

For Immediate Release

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CCIT-NYC Calls on City to Immediately Redirect NYPD Funding to Create a Health Care Response for those Experiencing Mental Health Crises

[Survey](#) finds 68% of voters nationwide support creation of non-police response to mental health crises

(New York, NY, 6/11/20) – Eighteen people living with mental health concerns were shot by police responding to a mental health crisis in the last five years, and 15 of these individuals were killed. Thousands of other people living with mental health concerns in New York City have been injured in and traumatized by police encounters.

Crisis Intervention Team (CIT) training did not stop these violent interactions with police. Since June 2015, 15,000 officers have received training to use de-escalation techniques during crisis situations involving people with mental health concerns, yet the number of people killed in these situations has only increased during this period. Now is the time to act to prevent further horrific and senseless loss of life.

CCIT-NYC proposes a pilot project to fund teams that will serve mental health crisis response needs in the two most-impacted New York City precincts (Brooklyn 75th and Midtown South) at the cost of \$16.5 million over five years, or \$3.3 million per year.

This pilot project would pair Emergency Medical Technicians (EMTs) with trained “peers” (people with lived mental health experience). The EMTs and peers – rather than the police – would serve as first responders for people experiencing a mental health crisis and be available 24/7.

Under the pilot, team make-up would be similar to New York City’s Health Engagement and Assessment Teams (H.E.A.T.), which consist of a peer and a clinician. Yet unlike NYC’s limited HEAT teams, which cannot be dispatched by NYC Well or by the general public, these new pilot teams would be directly accessible.

This is a similar model to the [CAHOOTS](#) program in Eugene, Oregon, which has been in operation for over 30 years. It is a proven model which can easily be adapted to neighborhoods in New York City.

Correct Crisis Intervention Today – NYC (CCIT-NYC) – a broad-based coalition of civil rights and human service organizations, people with lived experience of mental health crises, family members, and other advocates – has developed this much-needed solution to transform how the City responds to crisis calls.

Violent police actions against protestors in recent days mirror years of violent police actions against individuals experiencing mental health crises, especially those who are Black or other persons of color.

New Yorkers have seen time and again that police cannot and do not de-escalate crises. They are not mental health workers, and far too often they rely on needless use of force. That’s why CCIT-NYC is calling for funds to be redirected from the NYPD, and for the removal of mental health crisis response from the NYPD’s responsibilities, with mental health teams to be sent instead.

Carla Rabinowitz, Project Coordinator of CCIT-NYC and Advocacy Coordinator at Community Access, says, “From 1996 to 2001, I was one of those people in emotional distress. I was the one breaking furniture, screaming on the street, screaming at children, whom I love. I was sick, and I needed help. I could have been killed by police. Instead I got help and have been working for Community Access since 2001.”

“Many mental health recipients in crisis never receive mental health care. They never get a second or third chance. They are killed by police who do not want to, and should never be asked to, respond to people who are sick.”

Cal Hedigan, CEO of Community Access, says, “We have wasted too much time trying to reform a broken and deadly system. Too many lives have been lost, overwhelmingly Black and brown, and too many families have been devastated. Now is the time to take decisive action to fund a humane and compassionate response to individuals experiencing mental health crises in our city.”

Ruth Lowenkron, Director of the Disability Justice Program at New York Lawyers for the Public Interest, says, “The shootings and killings must stop. Remove the police from the equation and allow healthcare workers and those with lived mental health experience to respond to individuals experiencing mental health crises. Now.”

Matt Kudish, Executive Director of NAMI-NYC (National Alliance on Mental Illness of NYC), says, “NAMI-NYC strongly supports funding a non-police response to mental health emergencies. By divesting from the NYPD and redirecting funds towards community services, we can fund a robust mental health system that saves lives and connects families and individuals in crisis to mental health resources. We need elected officials to support this innovative pilot program and begin the process of transforming NYC's broken crisis response system.”

James Mutton, Director of NYC Operations at Concern for Independent Living, says, “Concern for Independent Living has been deeply involved in the CCIT-NYC campaign since its inception. We strongly believe that the time is right to pilot a peer-driven alternative model to respond to mental health crises, thereby avoiding harm and ensuring compassionate, well-balanced approaches that avoid unnecessary use of emergency departments and hospitals.”

Steve Coe, a 2012 co-founder of CCIT-NYC, says, “Calls to reduce and reallocate the huge sums spent on over-policing our communities are commendable. At the same time, we need to invest in common-sense crisis alternatives – like trained healthcare first-responders – that people with mental health concerns have identified as the most beneficial approach.”

This \$3.3 million a year program pays for itself in fewer lawsuits against the NYPD. Each year the City of New York's pays about \$250 million a year in cases involving police misconduct by the NYPD. Civil Rights Attorney Jenny Marashi, Esq., of CCIT-NYC's steering committee, estimates that roughly one-third of those cases involve people undergoing a mental health crisis. Rather than sending police trained in force tactics to deal with a mental health issue, the mental health professionals would have the training to de-escalate the crisis — leading to fewer lawsuits against the City.

The following people were not provided with a mental health response when they were in crisis. Instead, law enforcement responded, depriving these individuals of the chance to recover from their moment of crisis. Most were shot and killed. *(List may not be complete.)*

Mario Ocasio, Age 51 – June 2015 – Bronx – shot and killed

Rashan Lloyd, Age 25 – June 2016 – Bronx – shot 30 times and killed

Deborah Danner, Age 66 – October 2016 – Bronx – shot and killed

Ariel Galarza, Age 49 – November 2016 – Bronx – shot and killed

Dwayne Jeune, Age 32 – July 2017 – Brooklyn – shot and killed

Andy Sookdeo, Age 29 – August 2017 – Brooklyn – shot and killed

Miguel Richards, Age 31 – September 2017 – Bronx – shot and killed

Cornell Lockhart, Age 67 – November 2017 – Bronx – shot and killed

Dwayne Pritchell, Age 48 – January 2018 – Bronx – shot and killed

James Owens, Age 63 – January 2018 – Brooklyn – shot and killed

Michael Hansford, Age 52 – January 2018 – Bronx – shot and killed

Saheed Vassell, Age 34 – April 2018 – Brooklyn – shot and killed

Susan Muller, Age 54 – September 2018 – Queens – shot and killed

Michael Cordero, 34 – March 2019 – Manhattan – shot and critically wounded

Jarrell Davis, Age 33 – March 2019 – Queens – shot and critically wounded

Kawaski Trawick, Age 32 – May 2019 – Bronx – shot and killed

Kwesi Ashun, Age 33 – October 2019 – Brooklyn – shot and killed

Peyman Bahadoran, Age 55 – June 2020 – East Village – shot and injured

CCIT-NYC demands the Mayor redirects NYPD funds to create a health care response for those experiencing urgent mental health crises to prevent more mental health recipients from being killed in police encounters, and to give people in crisis another chance at life.

About Correct Crisis Intervention Today – NYC (www.ccitnyc.org)

Correct Crisis Intervention Today – NYC is a coalition of 80 organizations and 400 stakeholders whose mission is to transform how the City responds to mental health crises by diverting responses to mental health recipients away from law enforcement.

About Community Access (www.communityaccess.org)

Community Access, one of the coalition's leaders, is a 46-year-old nonprofit that helps people living with mental health concerns by providing quality, supportive housing and award-winning peer-led employment training and other outreach and recovery services.

About Concern for Independent Living, Inc. (www.concernhousing.org)

Since 1972, Concern's mission has been to provide housing and services that enrich lives and strengthen communities. This is achieved by developing high-quality, attractive housing, together with the provision of services that help people thrive in the communities of their choice. We currently provide housing and services to 1,500 adults and 250 children in Brooklyn, the Bronx, and on Long Island, in a variety of residential settings, and have 500 additional units in various stages of development.

About National Alliance on Mental Illness of NYC (www.naminycmetro.org)

NAMI-NYC helps families and individuals affected by mental illness build better lives through education, support, and advocacy.

About New York Lawyers for the Public Interest (www.nylpi.org)

For over 40 years, NYLPI has fought for New Yorkers with disabilities, including for an equitable criminal legal system. Recent successes include two suits mandating that the NYPD provide the public with footage from the body-worn cameras of police who shot and killed individuals experiencing mental health crises.

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