City of Ann Arbor Unarmed Crisis Response Team

Community Feedback and Recommendations

March 2023

PSC

PSC | **PUBLIC SECTOR CONSULTANTS**

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Executive Summary

Background

In April 2021, the Ann Arbor City Council passed Resolution R-21-129 to develop an unarmed crisis response team. The City of Ann Arbor hired Public Sector Consultants (PSC), a Lansing-based research and policy consulting firm, to understand the level of support for an unarmed crisis response team and gather community input on and recommendations for its development. Beginning in August 2022, PSC engaged the Ann Arbor community—those who live, work, and/or go to school in Ann Arbor—through interviews with community leaders, a public survey, community member discussion groups, social service provider discussion groups, and public forums. Input was specifically solicited from people who struggle with housing and homelessness, immigrants, youth, and individuals who were formerly incarcerated.

There is overwhelming public support for an unarmed crisis response team in Ann Arbor across all population groups (referenced as "the team" throughout this report). The Ann Arbor community is passionate about and interested in ongoing engagement in the development of an unarmed crisis response team to support their community. They hope that this team will provide better outcomes for those in crisis, reduce the potential for harmful police interactions, divert individuals from the criminal justice system, and connect community members with needed resources that will help address underlying issues.

Recommendations

The following recommendations were developed from the feedback received across all community input activities.

Service Delivery

Community members identified the following recommendations related to the types of services the team should provide as well as how the services should be delivered.

- Train, equip, and staff the team to provide mental health support, welfare and wellness checks, and homelessness and substance use support and to connect those in crisis with community resources
- Conduct additional research on the ability of the team to respond to domestic violence (DV) calls
- Consider providing postcrisis, short-term follow-up, addressing minor juvenile infractions, and offering phone-based situational assessments

Team Composition, Skills, and Training

Community members made the following recommendations regarding team composition and skills.

- Create a team with diverse skills and credentials
- Train team members in de-escalation, conflict mediation, and trauma-informed response
- Ensure the team reflects and is prepared to respond to diverse community members
- Offer mental health support and fair compensation to the response team staff

Access

Community members recommended that the team be available through multiple avenues and discussed the intricacies of potentially using 911 dispatch as one of those methods.

- Create an avenue for direct access to the team, such as through a standalone phone number
- Ensure coordination with the statewide crisis response line (988)
- Allow access to the team from 911 dispatch
- Address concerns about liability

Police Engagement

While there was a lack of consensus about the level of engagement and coordination the team should have with law enforcement, there was agreement that at whatever level they are engaged, there should be established protocols regarding their involvement.

- Establish response protocols for police engagement
- Establish training requirements and clear protocols for 911 dispatch operators

Program Administration

Overall, there was a lack of agreement about the administration of the team, divided between administration by the City or a nonprofit entity. Those who favor City administration believe the model would offer increased accountability and sustainability. Those who favor nonprofit administration believe the model would increase flexibility and the ability to draw on expertise gained from offering similar services to those the team may offer. They were concerned that a City-administered program would be vulnerable to political influence. Regardless of the program administrator, the community wants to ensure the program operates smoothly and sustainably, with adequate oversight and without political influence.

Funding and Sustainability

There was no consensus on how the team should be funded, but a large majority support using existing city funds. They also emphasized the importance of sufficient funding during and beyond a pilot program to ensure the program's sustainability.

Evaluation

When discussing program implementation, the community focused on evaluating the program's success through data, establishing potential data partnerships, and making that data public.

- Establish performance metrics
- Gather feedback and data from community members and people receiving services
- Engage partners and other agencies in data collection
- Share data openly

Other Considerations

The following considerations are based on feedback received across all the community input activities. The City should review and incorporate these into its team design where possible.

Community Coordination and Collaboration

Community members mentioned coordination with other social service agencies and efforts frequently throughout feedback-gathering activities. High priority was placed on collaboration, referral practices, and understanding the current environment of local social services to ensure successful connection to services and to reduce the likelihood of service duplication.

- Coordinate with existing crisis response efforts
- Collaborate with community social service providers
- Identify and address gaps in social service provider capacity

Public Outreach and Education

Participants broached the subjects of public outreach, targeted education by population, public perception, and continued community engagement frequently throughout all feedback-gathering activities.

- Engage in a broad public education campaign
- Brand the team in a welcoming manner
- Educate community resources and service providers
- Establish a community presence

Introduction

In April 2021, the Ann Arbor City Council passed Resolution R-21-129 to develop an unarmed crisis response team. The City of Ann Arbor hired Public Sector Consultants, a Lansing-based research and policy consulting firm, to understand the level of support for an unarmed crisis response team and gather community input and recommendations on its development. Beginning in August 2022, PSC engaged the Ann Arbor community—those who live, work and/or go to school in Ann Arbor—through interviews with community leaders, , community member discussion groups, social service provider discussion groups, and public forums. Input was specifically solicited from people who struggle with housing and homelessness, immigrants, youth, and individuals who were formerly incarcerated, and those voices were prioritized in our analysis. We also conducted a public survey to compliment the data collected from our small group discussions. A full description of and approach to each engagement activity is described in Appendix A.

The Ann Arbor community shared their input on a variety of aspects of the team, including what they hope the team would achieve, whether it should operate inside or outside of city government, the types of services it should provide, and how the program should be funded and evaluated. A summary of the community leader interviews, community member discussions, social service provider and business discussions, and the public survey are available in Appendices B–E.

The following offers recommendations and implementation considerations based on the collective engagement activity findings.

Strong Community Support

There is overwhelming public support for an unarmed crisis response team in Ann Arbor. This support was voiced in interviews, discussion groups, and public forums and was heard across all population groups. This strong level of support is also shown in the survey findings, where almost 90 percent of respondents agree or strongly agree that creating a team would benefit their community. This high level of support extends among all income groups, races and ethnicities, and criminal justice backgrounds.

Similarly, social service providers, community member discussion group participants, and survey respondents reported that they would call the team and use their services in a non-life-threatening situation. Only some downtown business owners voiced concerns about the usefulness of calling this team to respond to their current needs for which they currently call law enforcement.

The Ann Arbor community is passionate for and interested in ongoing engagement in the development of an unarmed crisis response team to support their community. They hope that this team will provide better outcomes for those in crisis, reduce opportunities for harmful police interactions, divert individuals from the criminal justice system, and connect community members with needed resources.

Recommendations

The following recommendations are based on the feedback received across all of the community input activities. Each recommendation is provided with supplemental context based on the community feedback. For more detailed information for each engagement activity, please see the activity-specific deliverables available in the appendices.

Service Delivery

Overall, the community wants services to be dictated by the needs of the community. Based on their personal experiences and their understanding and experience of community needs, community members identified several key services as essential for the team to provide.

Train, equip, and staff the team to provide a variety of services to support the community. Key services to provide include those listed below:

- **Mental health support**: Community members regularly cited their own experience and how traumatic it was for them to have police respond to their crisis rather than trained providers.

- **Welfare and wellness checks:** According to social service providers, wellness checks rarely require police. Community members noted that wellness checks often have a disproportionate number of emergency response vehicles, such as an ambulance, fire truck, and a police cruiser for one call.

- **Homelessness support:** Police are regularly called to respond to concerns around unhoused individuals, but the police are not well positioned to address housing issues and there is a gap in the availability of emergency housing resources. Two existing homelessness resources, Washtenaw County Community Mental Health (CMH) and the Projects for Assistance in Transition from Homelessness (PATH) program have limited hours and are unable to fulfill the current demand for emergency shelter and support.

- **Substance use support:** Although many public places now carry Narcan, an emergency opioid overdose treatment spray, there is a continued need for substance use support services for non-life-threatening situations.

- **Resource connection:** The community repeatedly identified connecting people in crisis to services as an integral component of its service delivery and essential to ensuring people in crisis have an improved outcome. The team should understand existing resources, the current capacity of those resources, and know how to refer people to those resources.

Conduct research and additional community engagement on offering an unarmed response to domestic violence calls. The community is divided on whether the team should handle DV situations. Many do not think it should because DV calls can be some of the most dangerous calls that police officers receive. And, if a situation escalated, this team may not be adequately prepared to handle the situation. Others, however, felt that some DV victims do not call the police because they do not want their partner to be arrested or they do not see their situation as rising to the level of needing armed support. Some community members think this team could handle some DV situations and could help individuals who need to leave a violent situation be connected with resources.

Consider providing additional services such as offering postcrisis, short-term follow-up; addressing minor juvenile infractions; and offering phone-based situational assessments. Phone-based support may resolve the crisis and could offer an assessment to determine what follow-up is needed.

Team Composition, Skills, and Training

Community members identified essential skills and attributes for the team and proposed recommendations for well-rounded team membership.

Create a team with diverse skills and credentials. The types of team members identified as a high priority by forum and discussion group participants included social workers, outreach workers, mental health professionals, substance use counselors, and mediators. Other possible team members included peers or people with lived experience, trained medical responders, legal professionals, members of the clergy, and university staff or students.

Train team members in de-escalation and conflict mediation. The need for de-escalation and conflict mediation skills came up in every discussion group and public forum. Ensuring team members are skilled in providing a trauma-informed response will promote successful de-escalation and conflict resolution.

Ensure the team reflects the community it serves and is prepared to respond to a variety of needs. Community members emphasized the need for team members to be culturally conscious, diverse, open-minded, and able to respond without bias. They also said team members should be accessible to all community members, including multilingual residents and those who use American Sign Language.

In addition, community members asserted that team members responding to each call should be tailored to the crisis. For example, ensuring a mental health professional is dispatched when appropriate or making sure that female team members are present when calls are related to sexual assault or domestic violence against a woman.

Offer mental health support and fair compensation. Due to the high level of stress these team members would be experiencing and the documented high rate of social worker burnout, community members suggested that team members have access to on-the-job mental health support. They also emphasized the need to provide sufficient salaries to recruit and retain team members, which will contribute to low turnover and, in turn, aid community relationship building.

Accessing the Team

Community members offered several recommendations for ensuring access to the team, including directly, through 988, and through 911 dispatch. They emphasized the importance of offering multiple access channels.

Create an avenue for direct access to the team. Community members suggested creating a specific phone number for reaching the team by voice or text, a mobile app, and/or a website with the capacity for a live chat. They said it is important to be able to access the team directly rather than through 911 due to some community members' distrust of police.

Ensure coordination with the statewide crisis response line (988). Community members said the team should be included as an option for 988 call center operators to offer to callers. This will likely require deliberate coordination with the state's Michigan Crisis and Access Line (MiCAL), which operates 988 in Michigan.

Allow access to the team from 911 dispatch. Community members suggested that, in a time of crisis, people may not remember a new number or have time to look it up, so being able to access the team through 911 is important. Participants stated that the unarmed response option should be available to any Ann Arbor resident accessing 911.

Address liability concerns. Concerns expressed by community members about the potential for being held liable for deciding to call the team rather than the police will need to be addressed to make sure people are comfortable accessing them.

Police Engagement

Consensus was divided on what level of engagement and coordination should exist between the unarmed crisis response team and law enforcement. The division was between those who believe police should be involved and those who believe the police should not be involved at all, or only involved if the team contacts law enforcement for support. Those in favor of police involvement cited their reasons as concerns about the unarmed team's safety without a police presence and police knowledge of the community. Regardless of the level of engagement, there was agreement that there should be established protocols regarding police involvement. The following recommendations reflect the areas in which there was consensus among community members.

Establish response protocols for police engagement. Community members said there should be a clear protocol for when police officers would be called to an unarmed crisis response team situation, if at all, and asserted that the team should have the authority to request emergency medical services without any accompanying police response. Likewise, they called for police officers to be trained in what kind of situations the team can address, how to engage the team, and what to expect when working with the team.

Establish training requirements and clear protocols for 911 dispatch operators. If callers access the team through 911, community members said it will be critical for dispatch operators to know which calls can be diverted. Additionally, protocols should be transparent and public so that when people call 911, they can know what to expect when the team is engaged through 911 dispatch.

Consider engaging the police in planning efforts. Some community members stated that the police should be involved in the planning of the team because of their knowledge of the community and the types of crises they are currently asked to respond to.

Consider offering the opportunity for the unarmed response team to accompany the police on public safety calls where appropriate. Described by the community as a current unmet need, the team could be available on-site when police respond to a crisis to ensure the rights of the individuals in crisis are protected and to provide them with additional resources and supports as needed. The police may benefit from de-escalation and mental health awareness training to effectively respond to all calls. These trainings could help clarify the types of situations in which police should engage the unarmed response team.

Program Administration

Overall, there was a lack of consensus about the administration and implementation of the team. Feedback was divided between a model run by the City (a newly created or existing city department that is not the police department) and a nonprofit (either contracting with, or independent from, the City). Regardless of the program administrator, the community wants to ensure the program operates smoothly and sustainably, with adequate oversight and without political influence. The rationale for support of each administration option and recommendations for their implementation are provided below.

Newly Created or Existing City Department

Rationale

Support for the team to be housed within city government was based on a perception among community members that this arrangement would increase accountability and sustainability.

Recommendations for Implementation

If the team is to be administered by the City, it will be important to establish policies in a way that insulates the team from political influence.

Nonprofit Organization

Rationale

Overall, the community, including about two-thirds of the community leader interviewees, suggested that a nonprofit established in the community would allow the team the most flexibility for providing services, with some adding that if it were run by a separate nonprofit, it could eventually serve communities beyond Ann Arbor. They also said a nonprofit would have the content and expertise to administer the program well.

Recommendations for Implementation

If administered by a nonprofit, community members called for ongoing organizational support. This support might include technical assistance geared toward general nonprofit management or a facilitated connection to organizations in other cities implementing a similar team. Participants specified that the administration application process should focus on the applicant's relevant experience (e.g., providing similar services, trained in trauma response), the professional and cultural diversity of the team, and previous community engagement with Ann Arbor residents.

Funding and Sustainability

While community members did not reach consensus on how the team should be funded, a majority support using existing city funds. They also emphasized the importance of sufficient funding to ensure the program's sustainability.

Reallocate existing city funds to support the program. Community members, including most interviewees, suggested that program funding be reallocated from the city's existing budget, including from the police budget and from the Washtenaw County Public Safety and Mental Health Preservation Millage. This approach was confirmed through the public survey, where most respondents (84 percent)

stated a preference for the team being funded through the reallocation of existing city funds and most (59 percent) disagreed with funding via a new tax assessment.

Sufficiently fund the program for success. Independent of administration model, community members said it is essential that the program be adequately funded to meet the community's needs. They expressed a concern that the program's goals may exceed its funding capacity.

Evaluation

When discussing program implementation, participants focused on evaluating its success using both quantitative and qualitative data, establishing partnerships for collecting and accessing data, and ensuring transparency.

Establish performance metrics. Community members suggested that the team be evaluated using metrics like those used to evaluate law enforcement. Examples include call volume, response times, connections to other services, and call resolution rates, including how they were resolved. Participants urged the City to include the evaluation requirements and metrics in requests for proposals and any associated contracts.

Gather feedback and data from community members and people receiving services. Community members expressed the desire to have continued opportunities for feedback on the team planning and implementation once the foundations of the program and team are established. They also suggested collecting feedback from people who had accessed the team and collecting participant stories as a source of qualitative data.

Engage partners and other agencies in data collection. Community members called for the use of data from partners, including the number of referrals they receive from the team. They also recommended obtaining data from the University of Michigan Police Oversight committee regarding complaints against police officers once an unarmed crisis response team is available.

Share data openly. Community members called for a transparent method of reporting team data to the public, such as a public-facing dashboard that includes program evaluation metrics and qualitative performance measures.

Other Important Considerations

The following considerations are based on feedback received across all of the community input activities. The City should review and incorporate these into its team design where possible.

Community Coordination and Collaboration

The community stated their hope that the unarmed crisis response team to coordinates and collaborates with existing service providers, as evidenced in the community's identification of collaboration as a foundational principal in the team's development. The community also regularly raised concerns about the potential for duplication of efforts, which may be mitigated through thoughtful service coordination with existing providers.

Coordinate with existing crisis response efforts. Community members called for coordination between the team and other community organizations engaged in crisis response efforts. Participants specifically mentioned Washtenaw County CMH crisis response, SafeHouse domestic violence crisis response, the Supreme Felons crisis team, and the PATH homeless outreach program.

Collaborate with community social service providers. By drawing on the expertise of those currently providing social and human services in Ann Arbor, service providers felt that the team could increase both its capacity and that of the agencies with which it coordinates. The team could codify these partnerships with memoranda of understanding that outline expectations and roles for both parties.

Identify and address gaps in social service provider capacity. Community members suggested that the City assess and identify gaps in the current network of social service providers based on community need and consider providing supplemental funding to address the gaps. This assessment might include reviewing police data to determine the most frequent social service referrals.

Public Outreach and Education

Participants broached the subjects of public outreach, targeted education, public perception, and continued community engagement throughout all feedback-gathering activities.

Engage in a broad public education campaign. Community members prioritized the need for community education and outreach as an important consideration for successful implementation. Specifically, the need for education about what the program is, when to call it, how to access it, and what to expect from the team.

Brand the team in a welcoming manner. Marketing and branding will contribute to positive first impressions of the team and the success of the program. Community members discussed the need for a nonthreatening and welcoming name for the team, which would encourage people to call and use its services. The word "crisis" in "unarmed crisis response team" was perceived as potentially aggressive; they instead suggested to consider a name that describes the caring professionals who staff it and the services offered.

Educate community resources and service providers. Community members identified the need to educate all community service providers about the team, not only those in direct collaboration, to make sure agencies are aware of the team, its capacity and role, when to call, and what to expect (e.g., team member interactions, agency referrals, and short-term follow-up).

Establish a community presence. Participants proposed that the team have an active presence in some key locations around the city, such as the library, transit center, YMCA, and downtown businesses, rather than only responding to calls. Many felt that a frequent presence would aid in de-escalation and mediation to avoid law enforcement and build trust in the program to increase utilization.

Appendix A: Methodology

Public Sector Consultants (PSC) conducted a multiphased approach to collect community member input on the development of the unarmed crisis response team. To begin, the city and deputy city administrator identified 13 community leaders for PSC to speak with to gain an initial understanding of key development considerations for the team. Following the interviews, PSC worked with social service providers to recruit community members who may not typically be engaged in the community to provide their input on how this team should be formed. PSC facilitated ten conversations with 65 community members, three conversations with 19 social service providers, and one conversation with six business representatives. PSC asked participants to share their input on the following topics: intended goals and values, operational considerations (i.e., whether the team should operate inside or outside of city government), what types of services it should provide, and how the program should be funded and evaluated.

Engaged Organizations

To support the City of Ann Arbor in its mission to engage populations that typically are not reached during community engagement processes, PSC worked with the City to develop a list of key populations and related organizations that should be engaged. PSC identified the following targeted populations: people who have had experience with the criminal justice system; people who engage in sex work; people who are housing insecure; people who are unhoused; people with behavioral health challenges; people involved in faith-based groups; youth, immigrants and refugees; and people living with a disability. Between the months of August and December 2022, PSC contacted over 60 social service providers via email multiple times to invite them to participate in various engagement activities. Upon request, PSC will provide a full list of social service organizations contacted.

Interviews

PSC conducted 13 interviews with community leaders identified by the Ann Arbor city and deputy city administrators in August and September 2022. The interviews gathered input on the following topic areas: intended goals and values, whether the team should operate inside or outside of city government, what types of services it should provide, and how the program should be funded and evaluated. PSC compiled notes from the community leader interviews and conducted a thematic analysis. PSC worked with the city and deputy city administrator to identify interviewees for these conversations. The summary from these interviews is available in Appendix B.

Discussion Groups

PSC facilitated 11 community discussions with community members throughout November and December 2022. The community discussions were held with several key populations to solicit a variety of perspectives, including people who struggle with housing and homelessness, immigrants, youth, and individuals who were formerly incarcerated. PSC reached out to local social service organizations in the community to help recruit community members for conversations. During initial conversations, PSC worked with organizations to learn about community members' preference for in-person or virtual conversations. PSC worked with organizations to determine whether they had existing events during

which PSC could solicit feedback. If joining an existing event was not feasible, PSC partnered with organizations to create events for community members to share their input. PSC created printable flyers and online registration pages to aid organizations in their recruitment efforts. Then PSC facilitated 11 60-minute conversations with 70 community members to understand their perspectives related to the development of the team. Community members were provided food and a $25 Visa gift card in appreciation for their time. PSC compiled notes from the conversations and conducted a thematic analysis. The community member discussion group summary is available in Appendix C.

In tandem with community conversations, PSC worked with social service providers, business owners, and business districts to hold four discussion groups. PSC reached out to more than 60 social service providers to invite them to participate in one of three social service provider discussion groups. Overall, PSC spoke with 19 social service providers across 11 different organizations and six business leaders. Social service providers were asked to share their expertise, visions, and concerns about how this program should be designed. PSC worked with representatives from Ann Arbor business districts to recruit local business owners to share their input on how this team should be designed. PSC compiled notes from the conversations and conducted a thematic analysis. The social service provider summary is available in Appendix D.

Public Survey

PSC developed a survey to gather community member input on key considerations for the development of the team. Community members were asked to prioritize goals and values, rank services they would like to see offered, and respond to other administrative questions. The City of Ann Arbor distributed the survey using its Opentownhall platform and had paper copies of the survey available at the Delonis Center, Ann Arbor City Hall, and the Downtown Ann Arbor District Library. PSC also created an online copy of the survey in collaboration with the SafeHouse Center to offer a way for survivors of domestic violence to provide feedback anonymously. Overall, 1,556 community members responded to the survey. PSC conducted quantitative and qualitative analysis on the public survey responses. The survey summary and the list of survey questions are available in Appendix E.

Public Forums

PSC held three public forums during the month of January to share preliminary findings from previous feedback-gathering activities and gather additional input on how the team should be developed. PSC worked with the Ann Arbor District Library to hold two in-person public forums, at the downtown branch and the Pittsfield branch, with the final forum taking place via Zoom. These in-person locations were selected based on their proximity to public transit and availability of no-cost parking, and the forums were scheduled at different times of day to encourage participation. PSC created printable flyers with information about the public forums and distributed them to more than 60 social service providers along with community members who attended a discussion group. The City of Ann Arbor also shared a press release about the events and marketing materials that included information about the forums. Approximately 70 community members attended these public forums to learn about preliminary finds and to voice their insights on this process.

Appendix B: Summary of Community Leader Interviews

November 2022

Background

The City of Ann Arbor hired Public Sector Consultants (PSC), a Lansing-based research policy consulting firm, to gather community input on the development of an unarmed crisis response team. As a part of the engagement process, PSC conducted 13 interviews with community leaders identified by the Ann Arbor city and deputy city administrators in August and September 2022. The interviews gathered input on the following topic areas: intended goals and values, operational considerations (i.e., whether the team should operate inside or outside of city government), what types of services it should provide, and how the program should be funded and evaluated. PSC compiled notes from the community leader interviews and conducted a thematic analysis.

Interview Findings

Community members were unified in their belief that the unarmed crisis response team would support community members' needs; however, there was no consensus among interviewees regarding how it should operate.

Intended Goals

Community leaders agreed the unarmed crisis response team should treat community members with respect and dignity, be care-based and connect people to needed resources instead of punishing them, and be life affirming by offering people the choice of how and when to access services. Interviewees highlighted that community members want an alternative to a police response, there is a desire for the team to build community relationships, and they would like to see the team reduce the level of behavioral health and social services provided by police. This team would be composed of social workers, community members, and other relevant social service workers. When community leaders described what they hoped the team would achieve, they reiterated those values through the goals listed below.

Provide an Alternative to Police Response

Several community leaders hoped an unarmed crisis response team would offer an alternative option to a police response. Leaders commented that the current system situates police as the de facto response team to handle a multitude of situations for which they are not trained.

> Someone in a mental health crisis needed to be transported to mental health services and treated with respect; however, when police arrived, this person was instead arrested and given a criminal record instead.
>
> —Interviewee

Connect Community Members with Needed Resources

Interviewees stressed the importance of connecting community members with the appropriate resources. Some community leaders wanted a team that not only provided referrals to community resources, but also connected community members to those resources. The team would have the capacity to provide immediate and long-term follow-up; however, they would not work as case managers.

Build Relationships with Community Members

Interviewees mentioned the importance of the team having relationships with community members. One interviewee noted that, as with community policing, relationships in the community are key for the crisis response team member to operate effectively. A few community leaders also added that they hoped the team would draw on existing community member expertise.

> There are people that have skills and trainings that would be valuable for an unarmed response team; however, they are typically not engaged in this work due to prior interactions with the criminal justice system.
>
> —Interviewee

Reduce Police Work

Several interviewees hoped the team would reduce the amount and type of non-police-related work done by law enforcement. Interviewees said police officers currently undertake tasks for which they may not have the appropriate skill set and believed the crisis response team will eventually take on work police departments currently manage.

Operational Considerations

Community leaders identified administrative supports that would be needed to create and sustain the program. Community leaders shared recommendations for who should run the team, who it would need to coordinate with, what services the team should provide, how the team should be accessed, and how it should be funded and evaluated.

Administration

Community leaders provided feedback on the administration of the team. Input was divided between a model run by the City and an independent nonprofit, with a moderate preference for an independent nonprofit model.

A Nonprofit-administrated Team

About two-thirds of community leaders preferred an independent nonprofit as the best candidate to meet the city's needs. They suggested that this model would allow the unarmed crisis response team the most flexibility for providing services, with some adding that if it were run by a separate nonprofit, it could eventually serve communities beyond Ann Arbor. Some interviewees also noted that they prefer a separate nonprofit because they did not trust the City to properly operate the program. Although these interviewees imagined the nonprofit as operationally separate from the City, they noted that the City would need to politically and financially support the program, emphasizing that it needs to be adequately funded to meet community needs.

Some interviewees voiced concerns as to whether a nonprofit organization should run this program. They noted that Ann Arbor's current nonprofits do not have the capacity or resources to develop an unarmed crisis response team and that the team could divide the nonprofit's focus and efficacy. Some were concerned about the potential for a nonprofit to be held accountable and adequately address program concerns since it would report to a board instead of city council. Additionally, nonprofit funding levels can shift, making sustainability a concern.

A City-administrated Team

Over a third of interviewees favored a team housed in a newly created department within Ann Arbor city government. They believed housing the program within city government would allow the team to be accountable for its response to the community through city council. Housing it within city government would offer more resources and expertise from which the team could draw from. Police and other city service providers would have expertise that could be leveraged to support the team's work. Advocates of this model reiterated that the team existing within city government would still require additional training for coordination with law enforcement and other entities.

Some interviewees were concerned about the ability of the team to operate without being negatively impacted by those who may oppose the program. They worried that this influence would stifle the team's ability to operate and serve community members. In addition, community leaders were concerned that housing the team within city government would make it easier to dismantle if support changed between administrations. A City-run model could be less willing to expand its service offerings.

Services Provided

Interviewees were in general agreement that the unarmed crisis response team should be able to provide services for the following situations:

- Behavioral health support and mental health crises
- Connecting community members with resources
- Homelessness support
- Intoxicated individuals
- Medical transport
- Nondomestic violence dispute resolution
- Providing a presence in the community
- Some acts of juvenile delinquency
- Welfare checks

A couple of interviewees shared that situations that could escalate into violence or involved a weapon should not be handled by the unarmed crisis team. Interviewees were mixed on whether the unarmed crisis response team should address domestic violence situations, reporting that sometimes a person may need help deescalating a situation but would prefer to not involve the police if it results in their partner being arrested. Additionally, a few interviewees noted that they did not want this team to do any case management.

Interviewees noted that the program could expand to handle additional types of needs or issues as its capacity and experience increases and they did not want to constrain the program to a specific set of services. They noted that some programs across the country were able to handle situations outside of their original focus after they gained more experience. Respondents believed the program should organically expand to handle community needs that arise by analyzing call trends into the team and 911 dispatch. Some respondents believed that the team should be allowed to decide whether they can safely and effectively respond to a particular situation.

Coordination with the Police and Other Entities

Interviewees universally agreed the team must coordinate with social service providers in the community to understand what resources are available and how to connect community members with these resources. When discussing police involvement, agreement about how to coordinate with law enforcement was split between those who believe that police should be involved as partners with the team and those who believe that the police should either never be involved or only involved if the team contacts law enforcement for support.

Those in favor of partnering and coordinating with law enforcement believed police could offer their expertise on the neighborhoods and houses that they frequently respond to by sharing information they have about those family's needs and issues. Some were open to police officers co-responding with the team to jointly address community member needs. Many interviewees noted that if a situation escalates when only the team was present, it would be important that the team could quickly and effectively connect with the police to provide support. Community members opposed to law enforcement involvement believed that police presence can escalate situations, which could create a more violent or aggressive situation than it would have otherwise been. Several interviewees highlighted that regardless of the team's coordination with law enforcement, police need additional de-escalation and mental health awareness trainings.

Access

In general, interviewees requested both a unique number to call the team and being able to reach it through 911, since people will contact 911 with crises that could be addressed by the team.

Separate Phone Number
Several community members mentioned the importance of having a phone number for the team that is separate from 911 to ensure community members are comfortable calling it. One interviewee mentioned their concern that law enforcement may listen in to the calls and choose to respond to a situation where law enforcement was not requested (or wanted), especially if calls are routed through the Washtenaw County Sheriff's Office Metro-Dispatch.

Multiple Ways to Reach People
In addition to a separate phone number, many community leaders mentioned the importance of being able to connect with the team by calling 911. They noted that even if there was another number, people will still call 911 if they are in crisis. Some said that if a 911 operator identified the call as appropriate for the team, the caller should be offered this as an option. Several leaders mentioned that operators would need to be trained on how to properly identify calls for an unarmed response. A key point mentioned by some interviewees was that regardless of the operator offering the team, the caller should be able to request and have access to this option. Some interviewees noted it may not be possible to divert calls from 911 to an team under the current 911 system, which is run by the Washtenaw County Sheriff's Office, and is not seen as interested in an unarmed crisis response team. One interviewee suggested being able to request the team through a web portal where community members could enter information about their needs and be connected to the appropriate staff.

> It should be a variety of ways. It should have a dedicated number that they can call,
> to talk to the unarmed response. If they don't know the number, 911 should be able
> to route them to the [unarmed team]. If they call another governmental agency, it
> should be routed [to the unarmed team].
>
> —Interviewee

Funding

Interviewees did not have a clear consensus on how the team should be funded, identifying a variety of funding options. Several suggested that funding be reallocated from the city's existing budget, including from the police budget and from the Washtenaw County Public Safety and Mental Health Preservation Millage. A couple of individuals suggested using funding from the marijuana excise tax or adding a new tax. However, those who suggested a new tax noted that the funding should be reallocated from the police budget before community members pay an additional tax to fund the team. Some also realized that reallocating from the police budget may not be feasible right now.

Evaluation

Some interviewees believed that the unarmed crisis response team should be evaluated using metrics like those used to evaluate law enforcement. Interviewees offered examples of performance metrics like call volume, response times, rates at which people are connected with services, and call resolution rates along with how they were resolved. Multiple interviewees suggested collecting feedback from people who had accessed the team, specifically collecting participant stories as a source of qualitative data, and service utilization information to inform resource allocation. Additionally, interviewees mentioned that care would need to be taken to ensure performance measures were accurately tracking usable and relevant data. This information could be presented in a public-facing dashboard that monitors key metrics.

Concerns About Unarmed Crisis Response Team

Community leaders raised a variety of concerns. Nearly half were concerned the program would not be adequately funded to meet community needs and that the program's goals may exceed its funding capacity. This, they said, would set the program up to fail. Some respondents also feared the team might be used to target community members who complicate the image of a picture-perfect Ann Arbor in ways similar to how police can be weaponized against marginalized communities. For example, one interviewee said they worry that individuals will call the unarmed team on people struggling with homelessness or engaged in panhandling to get them to go away rather.

> I worry that the unarmed response team might be co-opted for publicity and as a
> good sound bite for city, but won't be reaching its goals.
>
> —Interviewee

Another concern brought up by interviewees was that Washtenaw County Sheriff's Office would prevent the team from operating efficiently. Community leaders mentioned that the sheriff has voiced his opposition for an unarmed crisis response team in Ann Arbor. Leaders are also worried that if the team had two-way communication with law enforcement, team members might be coerced to share information that could be used against them in court. All interviewees recognized that an unarmed crisis response team will not solve all of Ann Arbor's issues with law enforcement. Community leaders want to

ensure that law enforcement receives additional training on de-escalation and how to respectfully interact with all community members.

A few interviewees were uncertain what responsibilities an unarmed crisis response team would have in the City of Ann Arbor. Noting that similar work is already done by organizations like Washtenaw County Community Mental Health, the interviewees raised concerns about duplication of work and possible confusion for callers.

Appendix C: Community Member Discussion Summary

Winter 2023

Background

The City of Ann Arbor hired Public Sector Consultants (PSC), a Lansing-based research and policy consulting firm, to gather community input on the development of an unarmed crisis response team. As a part of the engagement process, PSC facilitated ten community discussions with 65 community members in November and December 2022. PSC focused on engaging community member groups whose voices are often excluded from public planning, such as people who struggle with housing and homelessness, immigrants, youth, and individuals who were formerly incarcerated. Participants received a $25 Visa gift card for their time. In-person discussion group participants were offered a light meal or snacks and beverages, depending on the time of the session.

Conversations touched on participant perceptions of the unarmed crisis response team, goals it should accomplish, its potential services, operational considerations such as program implementation and administration, and concerns about the team. PSC compiled notes from the small group conversations and conducted a thematic analysis. The key findings from these conversations are below.

Findings

Goals

Community member discussion group participants used a ground-up approach, beginning with the foundational principles, values, and goals they want the team to uphold and use to build a successful, community-based, and responsive team. The two main goals they said the team should aim to achieve are to reduce opportunities for interactions with the police and to provide better outcomes for people in crisis.

Reduce Opportunities for Harmful Police Interactions

Several participants shared their harmful and/or traumatic interactions with police, underscoring how important it is to them that this team reduces the opportunity for harmful interactions with law enforcement by limiting the types of situations the police respond to. Participants also said that the team needs to provide support and safety for those who do not need a police presence, such as those experiencing a mental health crisis or requiring a wellness check due to alcohol or substance use.

> "I hope it will help people feel comfortable [to seek help]. If a cop is there, that feels dangerous to people because if they make the wrong move, they feel like major consequences could happen. People need to feel comfortable being vulnerable and being open with the team and feeling like they are safe and protected."
>
> —Community member

Provide Better Outcomes for People in Crisis

Community members noted that an important goal for this team should be providing better outcomes for people in crisis instead of criminalizing issues. Participants recruited through the Michigan Immigrant Rights Center highlighted the need for support without the fear of deportation, which is widespread concern in the immigrant community. Participants said this fear is present among legal residents and undocumented residents due to the perceived lack of immigrant rights knowledge among police officers and because of the general attitude they felt law enforcement had about immigrants. Individuals with a history of incarceration also brought up the need for support and intervention without violating the conditions of their probation or parole. Interaction with police officers is often an automatic violation and limits the crisis support to which previously incarcerated individuals have access.

> "I believe an unarmed crisis team would not only respond to crises, but also potentially respond to a deportation call. Immigrants may not know their rights when dealing with law enforcement, or they can't speak English, so they're not able to advocate for themselves. Because a lot of law enforcement officials don't respect the rights of immigrants."
>
> —Community member

> "I don't call the police. Ever. When I got out of jail, the only rule was to not have police contact. If you have to contact them, they are going to be your worst enemy and get me in trouble with my parole."
>
> —Community member

Foundational Values

Participants described the following principles and values they want the team to embody:

- Compassionate, empathic, and open-minded—able to respond without judgment or bias
- Community based—know the available resources and leverage them to support the individuals in need
- Trauma informed—possess an understanding of how trauma impacts human behavior

- Culturally conscious and diverse team members that reflect the city's residents
- Flexible and responsive to changing community needs
- Accessible to all people—able to speak multiple languages and American Sign Language

> "[The team] should show up ready to listen. A lot of times the police show up not ready to listen and take the side of someone who looks like them or who they deem most trustworthy. [This team] needs to have the ability to assess the situation before they assume something."
>
> —Community member

Services and Skills

After establishing the identifying principles, values, and goals on which to build the unarmed crisis response team, community members created a list of services and skills the team should provide to benefit the community, including de-escalation, mental health support, and resource connections. Community members' prioritized list of services and skills, along with their commentary, are below.

De-escalation and conflict mediation. The majority of participants said de-escalation skills and conflict mediation are a high priority for the unarmed crisis response team. Many stated that their personal experiences might have had different outcomes if an unarmed responder had been an alternative to police intervention.

Mental health support. Mental health support is also a high priority and a trained team should assist in mental health crisis situations instead of police. Community members felt police do not have the training, experience, or mindset to best serve individuals undergoing a mental health crisis. Citing their own experiences, many said that a police response can create additional trauma.

> "I don't think that the police are the best initial response to manage a mental health situation. I used to be a police officer and a lot of us didn't want to go to these calls, not because we didn't want to deal with it, but because we knew we weren't the best resources to address their needs. A lot of these situations can be better dealt with through someone other than a police officer. It would be great to take the police out of the equation."
>
> —Community member

> "I would become suicidal when I was intoxicated. [The police] were trying to talk me down, but I was terrified because they had guns."
>
> —Community member

Crisis advocacy. On-site crisis advocacy is an unmet need in the community. An unarmed crisis response team should be available on-site during interactions that necessitate police interaction to ensure the rights of the individuals in crisis are protected and to provide additional resources and supports as needed. They noted that certain interactions, like those involving immigrants, eviction, assault, and domestic violence would benefit from a co-response that includes crisis support.

> "There could be situations where the unarmed team has to work with the police. Domestic violence, for example. The armed officer may need to make an arrest, but you need someone to help the victim and help the others in the house. Someone that can talk with kids [...]. You need the response team to make sure that family is taken care of. It can't just be the negative police experience."
>
> —Community member

Resource connection. The team members need to have a deep understanding of the existing community resources, be aware of the current capacity of those resources, and be able to refer individuals accordingly.

Postcrisis, short-term follow-up. Beyond resource connection, the unarmed crisis team should provide follow-up to ensure individuals are connected to the appropriate resources and help them find other options, if needed.

Homelessness support. Participants who are, or have been, unhoused themselves highlighted the need for an alternative to calling the police on an individual who has nowhere to go. Participants were familiar with the frequency with which the police are called to respond to these situations, when a person is seeking shelter or spending time in a public place. Community members disagreed with the current approach of criminalizing homelessness through police response and suggested that support include housing resource connections, access to temporary or emergency shelter, and short-term follow-up to ensure they connect to the resources.

> "People need to know that if they are having a mental health crisis, they can still call for help and not risk losing their housing or shelter options."
>
> —Community member

Substance use support. Substance use services are an unmet need. Community members acknowledged that many public places now carry Narcan, an emergency opioid overdose treatment, but that more supports are needed for people whose situations may not be life threatening, such as calls about public nuisance or public intoxication.

Welfare and wellness checks. The police response to the request for a welfare check is often excessive, such as an ambulance, fire truck, and a police cruiser for one call. Participants also described their personal experiences when it felt like the law enforcement individuals who responded acted like it was a waste of their time or placed undue suspicion on those calling for a welfare check.

Minor juvenile infractions. Some minor juvenile infractions may be addressed by the team instead of the police to avoid linking youth to the criminal justice system at a young age. Some community members stated they understand the need for intervention or support, but that they will not call the police for fear that doing so will cause youth undue harm.

Phone-based situational assessment. Participants said they saw the benefit to phone-based support that might include a situational assessment followed by a recommendation of when to call the police, resource referrals, and/or safety-related planning. The phone conversation may be in lieu of an in-person response or a step to complete before requesting an in-person response.

Operational Considerations

Community members shared recommendations on how the team should be accessed, how it should coordinate with other providers, and how it should be administered.

Access

Participant responses echoed those of the social service providers and community leaders in calling for multiple ways to contact the unarmed crisis response team. Access ideas included the team's own phone number, text, a mobile app, or website with the capacity for a live chat, as well as through 911 dispatch. In a time of crisis, people may not remember a new number or have time to look it up necessitating access through 911. Community members want to be able to request unarmed crisis response instead of leaving it

to the discretion of a 911 dispatch operator. As with social service provider responses, community members cited the need for a stand-alone number because of police mistrust.

> "People I know avoid calling 911 for fear of deportation, fear of law enforcement not reacting appropriately, fear of police brutality, fear of police abusing power. A separate number might make the community more confident about reaching out and not be afraid of having the police/authorities arrive."
>
> —Community member

Like social service providers, community members also suggested integrating the team into the community to address situations where law enforcement is frequently called up but which could instead be handled by the team. Situations named as appropriate for the team included wellness checks, substance use help, and supporting unhoused individuals at the library, transit center, and in parks. An active community presence will build trust in the program and increase utilization.

> "The team should go where the crisis is. The crisis is folks without a place to go or shoes to wear. It would be good to have the team at bridges, bus stops, and train stations. Wherever people who don't have a place to go end up."
>
> —Community member

Coordination with Police and Other Entities

Community members emphasized the importance of collaborating with existing community organizations engaged in similar work, such as the Community Mental Health (CMH) crisis line and the Supreme Felons Crisis Response Team. Some were concerned about coordinating with the CMH crisis line due to its established practice of a co-response with law enforcement, but overall, participants said collaboration is needed to avoid service duplication.

Community members said the unarmed crisis response team should involve police only at the team's request. They want a clear understanding of when police officers would be called to a requested unarmed crisis response and that those expectations need to be reinforced through consistent interactions to build community trust in the team. Additionally, community members should be able to request emergency medical services without the police response, which are currently integrated. They suggested that police officers should focus on safety and potentially violent encounters and that the unarmed crisis response team should focus on providing support, intervention, and resource connections.

> "For me, the likelihood that I would call [the unarmed crisis response team] depends on how much I believe they are different from police, and how much I believe that if I call them the police will not show up. Part of it is building the trust that they are different from police forces. I would definitely call them in moments of crisis if I believe they were different and wouldn't bring police."
>
> —Community member

Program Administration

Community members agreed that a nonprofit or a network of nonprofits should administrate the unarmed crisis response team. Participants did not differentiate between a nonprofit contracting with the

City and a nonprofit independent from the City. Overall, community members felt that a nonprofit established in the community would have the context and expertise to administer this program well, especially if they were already implementing related programming (i.e., trained in trauma response, homelessness support, and substance use support). Participants specified that the administration application process should focus on the applicant's relevant experience, the team's professionalism and cultural diversity, and previous community engagement with Ann Arbor residents. Participants expressed concern over a new nonprofit being established to administer this program without existing community roots and a proven track record.

> "You have to be in the community, and you have to know the people, and they have to be able to trust you. If you are going into a crisis and you don't know the people, you aren't able to be as helpful. In a crisis it's good to have social workers, but you also have to have grass roots people and people doing this at different organizations. This team needs to understand what is already happening around the community."
>
> —Community member

Team Composition and Support

Participants also suggested partnering with a local university program for staffing and program development, such as graduate-level social work or counseling programs at the University of Michigan or Eastern Michigan University. They suggested the teams could provide paid internship opportunities for students, integrate classes on crisis management and de-escalation into school curriculum, and include faculty members on the team or as advisers.

In addition to ensuring team members' physical safety without an armed response, which participants raised in every conversation, the mental health of team members was a discussion topic. Participants were concerned that because of the situations the team would respond to, the team may experience a high level of stress that could lead to social worker burnout and high rates of staff turnover. Community members suggested that unarmed crisis response team members have access to built-in mental health support. They also feel that sustainable and sufficient program funding will be key to ensuring recruitment and retention of qualified staff for this team.

Other Considerations

Sustainability

Community members shared concerns that if the unarmed crisis response team cannot show its efficacy, it would no longer be funded. Participants suggested creating a pilot program first to work out the process on a small scale and to collect data to show its effectiveness. A smaller scale may include a limited geographic area or limited variety services. This, they said, may help ensure the program's success and increase the likelihood of continued funding.

> "If this program doesn't make a difference, they are not going to get funded. If they aren't helping people, they won't stick around. They need to show that they make a difference."
>
> —Community member

Program Marketing and Education

Participants called for a strong education campaign describing what the program is, how and when to access it, and what to expect when the team responds to a call. They were concerned that without adequate marketing and communication, the team will be underutilized. Key audiences for the education campaign include community members, community organizations, police officers, and 911 dispatchers.

Additionally, several participants shared that the name "unarmed crisis response team" is potentially "aggressive" and "unfriendly" and may keep people from using it. They recommended a name that is nonthreatening and welcoming, that better describes the caring professionals who staff it, and that does not use the word "crisis."

> "[Find] a way to market it that is more therapeutic. "Unarmed crisis" sounds very serious, maybe it doesn't have to be a crisis. Words are very powerful and unarmed forces already creates a negative, bad, escalated sense of urgency."
>
> —Community member

Program Accountability

Participants frequently discussed transparency and accountability. They wanted to know to whom the unarmed crisis response team will be accountable and that the City widely communicate this when the team is launched. Also important were publicly visible success measures, team outcomes, and solicitations for additional feedback. There should be transparency on the services offered, the data that are collected and shared, and the funding sources. Community members were also concerned about how long it would take for this program to be implemented and suggested that the City communicate updates about its progress and timeline.

Participants were concerned that the team's implementation will ignore community recommendations and cited a previous experience in which they did not feel listened to during discussions about the City's police department. Participants said they felt that their recommendations were watered down and not implemented with fidelity to the initial recommendations, and then the reforms lost momentum. Community members urged the City to follow through with their promise to base the program on community input.

Discussion participants expressed a desire to continue being engaged in program planning. They requested opportunities to offer feedback on the City's implementation request for proposals or on a description of a proposed model. Feedback sessions could include public comment or input sessions.

Appendix D: Social Service Provider and Business Discussion Summary

Winter 2022

Background

The City of Ann Arbor hired Public Sector Consultants (PSC), a Lansing-based research and policy consulting firm, to gather community input on the development of an unarmed crisis response team. As a part of the engagement process, PSC facilitated three virtual conversations with 19 social service providers from across 11 organizations and held one virtual conversation with six Ann Arbor–based business leaders. The conversations touched on their perceptions of the unarmed crisis response team, operational considerations, potential services to provide, coordination with other service providers, and concerns about the team. A summary of these conversations is below.

Findings

Goals

Service provider discussion group participants used a ground-up approach, beginning with the goals that they would want the team to accomplish.

Provide an Alternative to Police Response

Social service providers shared that they hope the team will be an alternative to police response and noted that this team should provide services for those who may not feel comfortable contacting or may not need to contact police to resolve a situation. A few social service providers noted:

> "[We need to] redefine how we define crises and what the outcome should be. Right now, the police respond . . . and crisis is criminalized."

> "[We need to remember there are] situations where people aren't going to call the police. They need people they will open the door to when they may not want to call the police."

Similarly, business leaders thought this team would be helpful for when there are unauthorized people loitering on their property, usually unhoused individuals. Business leaders expressed hope this team will provide a timely response, connect people to resources, and reduce the need for police intervention. However, business leaders were skeptical that this team would be appropriate for addressing additional issues in downtown Ann Arbor, such as aggressive panhandling, harassing customers in their place of business, and repeated and frequent interactions with the same individuals. One business leader noted:

> "Our needs are very different downtown than the rest of the community and that gets lost in the conversation. We have so many people concerned about neighbor disputes and family members and mental health crisis in their home. For those calls, this program might be phenomenal, but it might not work downtown."

Address Service Gaps and Immediate Needs

Providers felt this team should fill service gaps not covered by current programs, such as expanded hours for homelessness outreach and the addition of services like wellness checks and resource connections for individuals not in an immediate mental health crisis. The service providers acknowledged that many of the services cited as unarmed crisis response priorities are areas that are currently unsupported by existing programs due to program capacity.

Services and Skills

Through discussion, participants created a clear list of services and skills the team should provide to benefit the community, including de-escalation, resource connections, welfare checks, and postcrisis follow-up, among others.

De-escalation. Many social service providers had engaged in de-escalation or had experienced situations in which individuals could have been better served had de-escalation been undertaken. Providers also proposed that de-escalation and conflict resolution skills could be shared with the community members involved in the experience as a learning opportunity to use those skills in the future.

Resource connection. Providers highlighted that the team members would need to have a deep understanding of what resources are available, the current capacity of those resources, and how that capacity may affect individuals referred there. A social service provider stated:

> "There needs to be a solutions-based response where individuals are getting the care and resources they need so that we do not have the recidivism of whatever the problem was in the first place. Connect people to resources."

Welfare/wellness checks. Based on their experience, providers felt police are rarely needed to conduct wellness checks on someone's health or well-being related to substance or alcohol use. They expressed concern that a response involving police may escalate what began as a wellness check into a larger issue.

Postcrisis, short-term follow-up. Participants stressed that resource connection needs to be more than handing someone a phone number to call and that individuals accessing this team would need help navigating resource connections. Short-term follow-up would not replace long-term case management but could offer support for addressing the immediate concern to which the team responded. A social service provider noted:

> "My hope would be with a crisis response team there would be follow-up and not expecting someone in crisis to be able to navigate whatever system [they are referred to]."

Homelessness support. Service providers strongly voiced that no one should be put in jail for not having housing but that there is a gap in available emergency housing resources. Washtenaw County Community Mental Health (CMH) and the Projects for Assistance in Transition from Homelessness

(PATH) program support housing crisis Monday–Friday, but the need is greater than what these programs currently offer.

Substance use support and mental health support. Providers hoped the team members will have the skill to address both the physical and mental health of any individual to whom the team responds.

Providers were divided on whether this team should handle domestic violence situations. A large majority of providers did not believe this team should handle domestic violence calls, noting that these are already some of the most dangerous calls that armed police officers receive. If a situation escalated, this team would not be adequately prepared to handle the call. A few service providers felt that this team could handle some kinds of domestic violence situations, such as helping an individual who needs to leave a violent situation and be connected with additional resources.

Operational Considerations

Social service providers and business representatives shared recommendations on how the team should be accessed, how it should coordinate with other providers, and how it should be administered.

Access

Similar to community leader interview findings, providers and business owners felt the team should be accessible via multiple channels, including 911 and a separate number. Providers mentioned that it would be helpful to have a separate number for those who are uncomfortable contacting 911 due to concerns about the police arriving unrequested or the possibility of 911 sharing data with law enforcement. Due to social conditioning to call 911 in an emergency, some also said it is crucial for people to be able to access it through 911 and have dispatch operators be able to divert appropriate calls to the team. If the unarmed crisis response team were to be accessed through 911, providers noted that it would be critical for dispatch to be properly trained to know which calls can be diverted. They also recommended access by text and through a web portal.

Participants stated that another avenue to access the unarmed crisis response team should be through their active presence in the community, especially in some key locations around the city, such as the library, transit center, YMCA, and downtown businesses. This could be a way for the team to engrain themselves in the community, be familiar with common individuals and situations, and be available for continuity of services. Providers felt that a frequent presence would aid in de-escalation and mediation to avoid law enforcement. One social service provider said:

> "If the response team had zones where people could get to know them as individuals and build relationships and trust, that trust could be developed so that people seek out their services. [This team needs to] belong to the community, not be outsiders. They can be there in positive times, not just negative ones."

Coordination with Service Providers and Police

Service providers highlighted the need for collaboration and coordination between the team and community service providers to ensure individuals reach resources to address underlying issues, which could help reduce the likelihood of a similar crisis occurring for that individual again in the future. Providers encouraged the team to be mindful about service duplication and ensure opportunities for coordination. Some providers noted that they would not like this team to provide "a piece of paper" to

community members and pass them off to another service as is the case with a general referral. Instead, they imagined this team would ensure the individual is connected to needed resources through the use of short-term follow-up. Business owners also noted the importance of this team collaborating with homelessness and housing providers to connect people who need these supports.

Service providers thought this team would need to coordinate with law enforcement; however, there was disagreement over the level of collaboration. Some said the team should work closely with police so they can easily contact them if necessary, such as in instances where the conflict has escalated beyond the capabilities of the team. Some said they would worry about the team's safety if there were no law enforcement on standby. They wanted officers to be aware of the details and locations of the team. Conversely, a few providers said this team would need to be careful *not* to work too closely with law enforcement for fear of diluting the goal of reducing potentially harmful or traumatic interactions with police officers. These providers stated that this team should not share information with the police department about individuals served due to privacy concerns.

Overall, business owners felt this team should work closely with law enforcement and if they do not, they did not believe this team would be useful for addressing downtown businesses' needs. They noted that this team would benefit from law enforcement's expertise and experience working in the community.

Program Administration

Participants discussed the possible models of administration for the team and were divided on whether it should be administered through a nonprofit or Ann Arbor city government. Discussion participants did not differentiate between a nonprofit contracting with the City and a nonprofit independent from the City. Most providers were in favor of the team being operated by a nonprofit entity because of a nonprofit's flexibility to allow the program to grow and change depending on needs. They noted that this would be unlikely if administered by the City. Providers also acknowledged that a nonprofit could not handle this alone and there would need to be a network of nonprofits working together to successfully implement this program. One social service provider said:

> "I lean toward nonprofits [administering] and away from the city. I think we are trying to lean away from the bureaucratic nature of that sort of thing. Nonprofits also have people with the knowledge, and they are [already] doing this kind of work in the community, and that seems like a better fit."

Overall, business leaders supported city administration and were opposed to the team being operated by a nonprofit due to concerns about a nonprofit's accountability as opposed to the accountability of a City-managed team. If the administration of the program were housed within the city government, a few business leaders requested that the team be a part of the police department to encourage coordination. Furthermore, if operated by a nonprofit, they recommended that coordination with law enforcement be required and enforceable.

Other Considerations

Program Values

Providers identified foundational principles and values that they would want the team to uphold and use to build a successful, community-based, and responsive team:

- Compassionate and empathetic
- Consistent—Build trust through a reliable team response and experience
- Community based—Know the available resources and leverage them to support individuals in need
- Solution-driven—Connect individuals with existing community resources and help them address their immediate crisis
- Trauma-informed—Possess an understanding of how trauma impacts human behavior
- Culturally aware—Support all community members (including the ability to speak multiple languages)
- Collaborative—Work with service providers within Ann Arbor's social service ecosystem to provide wraparound support

Community Education and Outreach

Participants discussed the need for community education and outreach as an important consideration for successful implementation. Specifically, providers focused on the need for education about what the program is, when to call it, how to access it, and what to expect from the team. They identified a wide variety of populations that would need to be targeted in an education campaign, including police officers, access managers (potentially 911 dispatch operators), community members, and social service providers.

Ongoing Input Opportunities

Additionally, participants wanted to have continued opportunities for feedback on the unarmed crisis response team planning and implementation. Social service providers and business owners were overwhelmingly appreciative of being asked their perspective on this project, but many would like to respond to a proposed structure. They suggested creating a feedback loop to help shape how services are delivered once the program foundations are established. They recommended holding opportunities for public comment on the implementation request for proposals and creating additional feedback sessions during the first year of implementation.

Concerns

In addition to the stated concerns related to administration, coordination with community organizations and police, and the utilization of the team in the downtown business district, another concern was that this team's efforts may duplicate existing crisis response teams, notably the CMH crisis response team as well as the SafeHouse Center domestic violence crisis response team and the PATH homeless outreach. Unarmed crisis response team members' awareness of existing community resources and collaboration with existing services will be key to this program's success.

Participants across the provider and business discussion groups were concerned about program sustainability. Independent of the administration model, they were concerned the program will be underfunded and/or given too many focus areas to be successful. Service providers are familiar with the fluctuations of funding and its effects on programming and emphasized that the program's sustainability and success rely on continued and sufficient funding. One social service provider said:

> "The last thing I want to see happen is an unarmed response team for two years and then it goes away because the structure doesn't have the stability it needs because it doesn't have funding."

Conclusion

Overall, the input from social service providers was consistent with community leader interviews conducted in summer 2022. Social service providers and business leaders hoped that this team would offer an alternative to police response and provide care that is empathetic, compassionate, trauma informed, and responsive to the community's needs. Additionally, providers stated that they want to see the team's services address current service gaps. They want the team to be highly skilled in de-escalation and able to connect people to resources and conduct wellness checks.

Participants voiced their preference for accessing this team through multiple channels, including 911, a standalone number, and the team's community presence. Providers and business leaders highlighted the need for collaboration among existing social service providers and connecting individuals to community resources but had mixed feedback about the proper level of collaboration with law enforcement. Participants discussed various administrative models for the team and were divided on whether it should be administered through a nonprofit or by the City. Overall, social service providers preferred the idea of a nonprofit or group of nonprofits administering the program.

The key concerns that arose in conversation included how to best work with the police, possible duplication of current social services, and program sustainability. Participants raised several considerations, including the need for a robust education and marketing program included during program rollout and the continued desire to be involved in team planning and implementation.

Appendix E: Ann Arbor Unarmed Crisis Response Team Community Survey Summary

February 2023

Background

The City of Ann Arbor hired Public Sector Consultants (PSC), a Lansing-based research and policy consulting firm, to gather community input on the development of an unarmed crisis response team. As a part of the engagement process, PSC conducted a community survey on the goals, design, and implementation of an unarmed crisis response program.

The community survey was available from Friday, September 16, 2022, to Friday, November 4, 2022. It was available as an online electronic survey and as a paper survey. The electronic survey link was posted on the City's website, sent as an email to all Ann Arbor residents who had signed up for survey opportunities, and emailed to social service and community organizations throughout Ann Arbor with a request to complete the survey and to share it with their members. A downloadable survey was also available on the City's website and paper copies were made available at the Ann Arbor Library and the City Clerk's office. There were 1,568 survey responses. The survey results are provided below.
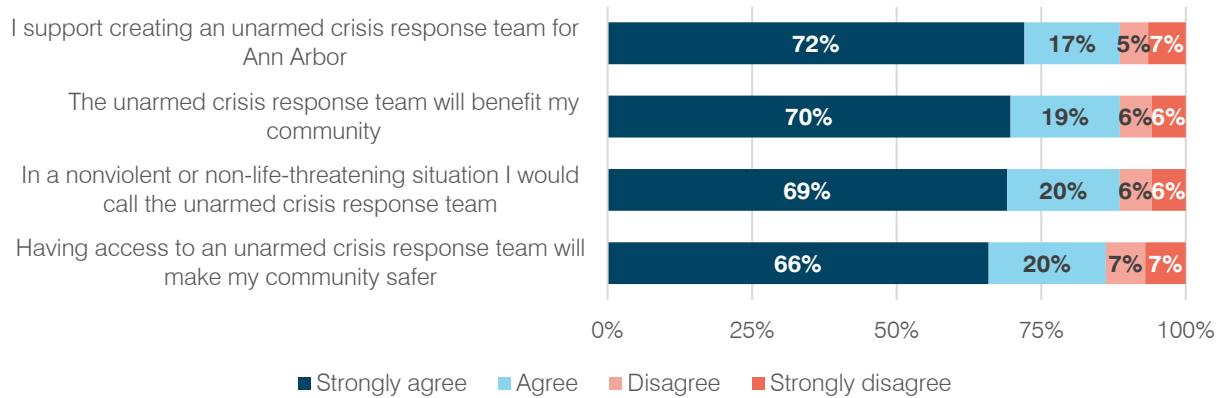
Community Survey Responses

General Support and Use

Survey results show that there is strong public support for an unarmed crisis response team. Most respondents (89 percent) agreed or strongly agreed with creating the team, that they believe it would benefit their community, and that they would use it for non-life-threatening crises. Furthermore, most respondents (86 percent) also strongly agreed or agreed that it would make their community safer.

Those who disagreed with the creation of the team shared their perspective in the open-ended survey comments. These themes included discouraging the City to separate this team from the police department, concerns about duplication of services among social service providers, and unease about the safety of residents and team members.
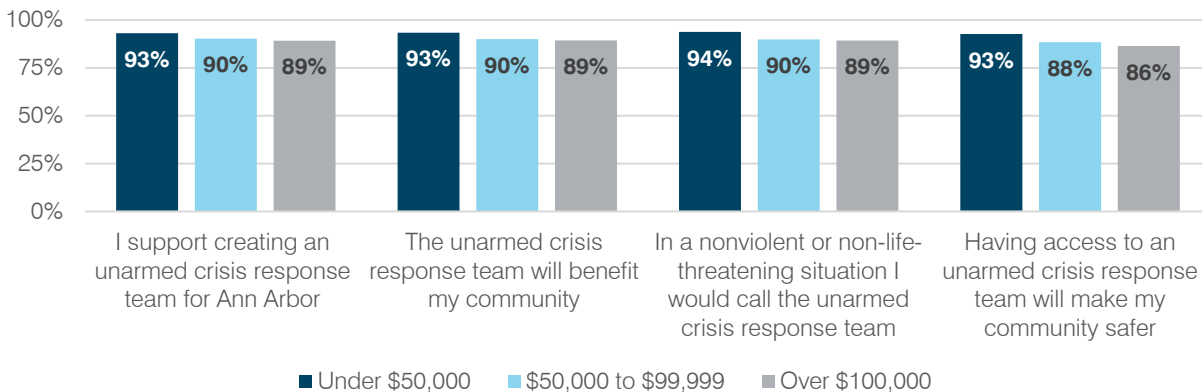
EXHIBIT E1. Support for an Unarmed Crisis Response Team

Statement	Strongly agree	Agree	Disagree	Strongly disagree
I support creating an unarmed crisis response team for Ann Arbor	72%	17%	5%	7%
The unarmed crisis response team will benefit my community	70%	19%	6%	6%
In a nonviolent or non-life-threatening situation I would call the unarmed crisis response team	69%	20%	6%	6%
Having access to an unarmed crisis response team will make my community safer	66%	20%	7%	7%

■ Strongly agree ■ Agree ■ Disagree ■ Strongly disagree

N = varied by question between 1,529 and 1,546. Note: Percentages may total more than 100 due to rounding.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC.

There was strong support for the team across all income levels. More than 85 percent of respondents across all income levels supported creating an unarmed crisis response team; they agreed that the team will benefit their community, that it will make their community safer, and that they would call the team in a nonviolent or non-life-threatening situation (Exhibit E2).
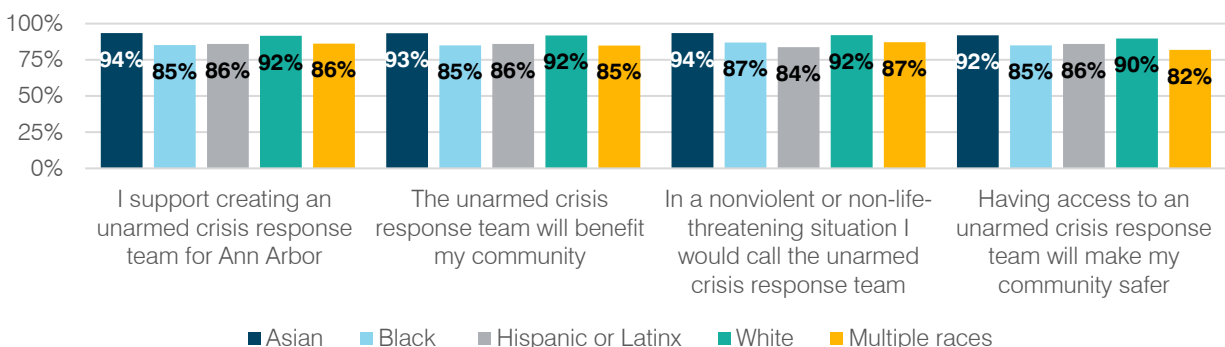
EXHIBIT E2. Percentage of Respondents Who Agreed or Strongly Agreed with Unarmed Crisis Response Team Statements by Household Income

Statement	Under $50,000	$50,000 to $99,999	Over $100,000
I support creating an unarmed crisis response team for Ann Arbor	93%	90%	89%
The unarmed crisis response team will benefit my community	93%	90%	89%
In a nonviolent or non-life-threatening situation I would call the unarmed crisis response team	94%	90%	89%
Having access to an unarmed crisis response team will make my community safer	93%	88%	86%

■ Under $50,000 ■ $50,000 to $99,999 ■ Over $100,000

Note: N varied by question and income category: under $50,000, N = 288–291; $50,000 to $99,999, N = 377–380; and over $100,000, N = 632–639.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

There is also strong support for the team across all racial and ethnic categories. More than 84 percent of respondents across all racial and ethnic categories agree or strongly agree with all of the statements (Exhibit E3).

Note: N varied by question and racial and ethnicity category: Asian, N = 61–62; Black, N = 60–61; Hispanic or Latinx, N = 43; White, N = 1,176–1,188; Multiple races, N = 93–94.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

Similarly, there are high levels of support regardless of an individual's previous interaction with the criminal justice system. Those with a punitive experience—which includes those who reported a history of police abuse, arrest, conviction, and/or incarceration—had the highest percentage of those who agree or strongly agree with each of the statements supporting the team (Exhibit E4).

EXHIBIT E4. Percentage of Respondents Who Agree or Strongly Agree with Unarmed crisis response team Statements by History with the Criminal Justice System
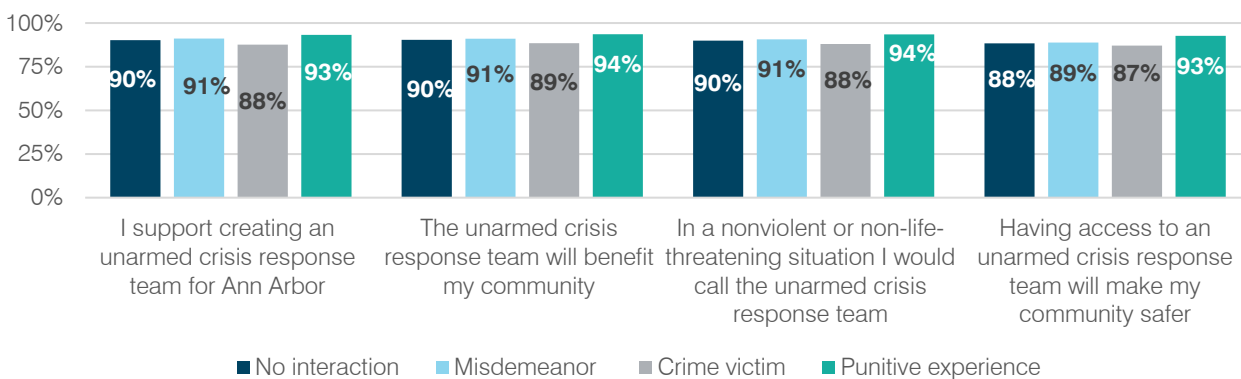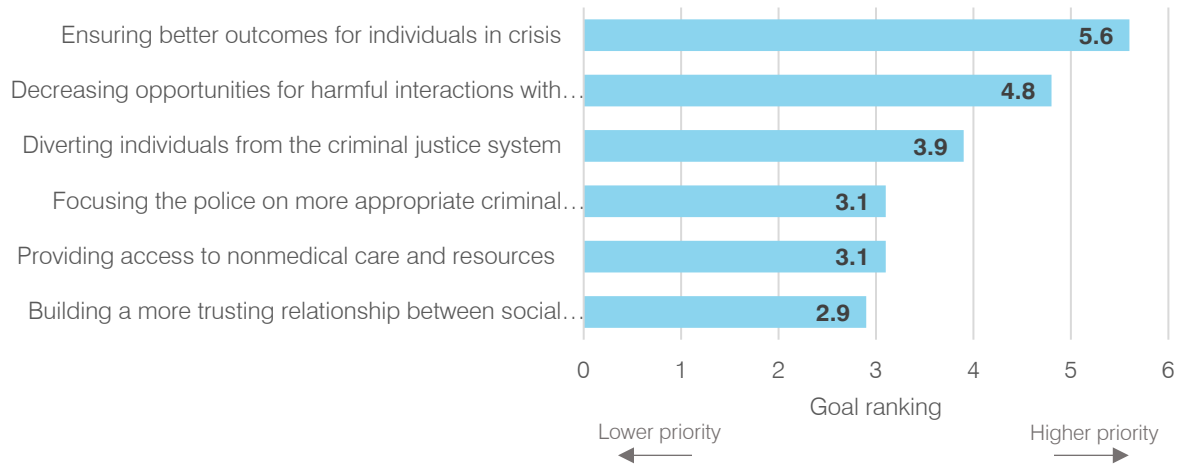

Note: N varied by question and criminal justice interaction experience: No interaction, N = 642–715; Misdemeanor, N = 607–649; Crime victim, N = 199–210; Punitive experience N = 218–234.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

Goals

Respondents ranked the order of the provided goals from their highest priority to the lowest priority. The highest rated goal among all respondents was to ensure better outcomes for individuals in crisis, followed

by decreasing opportunities for harmful interactions with the police and diverting individuals from the criminal justice system (Exhibit E5).
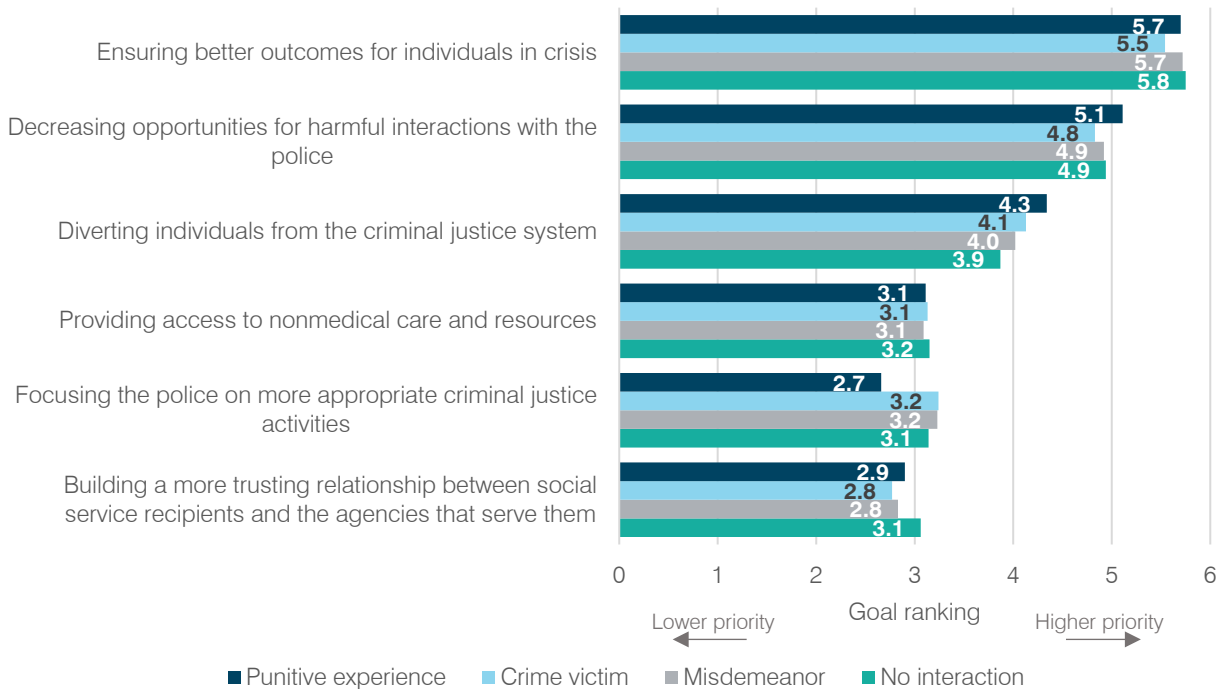
EXHIBIT E5. Average Goal Ranking

Goal	Ranking
Ensuring better outcomes for individuals in crisis	5.6
Decreasing opportunities for harmful interactions with…	4.8
Diverting individuals from the criminal justice system	3.9
Focusing the police on more appropriate criminal…	3.1
Providing access to nonmedical care and resources	3.1
Building a more trusting relationship between social…	2.9

Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

A similar pattern of priorities emerged when ranking by respondents' interaction with the criminal justice system (Exhibit E6).

EXHIBIT E6. Average Goal Ranking by Interaction with Criminal Justice System

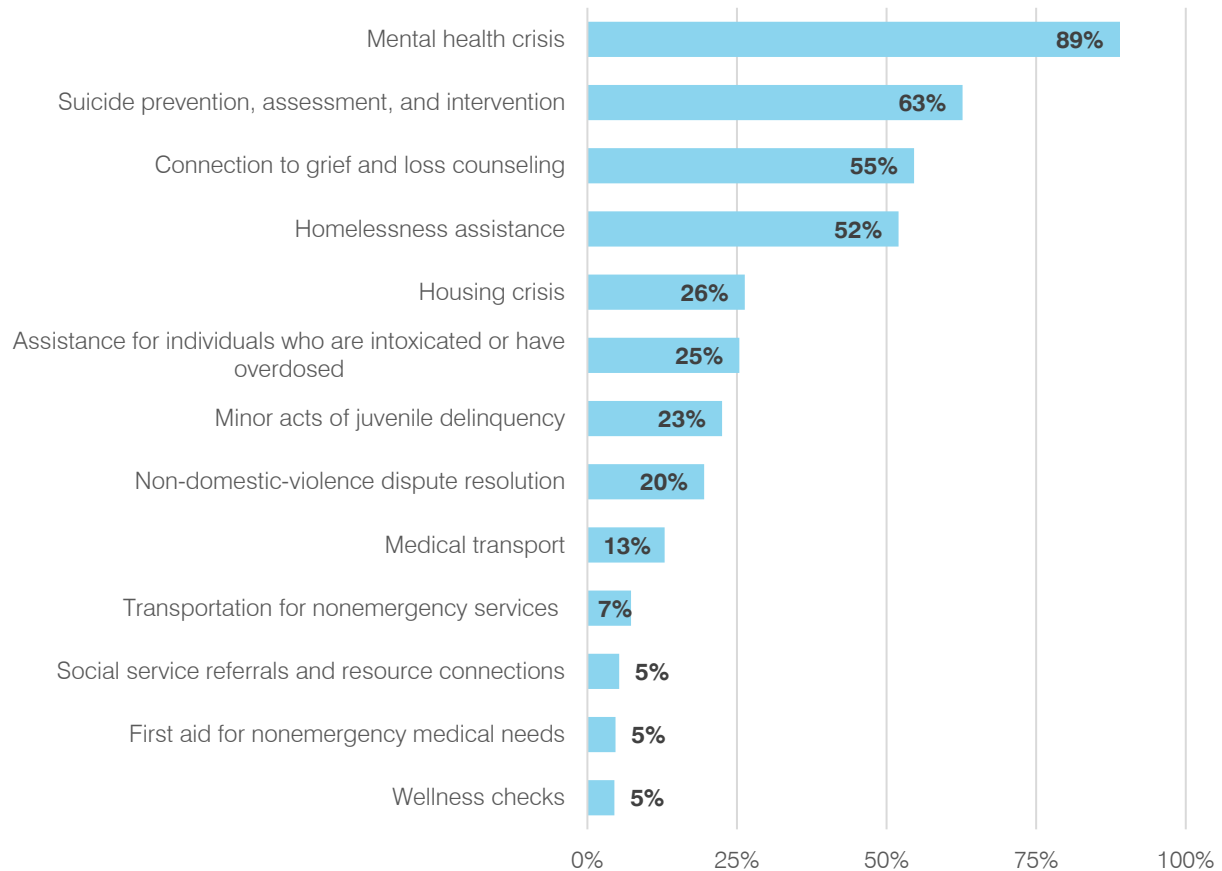| Goal	Punitive experience	Crime victim	Misdemeanor	No interaction
Ensuring better outcomes for individuals in crisis	5.7	5.5	5.7	5.8
Decreasing opportunities for harmful interactions with the police	5.1	4.8	4.9	4.9
Diverting individuals from the criminal justice system	4.3	4.1	4.0	3.9
Providing access to nonmedical care and resources	3.1	3.1	3.1	3.2
Focusing the police on more appropriate criminal justice activities	2.7	3.2	3.2	3.1
Building a more trusting relationship between social service recipients and the agencies that serve them	2.9	2.8	2.8	3.1

Note: N ranged by criminal justice interaction: No interaction, N = 653; Misdemeanor, N = 610; Victim of a crime, N = 196; Punitive experience, N = 220.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

Services

Respondents could select up to four services that the team should prioritize. The services that respondents selected most often were supporting mental health crises (89 percent), providing suicide prevention and management (63 percent), connecting individuals to grief and loss counseling (55 percent), and homelessness assistance (52 percent) (Exhibit E7).

EXHIBIT E7. Percentage of Respondents Selecting Service as A Priority

Service	Percentage
Mental health crisis	89%
Suicide prevention, assessment, and intervention	63%
Connection to grief and loss counseling	55%
Homelessness assistance	52%
Housing crisis	26%
Assistance for individuals who are intoxicated or have overdosed	25%
Minor acts of juvenile delinquency	23%
Non-domestic-violence dispute resolution	20%
Medical transport	13%
Transportation for nonemergency services	7%
Social service referrals and resource connections	5%
First aid for nonemergency medical needs	5%
Wellness checks	5%

N = 1,495
Note: Respondents could select up to four categories; percentages total to more than 100 percent.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

Administration

Respondents were asked about four administration approaches for the team:

- A newly created city department
- An existing city department that is not the police department
- A nonprofit organization that is financially and operationally independent from the City
- A nonprofit organization that is contracted with the City

For each option, respondents could select "Prefer," "Acceptable," "Unsure," or "Do not want."

There was no clear consensus on the preferred administrative approach. About 55 percent of respondents preferred or were amenable to every option presented for organizational leadership (Exhibit E8). The option with the highest percentage of "Prefer" responses was for a newly created city department (25 percent) and the least preferred option was an existing city department that is not the police department.
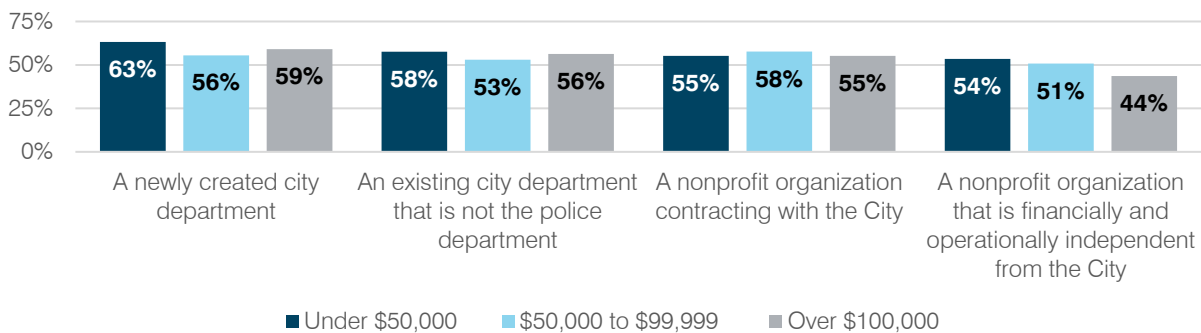
EXHIBIT E8. Administrative Approach Preferences

	Prefer	Acceptable	Unsure	Do not want
A newly created city department	25%	32%	20%	23%
An existing city department that is not the police department	12%	43%	26%	20%
A nonprofit organization contracting with the City	14%	41%	25%	20%
A nonprofit organization that is financially and operationally independent from the City	17%	31%	29%	24%
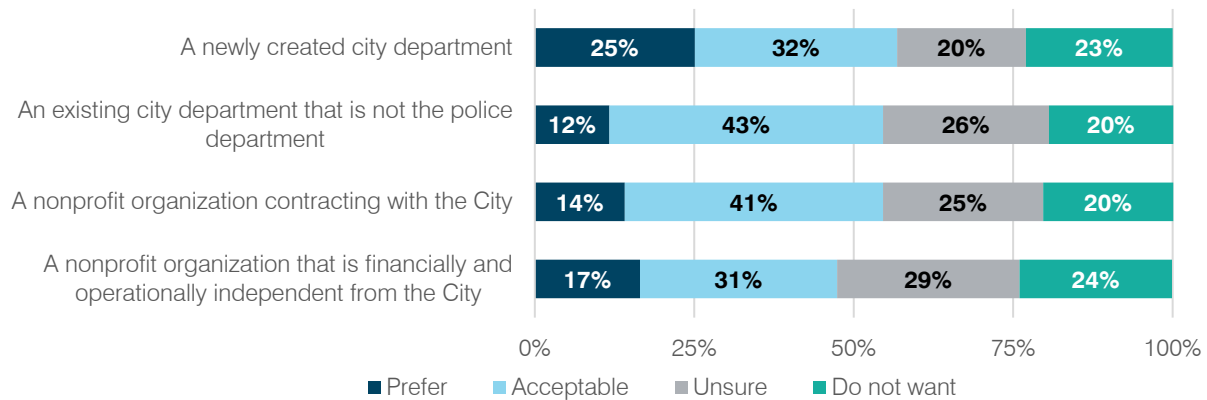
Note: N varied by administrative option between 1,381 and 1,409. Percentages may total more than 100 due to rounding.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

The open-ended survey responses mirrored this lack of consensus, with comments encouraging a City administration, presuming increased accountability with a public administration model, and those promoting a nonprofit administration, citing their experience in providing similar services. Additional open-ended responses about program administration called for transparent operations, public data reporting, public oversight, and continued community input throughout implementation.

More than half of the respondents in each income category selected "Prefer" or "Acceptable" for each administrative option, except for those with incomes over $100,000 (Exhibit E9). Less than half of this income category selected "Prefer" or "Acceptable" for a nonprofit that is independent from the City.

EXHIBIT E9. Percentage of Respondents Who Selected "Prefer" or "Acceptable" for Each Administrative Approach by Household Income

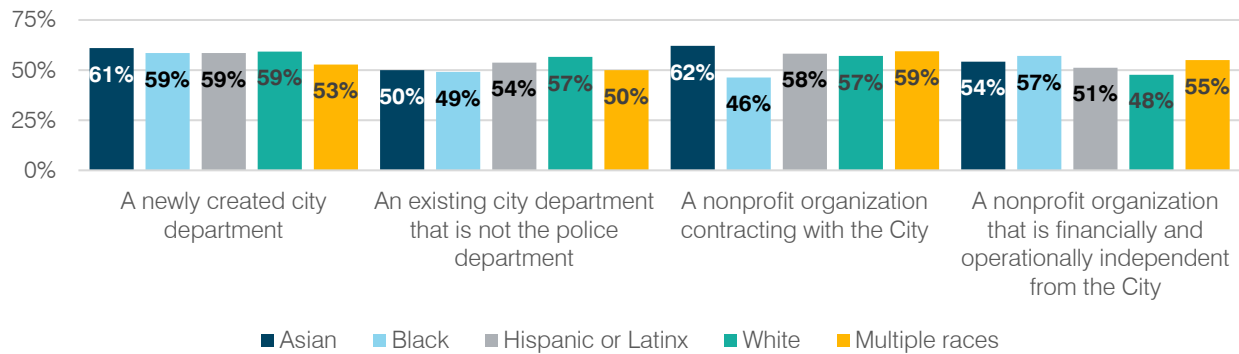|	Under $50,000	$50,000 to $99,999	Over $100,000
A newly created city department	63%	56%	59%
An existing city department that is not the police department	58%	53%	56%
A nonprofit organization contracting with the City	55%	58%	55%
A nonprofit organization that is financially and operationally independent from the City	54%	51%	44%

Note: N varied by income: Under $50,000, N = 266–273; $50,000 to $99,999, N = 347–359; Over $100,000, N = 579–586.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

There was some variation in the percentage of respondents who selected "Prefer" or "Acceptable" by race and ethnicity (Exhibit E10). For example, although 62 percent of those who identified as Asian selected "Prefer" or "Acceptable" for a nonprofit organization contracting with the City, only 46 percent of those who identified as Black selected those options. Over 50 percent of respondents, regardless of race or ethnicity, selected "Prefer" or "Acceptable" for a newly created city department.

EXHIBIT E10. Percentage of Respondents Who Selected "Prefer" or "Acceptable" for Each Administrative Approach by Race and Ethnicity

Note: N varied by race and ethnicity: Asian, N = 56–59; Black, N = 53–55; Hispanic or Latinx, N = 41–43; White, N = 1,074–1,095; Multiple races, N = 89–91.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

Over half of all respondents, regardless of their history with the criminal justice system, selected "Prefer" or "Acceptable" for the options of a nonprofit organization contracting with the City, an existing city department that is not the police department, or a newly created city department (Exhibit E11). Over half (53 percent) of those with prior punitive criminal justice system experience preferred a nonprofit organization that is independent from the City, but less than half of those with no interaction, a misdemeanor, or identified as being a victim of a crime selected this option as "Prefer" or "Acceptable."

EXHIBIT E11. Percentage of Respondents Who Selected "Prefer" or "Acceptable" for Each Administrative Approach by History with the Criminal Justice System
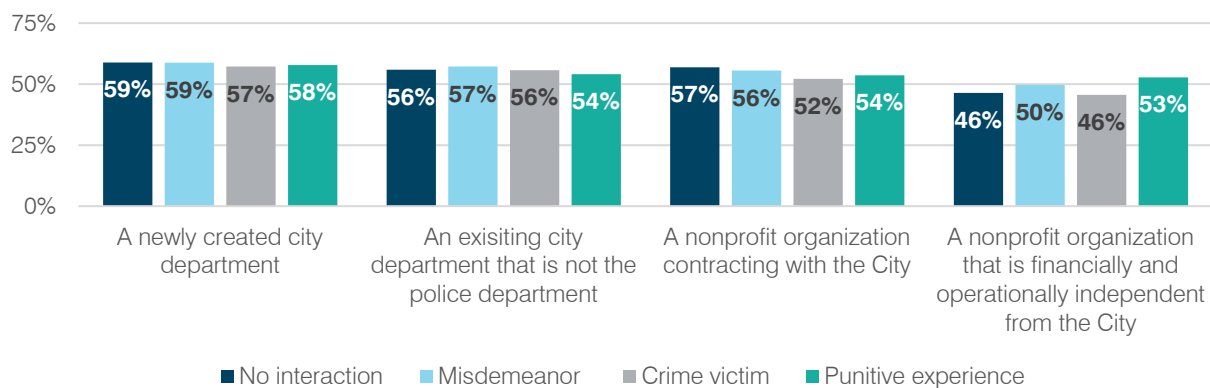

Note: N ranged by criminal justice interaction: No interaction, N = 635–645; Misdemeanor, N = 607–615; Crime victim, N = 199–202; Punitive experience, N = 218–222.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

Access

Respondents selected their preference from available telephone access numbers. Respondents were most likely to select 911 (29 percent) as their top preference (Exhibit 12). However, the new statewide mental health crisis line (27 percent) and a new standalone phone number (26 percent) were also popular.

EXHIBIT E12. Preferred Method of Accessing Unarmed Crisis Response
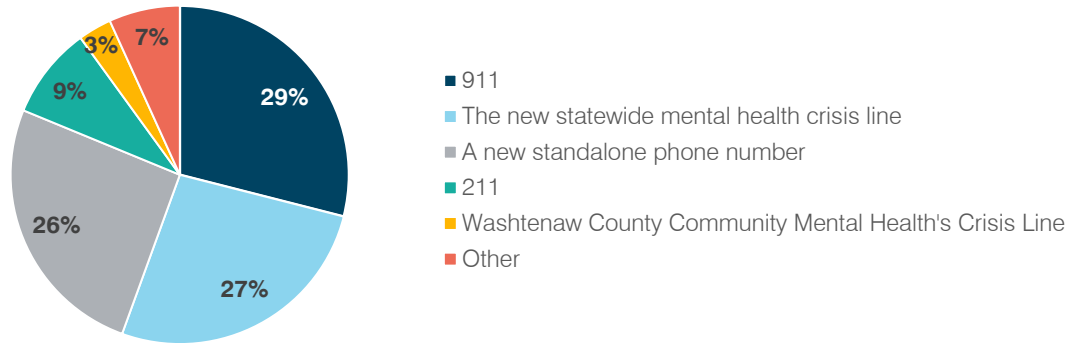
N = 1,506
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

Open-ended survey responses reflected these trends, with some respondents requesting the ability to access the team's services through a standalone phone number without notifying law enforcement and others emphasizing that a 911 dispatch operator should be able to divert calls to the team. Those who promoted accessing the through 911 noted the need for specialized training and clear direction for 911 dispatch operators.

Additional open-ended responses about access touched on engagement with the police department. These individuals encouraged a formal, coordinated relationship with the police, and some requested this program be completely independent from the police, in all aspects.

Funding

The majority of survey respondents (84 percent) preferred that the team be funded through the reallocation of existing city funds (Exhibit E13). A preference for funding through reallocating existing funds continued regardless of household income, race and ethnicity, and experience with the criminal justice system (Exhibits E14 through E16).

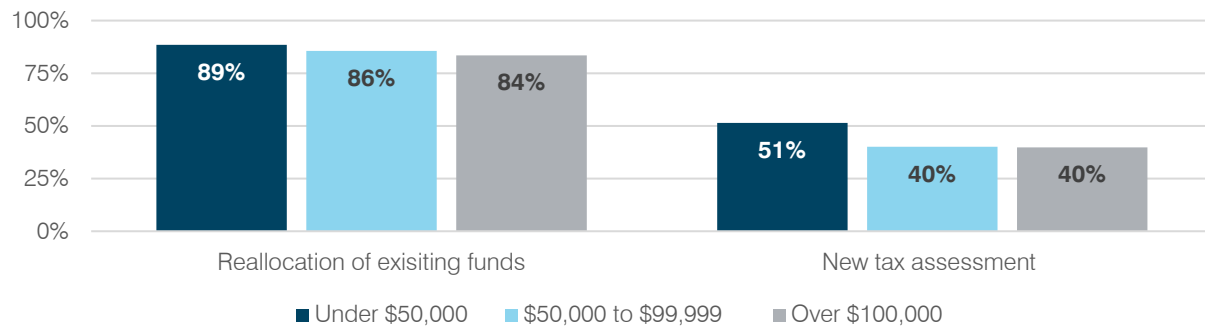**EXHIBIT E13.** Respondents Preference for Unarmed Crisis Response Team Funding Sources

Reallocation of exisiting funds: Strongly agree 48%, Agree 36%, Disagree 9%, Strongly disagree 7%

New tax assessment: Strongly agree 16%, Agree 25%, Disagree 37%, Strongly disagree 22%

■ Strongly agree ■ Agree ■ Disagree ■ Strongly disagree
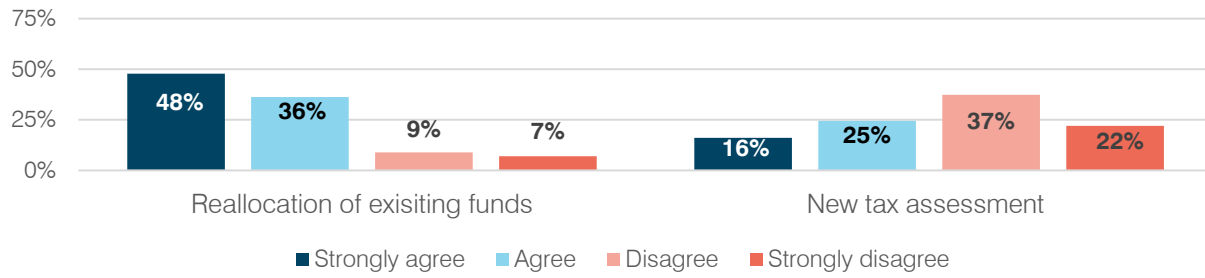
N = 1,503–1,517.
Note: Percentages may not total 100 due to rounding.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

EXHIBIT E14. Percentage of Respondents Who Selected "Agree" or "Strongly Agree" for Each Funding Option by Household Income

Reallocation of exisiting funds: Under $50,000 89%, $50,000 to $99,999 86%, Over $100,000 84%

New tax assessment: Under $50,000 51%, $50,000 to $99,999 40%, Over $100,000 40%

■ Under $50,000 ■ $50,000 to $99,999 ■ Over $100,000

Note: N varied by household income: Under $50,000, N = 282–287; $50,000 to $99,999, N = 367–375; Over $100,000 N = 623–624.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

EXHIBIT E15. Percentage of Respondents Who Selected "Agree" or "Strongly Agree" for Each Funding Option by Race and Ethnicity
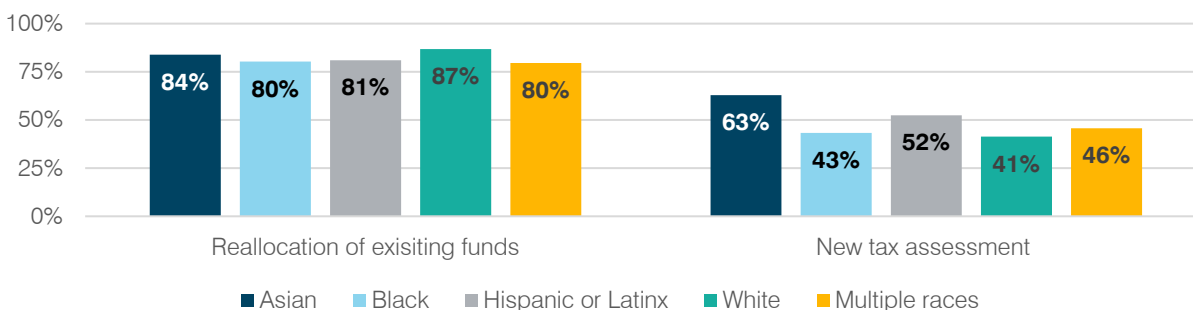
Note: N varied by race and ethnicity: Asian, N = 62; Black, N = 60–61; Hispanic or Latinx, N = 42; White N = 1,155–1,163; Multiple races, N = 92–93.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

EXHIBIT E16. Percentage of Respondents Who Selected "Agree" or "Strongly Agree" for Each Funding Option by History with the Criminal Justice System
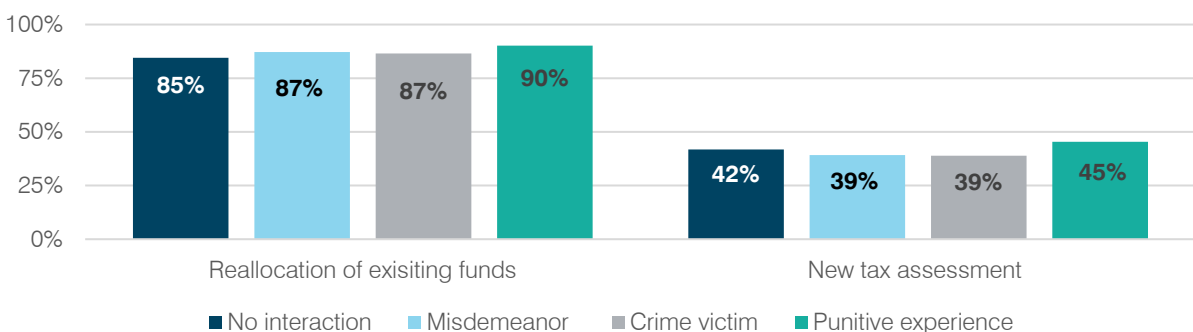
Note: N varied by criminal justice interaction: No interaction, N = 698–703; Misdemeanor, N = 638–642; Crime victim, N = 203–208; Punitive experience, N = 229–234.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

Most survey respondents who submitted open-ended comments about program funding encouraged using existing funds to support the program instead of a tax increase, including many suggestions to divert funds from the police department budget. Some respondents discouraged any fund diversion from the police department budget due to concerns about increasing crime.

Other open-ended survey responses encouraged the increased support for existing community resources, such as the Washtenaw County Community Mental Health crisis team and other social service providers instead of a separate unarmed crisis response team. These respondents expressed concerns about service duplication and bolstering current program teams with experience in crisis services.

Appendix F: Community Survey Respondent Demographics

The background information provided by survey respondents is provided below, along with demographic information about Ann Arbor residents, where possible.

**EXHIBIT F1.** Survey Respondents and Ann Arbor Residents by Gender Identity
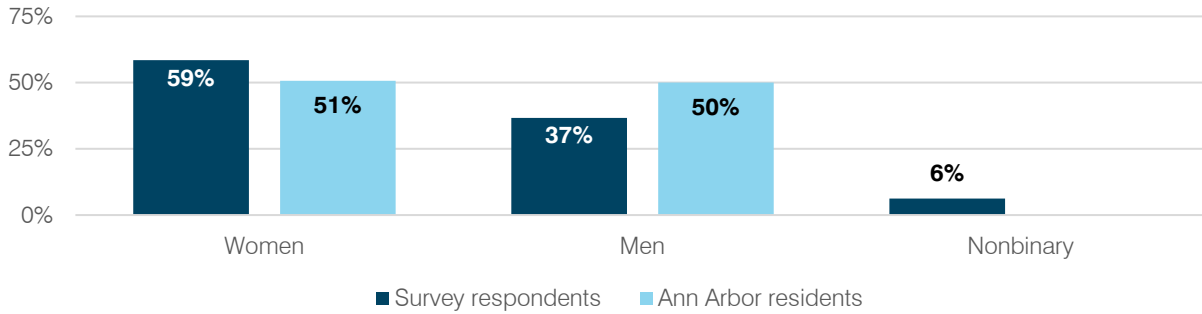
Survey respondents, N = 1,435; City of Ann Arbor, N=121,541.
Note: The survey category "Women" includes those who selected "Transgender woman" and the category for "Men" includes people who selected "Transgender man."
Sources: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC. U.S. Census Bureau. 2021. "ACS 2021 1-year: Table B01001, Sex by Age." *U.S. Census Bureau*. Accessed February 23, 2023. https://censusreporter.org

EXHIBIT F2. Survey Respondents and Ann Arbor Residents by Income
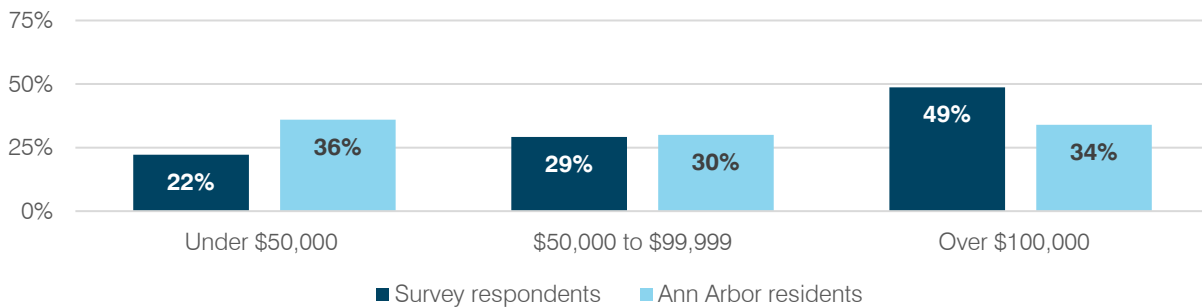
Survey respondents, N = 1,318; City of Ann Arbor, N = 121,541
Sources: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC. U.S. Census Bureau. 2021. "ACS 2021 1-year: Table B19001, Household Income in the Past 12 Months (In 2021 Inflation-adjusted dollars)." *U.S. Census Bureau*. Accessed January 6, 2023. https://censusreporter.org
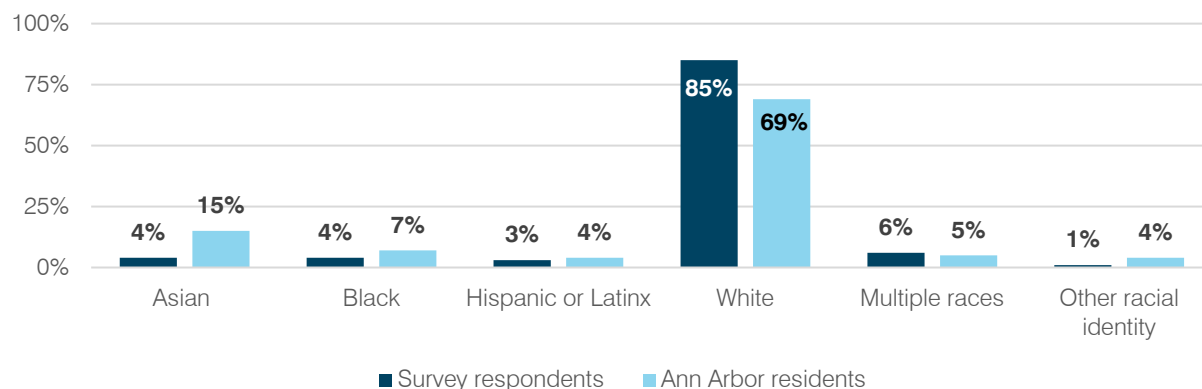
EXHIBIT F3. Survey Respondents and Ann Arbor Residents by Age
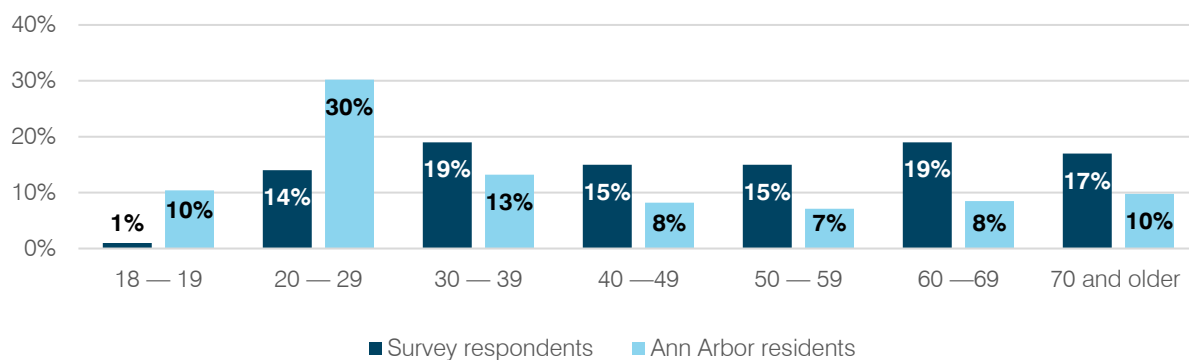
Survey respondents, N = 1,493; City of Ann Arbor, N=121,541
Sources: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC. U.S. Census Bureau. 2021.
"ACS 2021 1-year: Table B01001, Sex by Age." *U.S. Census Bureau.* Accessed February 23, 2023. https://censusreporter.org
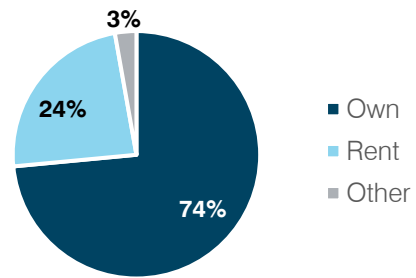
EXHIBIT F4. Survey Respondents and Ann Arbor Residents by Race and Ethnicity

Survey respondents, N = 1,406; City of Ann Arbor, N = 121,541
Note: Percentages may not total 100 because of rounding and because respondents could select Hispanic or Latinx and a racial category.
Sources: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC. U.S. Census Bureau. 2021.
"ACS 2021 1-year: Table B03002, Hispanic or Latino Origin by Race." *U.S. Census Bureau.* Accessed January 6, 2023.
https://censusreporter.org

EXHIBIT F5. Survey Respondents by Residency, Employment, and School Status
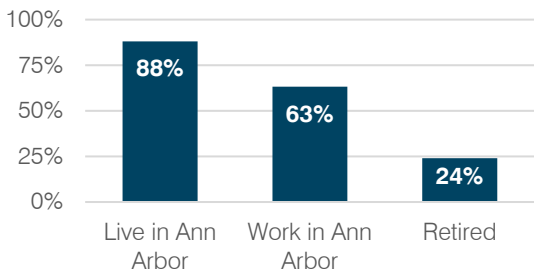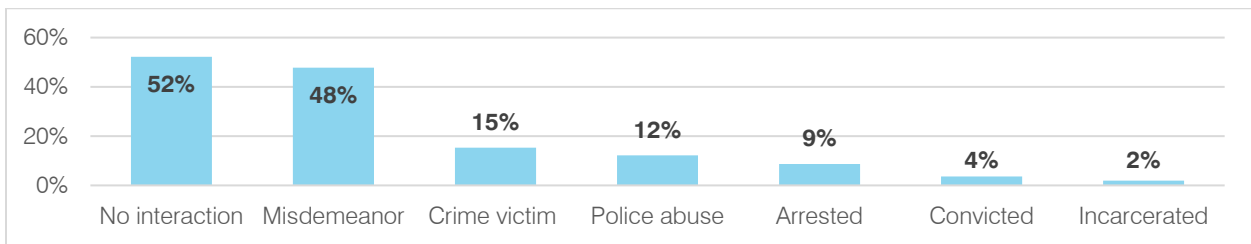

N = 1,508–1,514
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

EXHIBIT F6. Survey Respondents by Housing Status

N = 1,462
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

EXHIBIT F7. Survey Respondents by Criminal Justice System History

N = 1,377
Note: Respondents could select multiple categories; percentages total to greater than 100 percent.
Source: Data collected via Ann Arbor Unarmed Crisis Response Community Survey and analyzed by PSC

Appendix G: Engaged Organizations and Businesses

Throughout the engagement activities, PSC reached out through email and phone calls to over 60 social service and community-based organizations. The following list represents those that responded to the invitation to participate in interviews, provider and business discussion groups, and support participant recruitment and discussion group logistics for community member discussion groups. Organizations not listed may have also supported engagement activities, such as by completing and forwarding the public survey to their client and community network.

- A Brighter Way
- Ann Arbor District Library
- Ann Arbor Housing Commission
- Ann Arbor Human Rights Commission
- Ann Arbor YMCA
- Avalon Housing
- Bethel African Methodist Episcopal Church
- The Black Pearl
- Coalition for Revisioning Our Safety
- Commission on Disability Issues
- Community Action Network
- Connor O'Neill's
- Delonis Center
- Independent Community Police Oversight Commission
- Interfaith Council for Peace and Justice
- The First Congregational Church of Ann Arbor
- Main Street Area Association
- Maynard Properties
- Michigan Immigrant Rights Center
- The M Den
- National Alliance for Mental Illness (NAMI)
- Neutral Zone
- Peace Neighborhood Center
- SafeHouse Center
- Shelter Association of Washtenaw County
- State Street District
- Supreme Felons
- United Way of Washtenaw County
- University of Michigan Police Department Oversight Committee
- Washtenaw County Community Mental Health
- Washtenaw County Community Mental Health Consumers Advisory Council
- Washtenaw Health Plan
- Washtenaw Housing Alliance