



PROPOSAL

for an Independent Crisis Unit in Raleigh:
*Making ACORNS Effective and Impactful
to the Raleigh Community*

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OVERVIEW

For roughly two years, the City of Raleigh’s Addressing Crises through Outreach, Referrals, Networking, and Service (ACORNS) unit has functioned as an extension of the police department. While the community led the charge for a crisis intervention unit, Raleigh responded by not only excluding the community from the process, but the city also implemented a crisis response program that was opposite of what the community proposed. That is, ACORNS was developed as a result of community demands, but was not conceptualized or implemented with community input. In most cities that have a crisis response unit, the unit functions as an independent entity of the police department. Why did Raleigh ignore this important factor?

In what follows, we examine the limitations and shortcomings of the ACORNS program. In our brief review of ACORNS, we also unearth ACORNS potential to be useful and reach its highest potential. As part of our conclusions on ACORNS potential, we offer a short review of the HEART program in Durham and the STAR program in Denver. Through our review of these crisis response initiatives, we include an assessment of what makes them successful and offer recommendations for Raleigh. We know that these programs emerged and were successful based on their local context. While we are inspired by and want to learn from Denver and Durham, we know that Raleigh has unique needs that cannot be addressed by replicating a program designed for a different city. Our recommendations are guided by this perspective. As part of our recommendations, we include a plan for community outreach and input, a list of strategic partners that can help make an independent crisis unit function at the highest level, and a review of the three years we spent advocating for a community-based independent crisis unit.

We are not only proposing and making recommendations, but we, as an organization, are committed to helping Raleigh’s imminent crisis response unit be successful, useful, and impactful for the Raleigh community: We are willing to work with the city—with a special emphasis on a thorough and intentional community-involvement process. Refund Raleigh does not speak for the community, but we want to be part of a process that allows our beloved community to speak for itself.

ACORNS DOOMED FROM THE START

When ACORNS emerged in June 2021, its mission was to address homelessness, mental health, and substance abuse. According to its profile on the city website, ACORNS operates on a “care and safety first” and “enforcement last approach.” Among other things, ACORNS seeks to do “outreach, education, case management, on-call field services, investigation, and

intervention.” While in theory ACORNS’ mission is positive, on the structural and implementation level, ACORNS has been unsuccessful. In August of 2022 (one year since ACORNS had been active), Samantha Hummerer, an investigative journalist with WRAL conducted a one-year review of ACORNS. Hummerer found that RPD’s ACORNS unit with six cops and only three social workers, “[was rarely] assisting with calls related to suicide or involuntary commitments. Only 12 of the 680 calls the team assisted with over the last year were connected with mental commitments and zero suicide calls.” (1) Though created to respond to mental-health-related calls, Hummerer’s investigation of ACORNS brought to the surface that when ACORNS was an active unit, “Raleigh officers handled over a 1,000 suicide-related calls and more than 3,200 calls related to mental commitments.” (2) Simply put, ACORNS and its clinical social workers cannot fully thrive and use its expertise. In Durham on the other hand, within six months their crisis response unit responded to over 2,500 calls. Included in their list of calls responded to was a significant amount of mental health and trespassing calls. **According to data from the City of Durham, of the roughly 400 mental health calls the HEART program responded to, none needed police involvement.** (3) Durham achieved more in six months than Raleigh did in a year.

ACORNS cannot thrive under RPD. This conclusion is based on the investigative report done by Samantha Hummerer, but it also takes into account RPD’s long history of being incapable of adequately responding to situations involving mental health. (4) Most recently, the murders of Daniel Turcio and Reuel Rodriguez Nuñez by RPD are examples of this. (5) **Based on the data and history, Refund Raleigh believes that asking RPD to lead a crisis intervention unit is like asking a plumber to do the work of an electrician.**

LESSONS TO LEARN FROM HEART AND STAR

The Holistic Empathetic Assistance Response Teams (HEART) in Durham and the Support Support Team Assisted Response (STAR) in Denver, CO, are making strides and setting the tone for what effective crisis intervention can look like across the country. In Durham, the community has been calling for HEART to be expanded and given more funding from the city council. The community’s call for HEART to be expanded is not random or coming from an

(1) Samantha Hummerer, “RPD’s new mental health crisis unit rarely responds to suicide or involuntary commitment calls,” ABC-11 Eyewitness News, August 18, 2022.

(2) Ibid.

(3) Samantha Hummerer, “Durham’s unarmed first response team makes big impact in first 6 months,” ABC-11 Eyewitness News, December 21, 2022.

(4) To name a few others, Soheil Mojorrad and Kyron Hinton were also victims of RPD’s inability to respond to mental health crises. For more on police violence in Raleigh, see Refund Raleigh’s Pamphlet on the History of Police Violence in Raleigh from the 1970s to the 1990s, https://www.refundraleigh.org/files/ugd/f93641_eb8c730c73b14287a107a60d399b40a7.pdf.

(5) Jason deBruyn, “Activists, family say man was shot ‘multiple times’ by Raleigh police including while on ground,” North Carolina Public Radio, January 18, 2022; Jason deBruyn, “Activists want Raleigh police officer fired because of May 7 shooting that killed a man,” North Carolina Public Radio, June 10, 2022.

uninformed place. In practice, HEART actually works. As an entity independent of Durham’s police department, HEART not only responded to over 2,500 calls in six months, but they also dispatched clinical social workers, an EMT, and a peer mediator. ⁽⁶⁾ Of the 2,500 calls, a large number of them were follow-ups, but HEART also received a large number of calls for trespassing, mental health, and domestic violence. As mentioned earlier, HEART responded to over 400 mental health calls where they did not have to call the police. Furthermore, 99% of HEART staff reported feeling safe without the presence of police officers on their calls. ⁽⁷⁾

When HEART was first proposed, the Durham Police chief admitted that officers were skeptical of the program. But once HEART got going, its impact and significance could not be denied: “Officers now embrace the program.” ⁽⁸⁾ Expanding HEART is not just a community demand, members of the city council are also calling for the program to be expanded. Councilwoman Monique Holsey-Hyman has publicly stated that “What I’d like to see is some expansion [of H.E.A.R.T.]. There’s evidence that says a lot of the police that are going on cases, its mental health, domestic violence, substance abuse, those are areas that social workers are trained to be able to deal with.” Councilwoman Jillian Johnson added that “minimizing people’s contact with the criminal legal system, whether that’s a police officer or a court or a jail, is always the best option to make sure those people get the help they really need.”



Durham is not the only city that has been experiencing a noteworthy amount of success with a crisis intervention unit independent of the police. In 2020, Denver, CO, and its STAR program pioneered successful crisis intervention units. Like Durham’s HEART, for six months, STAR responded to over 700 calls that required no arrest or assistance from the police. Research on STAR’s first six months by Thomas Dee, a professor at Stanford University found that “in neighborhoods that STAR focused on... lower-level crimes fell by 34%. There were fewer citations, and people were less likely to re-offend because they got the help they needed.” ⁽⁹⁾ Dee “estimates there were 1,400 fewer criminal offenses in Denver because of this pilot program” and is encouraging other cities to follow Denver’s lead. One of the most important conclusions of Dee’s study about STAR is that the pilot program not only showed crime

(6) Jay Price, “Joining a national trend, Durham is dispatching mental health teams — not police — to some 911 calls,” North Carolina Public Radio, February 6, 2023.

(7) Ibid.

(8) Ibid.

(9) Kelly Reinke, “Study finds Denver’s STAR program is reducing crime,” 9News, June 9, 2022.

reduction, but also saved taxpayers and the city money. Dee maintained that “if people were placed into the criminal justice system ... it would have cost the city nearly four times more.”⁽¹⁰⁾ At present STAR has built on its success from 2020. In 2021, the city adopted the program, and in 2022 it expanded to all parts of the city with four active units.⁽¹¹⁾ The units all have clinical social workers and medics/EMTs.

ACORNS AS AN INDEPENDENT ENTITY

The success and expansion of HEART and STAR are profound examples of why ACORNS should be independent from the police. What could this independence look like? How would it be structured? Taking a look at successful models across the country, this section offers practical suggestions and recommendations for ACORNS to be its own entity and community focused. Our neighbors in Durham put their HEART program in the newly established and city-run Community Safety Department. The Community Safety Department “works to enhance public safety through community-centered approaches to prevention and intervention as alternatives to policing and the criminal legal system.” As a city supported Department, HEART defines its main priorities as:

- piloting new response models for 911 calls for service.
- collaborating with community members to identify additional approaches to public safety.
- managing and evaluating existing contracts and external partnerships intended to advance public safety.

In Denver, the STAR program is housed under the Department of Health and Environment and is dispatched directly from the 9-1-1 communications center. In its efforts, STAR “engage[s] individuals experiencing distress related to mental health issues, poverty, homelessness, and substance abuse.”⁽¹²⁾ For the members of Refund Raleigh, these two programs denote a major reality point to us: We are aware that the crisis intervention unit will have to work with the police. At the same time, we believe working with the police and being under the leadership of the police are two different things.

MAINTAINING COMMUNITY INVOLVEMENT

In Refund Raleigh’s estimation, active community involvement is a crucial part of creating

(10) Ibid; Also see full report from Professor Dee here: <https://news.stanford.edu/press/view/43952>.

(11) See STAR 2022 detailed report here: https://www.denvergov.org/files/assets/public/public-health-and-environment/documents/cbh/2022_midyear_starreport_accessible.pdf.

(12) See, <https://www.denvergov.org/Government/Agencies-Departments-Offices/Agencies-Departments-Offices-Directory/Public-Health-Environment/Community-Behavioral-Health/Behavioral-Health-Strategies/Support-Team-Assisted-Response-STAR-Program>

community safety. When ACORNS was conceptualized and implemented, it excluded input and involvement of the community. When ACORNS becomes independent, community involvement should be a core aspect of its mission. When we at Refund Raleigh say community, we are not interested in speaking for the community, we are more interested in bringing the community into the process and allowing the community to speak for themselves. Given how important community is to an independent ACORNS unit, we believe a core part of the unit should mirror HEART's use of a peer support specialist. This peer specialist is "someone who once lived on the streets or had addiction issues and can help the team build rapport with people they meet."⁽¹³⁾



Refund Raleigh facilitated a community meeting to build relationships with Raleigh residents and review various safety issues in the Southgate neighborhood. We highlighted the need for alternative approaches to community safety and discussed the importance of funding the community's needs by divesting from the bloated police budget.

While STAR is a fantastic program that we can learn from, there are some important things that we need to be mindful of for ACORNS and its community component. As STAR expanded and provided a necessary service, the program drew criticisms and concerns from community organizations that helped conceptualize the program. The proposal for STAR originated from community organizations with a large leadership role from Denver Alliance for Street Health Response. The input from the community and leadership that they provided made the pilot program of STAR successful. As the program expands and grows, however, community organizations have been undervalued and removed from an institution they played a leading role in creating.⁽¹⁴⁾ **Refund Raleigh is urging that the community be an integral part of the process of making ACORNS its own structure. That is, if the council or city officials are**

(13) Price, "Joining a national trend, Durham is dispatching mental health teams — not police — to some 911 calls,"

(14) Victoria Carodine, "As STAR expands, community members feel left out of planning. Here's why it matters," Rocky Mountain PBS, March 23, 2022; Micah Smith, "Denver's STAR advisory committee say they're being pushed out of the program they launched," Denver ABC 7, August 11, 2022.

doing a visit to HEART or STAR, a community organization, and representative should be present. When big decisions are being made, the community should have equal and respected input.

KEY STRUCTURAL TAKE-AWAYS FROM HEART AND STAR: RECOMMENDATIONS FOR RALEIGH

- HEART and STAR units are dispatched from the 9-1-1 communications centers. Raleigh should be structured the same.
- Durham has 4 units: a Crisis Call Diversion (CCD), a Community Response Teams (CRT), a Care Navigation (CN), and a Co-Response (CoR).⁽¹⁵⁾ At present, Raleigh only has the CoR which by itself has been proven to be unsuccessful. The CCD, CRT, and CN are important for program success.
- In order to be successful, this independent crisis unit needs peer support intentionally embedded into it. Peer support not only determines the success of the crisis unit, but it also maintains community involvement and legitimacy.
- HEART and STAR started with pilot areas to test how the community would respond to the program. We believe that District C and Southeast Raleigh should be the pilot and starting point for the independent crisis unit in Raleigh.
 - With Southeast Raleigh being the proposed area for the start of the program. We want to make sure that social workers and peer supporters are people that the community can identify with. That is, we recommend the majority of the social workers, peer supporters, and others on the team are African American or identify with the related community where services are needed.

A PLAN FOR COMMUNITY ENGAGEMENT; STRATEGIC PARTNERSHIPS; AND WRAP-AROUND SERVICES FOR AN INDEPENDENT ACORNS UNIT

As mentioned, meaningful community engagement is indispensable to a successful independent crisis unit. Refund Raleigh is proposing a series of community forums, meetings, and listening sessions to guide the formation of the independent crisis unit. We are not only recommending community involvement, but we are also proposing a plan to engage the community:

(15) According to the City of Durham, the "CCD embeds mental health clinicians in Durham's 9-1-1 call center; CRT dispatches unarmed 3-person teams as first responders to non-violent behavioral health and quality of life calls for service; Care Navigators follow up with people after meeting with one of our first responders to help connect to the community-based care they need and want; and CoR pairs clinicians with Durham police officers to respond to certain calls for service that pose a greater potential safety risk."

- We believe each district should host a minimum of two community meetings to inform the program’s implementation. As part of these meetings, there should be strategic outreach to prepare for them. That is, before every meeting we have to do more than just post on social media and websites, there should be canvassing, door knocking, and other community outreach strategies.
- As part of the crisis response unit, we believe the community engagement process has to value the input, thoughts, and ideas of the community. Simply put, at these meetings the community should not be talked at. Rather, the community should be heard from and listened to. An independent crisis unit can't be effective if there is no real process that takes the time to understand the real needs of neighborhoods and their residents. Often, the community cites a lack of honesty and transparency from the city
- The community engagement process must also involve, uplift, support, and identify, existing community-led safety and grassroots efforts. As part of our proposal, we are encouraging community crisis response units to be organized in different neighborhoods. If we want true safety, the community has to be active participants and trained on how to engage and de-escalate crises.
- We suggest that community organizations be brought in to assist with the community engagement process. Collaborating with community organizations is not new for city government. In Durham, they collaborated with/hired community leaders to help with transit and parks and recs.



Refund Raleigh hosted community safety forums to create a safe, collaborative gathering of community members from various backgrounds and local leaders. During the forum, participants engaged in open discussions, shared their experiences, and proposed ideas to improve community safety. Topics included affordable housing, police violence funded by a bloated city budget, Sheriff and ICE collaborations, worker's rights, healthcare, and education. Refund Raleigh members also canvassed in the working-class community of Southeast Raleigh to engage with community members and receive their input for an independent crisis response unit.

STRATEGIC PARTNERSHIPS FOR SUSTAINABILITY OF THE CRISIS UNIT

- At present, there is a **Peer Support Specialist Training** at Wake Tech that community members associated with the independent crisis unit can receive training. The peer support training is roughly \$600 and is led by people who are in recovery from addiction and mental illness. See more [here](#).
- We live in a resourceful city. In addition to peer support specialists, a core part of the independent crisis unit is social workers. **We propose a relationship be built with [Advance Community Health](#)**. The organization has a [Behavioral Health](#) program that can serve a diversity of needs and have specialists who offer: substance use treatment, tobacco smoking cessation, grief and loss therapy, medication-assisted treatment, care coordination, stress management, ADHD screening, chronic disease management, depression and anxiety screening, and individual and family therapy.
- Advance is an important and ideal partner because it is not only located in Southeast Raleigh (since 1972), but its mission is “to deliver quality, compassionate primary health care – every patient, every time – in response to the needs of our communities.” Advance has full comprehensive health services. The health center provides primary care, pediatric care, dental care, health care for the homeless, mobile health services, and even has its own pharmacy. For more on Advance and how they plan to support an independent crisis unit, see the letter of support attached. Advance’s support is important in the early stages of the independent crisis unit. Our friends in Durham had to contract with organizations to fill positions for HEART in its early years.
- Other important resources that are within city limits that should relate to the independent crisis units include [UNC Health Care Crisis and Assessment Services at WakeBrook and Wake Behavioral Health Urgent Care](#).
- Many crises are associated with interpersonal conflict and violence that go unaddressed or worsened by criminal legal responses. For example, the current system of police, punishment, and prisons has done very little to curb domestic and sexual violence. Less than 25% of sexual violence cases get reported to the police. Studies have shown that at least 15% of sexual assault survivors feared that police could not or would not do anything to help. Additionally, skepticism of police may be especially pronounced among Black and other women of color whose communities are subjected to criminalization and police harassment. According to a recent [Gallup Survey](#), nine out of ten Black people in the United States do not have confidence that they will be treated equally before the law when interacting with police. **We propose that Raleigh’s Independent Crisis Response Unit be concretely connected to Restorative Justice programs that offer holistic solutions to interpersonal violence, rather than involvement with the criminal legal system that exacerbates the root causes of violence.**

- There are several established organizations in our area whose expertise in this area we should draw on: The Restorative Justice Clinic at Campbell Law School and Restorative Justice Durham. The [Restorative Justice Clinic at Campbell](#) seeks to resolve harm between juveniles, and has resulted in “85 percent of cases referred to the RJC are successfully mediated, resulting in both parties coming together for a face-to-face meeting to address and satisfy their needs as a result of the incident.” [Restorative Justice Durham](#) takes on referrals from community members, congregations, schools, and even the local District Attorney’s Office. Raleigh should fund and collaborate with these (or pioneer similar) programs to provide meaningful and trustworthy conflict resolutions to our community.
- As the home city of NC State University, we should take advantage of our Pack family! NC State has a top-ranked social work program located in the heart of the city. We should be working with them and their professors and students to aid an independent crisis unit.
- Beyond strictly professional resources, we live in a city with a wealth of community resources that are oftentimes overlooked. There are organizations in the community that are committed to improving it and making it safe. We believe the independent crisis unit should work in close proximity with groups like:
 - [The Men of Southeast Raleigh](#).
 - Faith Institutions like [Southeast Raleigh Table](#).
 - Already existing community-centered mental health organizations and initiatives. For example, the Boys and Girls Club has councils with social work backgrounds that started mental health conversations among young people. The independent crisis unit should be supporting that and helping to expand programs similar to it.

BUDGETARY SUPPORT AND POSSIBILITIES

- We know that funding is important to the success of Raleigh’s independent crisis unit. **Advance Community Health has offered its behavioral health services to work with the city on its independent crisis unit (see letter of support attached).**

“ACH lends its expertise and resources to spur strategic discussions and actions toward evidenced based, sustainable public safety solutions.
 -Scot McCray, CEO, Advance Community Health”

- According to the IndyWeek, for the 2022-2023 budget, the city has allocated \$800,000 for the expansion of ACORNS. As it stands, there seem to be resources for ACORNS. Once it is removed from the police department, at least this much funding should be allocated to this much-needed program.
- Another point to consider is a relationship with the county to help fund the independent crisis unit in the short and long term.

REFLECTION ON REFUND RALEIGH'S THREE-YEAR EXPERIENCE ADVOCATING FOR AN INDEPENDENT CRISIS UNIT

Our proposal for an independent crisis unit rooted in the Raleigh community is not based on what we think works, our recommendations emerged from our direct experience in community-based activities. Since our founding in 2020 after the murders of George Floyd and Breonna Taylor, we have not only been advocating for community-led alternatives to policing, we have spent our time and limited resources working to build those alternatives.

When we first released demands in 2020, we did not do it based on our thoughts and experiences alone, we asked the community what safety meant to them. We did online surveys, canvassed neighborhoods, went to festivals to ask people what they would do with 111 million dollars. We crafted our demands and organizational mission based on that process of community outreach and input. In addition to the learning community needs, we familiarize ourselves with research on programs that have a proven history of ensuring true safety.

This multi-layered approach informed what we decided to advocate for in 2020: we called for "Free mental health services including but not limited to individual and family therapists, psychiatrists, crisis intervention specialists with no affiliation to police or law enforcement," among other things. Post-2020, we stayed consistent with our goal of having a better-resourced and solution-based approach to safety and societal problems. We canvassed shopping centers, neighborhoods, and college campuses for an independent crisis unit. We did not ask people to come to us, we went to them. We did more than pass out information, we talked to people and built relationships. In 2020, we launched a people's budget survey to ask people what safety meant to them. We received over 500 responses. In the responses, an overwhelming amount of people having access to mental health services made them feel safe. We used that to guide our organizational activities.

One highlight is our community safety forums and community meetings. We have held meetings at Tarboro Rd Community Center, Southgate Community Center, Green Road Community Center, and the Fruit of Labor World Culture Center. Check out reflections about our community surveys, meetings, and forums from our organizational leader Nique Williams:

"For the last two budget sessions, I have been honored to work with the Refund Raleigh team to advance our campaign for a mental health crisis response unit with no police. The voices of Raleigh residents activated the charge for a safer community. We dedicated our time to surveying, speaking with community members and canvassing near working-class areas such

as Raleigh Blvd, Poole Rd., Southgate Neighborhood, Capital Blvd, Green Rd., and Tarboro to share the journey of developing a strategy for a safer Raleigh. Speaking with community members about safety and crisis response units has been an enlightening and valuable experience. It provided an opportunity to understand the concerns, needs, and perspectives of the people directly affected by such initiatives. Our efforts helped us build trust and foster collaboration with community members. Open and transparent communication is essential to establish credibility and ensure community buy-in. By involving community members in the process and actively seeking their input, we created a sense of ownership and shared responsibility for safety initiatives. We've learned that community members' insights and suggestions can contribute to ongoing improvement and adaptation of strategies. Our safety is non negotiable; the community demands an independent crisis unit."



Working on the annual Raleigh City Budget seems like a daunting undertaking meant only for city managers, government actors, and politicians. However, Refund Raleigh believes in activating democratic participation by regular people in local spending decisions – decisions that use our public dollars. We stood in solidarity with community allies to demand a reduction of the Raleigh police budget for an investment in a crisis response unit with no police and livable wages.

thank you

FOR MORE INFORMATION VISIT: REFUNDRALEIGH.ORG