

Communities for Crisis Intervention Team Training has some ideas to improve ThriveNYC

The beleaguered mental health initiative led by New York City First Lady Chirlane McCray has faced criticism in recent weeks for a lack of demonstrable accomplishments despite the hundreds of millions of dollars of city funding it has received. However, much of that criticism is misplaced, according to a March 21 statement from CCITNYC.

“Uninformed critics have used events outside the scope of the program’s initiatives as further evidence that the program isn’t working,” reads the press release. “ThriveNYC was never designed to tackle mental health issues in prisons or police shootings of unarmed individuals. And opening more beds in psychiatric facilities is unquestionably not a viable, effective or humane solution to meeting the mental health needs of hundreds of thousands of New Yorkers.”

Among the biggest issues of contention is how ThriveNYC can better work with the 911 system – a key issue for CCITNYC, which was founded in 2012 in response to several high-profile incidents between police and mentally ill people.

Here are ways that ThriveNYC could supplement the emergency response system such dangerous interactions in the future, taken verbatim from the press release:

- Reduce the number of mental health-related 911 calls by creating alternative avenues for assistance during crisis situations.
- Better document and track the mental health-related 911 calls that do come in to analyze why those calls were made and how they could have been prevented.
- Replace officer-only responses with co-response teams or teams that are composed of highly trained crisis counselors.
- Develop more “pre-crisis” supports in highly stressed communities that are the source of the highest number of calls.
- Engage in a community-wide planning effort that includes people who have direct experience with crisis situations and who can best define what helps and what doesn’t.