psychological distress—these events are associated with increased suicide attempts and psychotic episodes, and escalation rather than de-escalation.

Advocates say part of the problem is some officers don't know how to help, because they don't all have training. And while a lack of training may cause officers to act from a place of fear, those with severe mental illnesses are actually over 10 times more likely to be victims of a violent crime than the general population. Clearly, criminalization is not working; there must be alternative outlets of care that specialize in mental health treatment.

However, accessing mental health care institutionally can be challenging, especially given how expensive it is if you do not have insurance (which is true for over 28 million Americans) and how hard it is to find somebody who speaks your native language if it is not English. And given that—as of last year—84% of psychologists are white, it can be particularly difficult for Black, Indigenous and people of color to find somebody who understands their cultural and societal contexts.

This is where community-informed modes of mental health crisis intervention and ongoing healing programs become both a necessary and better alternative. Not only can those who have experienced harm themselves be centered in crafting solutions, but they can do so with government funding and with the support of those who have experience in de-escalation, organizing, and healthcare. As those on the ground are proving, building these spaces creates effective modes of healing run by people who genuinely want others to know they are protected, cared for, and supported—which can render police intervention unnecessary.

**"I WANT PEOPLE TO KNOW THIS YOUNG MAN WAS NOT BAD. HE WAS A BEAUTIFUL SOUL, AND HE WANTED TO BE HERE. HE DIDN'T WANT TO DIE BY THE POLICE. [...] WE REALLY DID TRY TO DO SO MANY THINGS TO GET HIM HELP IN THE RIGHT WAY. BUT THE SYSTEM FAILED OUR FAMILY, IT FAILED MILES. AND THAT'S WHY I DON'T WANT THE SYSTEM TO FAIL ANOTHER PERSON."**

- TAUN HALL, Co-founder of the Miles Hall Foundation

## REFLECTION QUESTION:

Do you know of any ways for people facing mental health crises in your neighborhood, town, or city to receive help—that do not involve the police?

# PEOPLE DOING THE WORK

ASANTEWAA BOYKIN, CO-FOUNDER OF THE ANTI POLICE-TERROR PROJECT, PROGRAM DIRECTOR FOR MH FIRST SACRAMENTO, AND AN EMERGENCY ROOM NURSE, POSES FOR A PHOTO AT HER HOME IN SACRAMENTO. PHOTO BY SARA NEVIS.



**Anti Police-Terror Project (ATP):** "The Anti Police-Terror Project is a Black-led, multi-racial, intergenerational coalition that seeks to build a replicable and sustainable model to eradicate police terror in communities of color. We support families surviving police terror in their fight for justice, documenting police abuses and connecting impacted families and community members with resources, legal referrals, and opportunities for healing."

### **Mental Health First**

"A cutting-edge new model for non-police response to mental health crisis. The goal of MH First is to respond to mental health crises including, but not limited to, psychiatric emergencies, substance use support, and domestic violence safety planning. [...] Our purpose is to interrupt and eliminate the need for law enforcement in mental health crisis first response by providing mobile peer support, de-escalation assistance, and non-punitive and life-affirming interventions."

### **Mobile Assistance Community Responders of Oakland (MACRO)**

"For many quality-of-life situations, Mobile Assistance Community Responders of Oakland (MACRO) can offer a more appropriate response. The pilot program for MACRO is intended to demonstrate that sending local community members who have been trained in crisis intervention and de-escalation can: Provide more appropriate responses to calls that don't involve serious crime or violence; Limit community engagement with police; Redirect police and fire resources to public safety priorities."

### **Crisis Assistance Helping Out on the Streets (CAHOOTS)**

"Provides mobile crisis intervention 24/7 in the Eugene-Springfield Metro area. [...] Each team consists of a medic (either a nurse or an EMT) & a crisis worker (who has at least several years experience in the mental health field). [...] CAHOOTS workers are not trained in law enforcement and do not have the same authority as police. We are a mobile crisis intervention team, designed as an alternative to police response for non-violent crises."

"Police largely don't want to be doing this specific kind of work. So to our surprise, they've been accommodating. Largely obliged, you know, just, oh yeah, "You're the person that needs to be here. Go ahead and talk to this person," and have gotten a good outcome when it comes to our contact and our crisis intervention with the participants."

- ASANTEWAA BOYKIN,  
Co-Founder of the Anti Police-Terror Project, Program Director for Mental Health First Sacramento, & E.R. Nurse

"A healing justice framework means that we need to build support systems and institutions that are designed and led by people who know what it's like to go through these harmful institutions, who've been in crisis themselves, who've actually had to support other people in crisis with a goal of healing rather than further contributing to harm. And part of that means turning a critical eye inward into these institutions meant to help us—like the social work field or behavioral health care facilities or the relationships between policing and therapy and recognizing how those systems or relationships don't always keep our communities safe."

— **V RABELO**, volunteer with MH First Oakland



**M.H. FIRST**  
COMMUNITY FIRST RESPONSE **OAKLAND**

# Keep learning...

## Reading



**AB 988 - The Miles Hall Lifeline Act** from Justice for Miles Hall

**Defund the Police - Invest in Community Care: A Guide to Alternative Mental Health Responses** from Interrupting Criminalization

**Healing Justice Toolkit** from Justice Teams Network

**Understanding Barriers to Minority Mental Healthcare** from USC Nursing

**Cop Watch 101: A Training Outline** from The People's Response Team

**Report on Feasibility and Implementation of a Pilot of Mobil Assistance Community Responders of Oakland (MACRO)** from Urban Strategies Council

## Audio



**Criminalizing Mental Illness, Part 1** from KALW

**Criminalizing Mental Illness, Part 2** from KALW

**In Miami, Jailing Fewer, Treating More** from 70 Million

**We Went Back to See How These Reforms Worked** from 70 Million

V RABELO IN OAKLAND, CALIFORNIA, WHERE SHE VOLUNTEERS FOR MH FIRST OAKLAND. MURAL BY TONY LOVEGATES. PHOTO BY JAN STURMANN.

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