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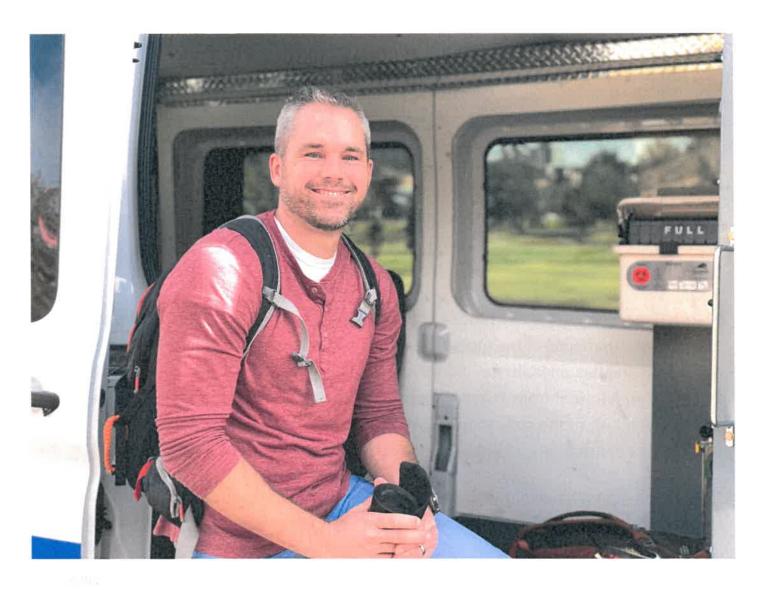
In Denver, Unarmed Mental Health Workers Respond To Hundreds Of 911 Calls Instead Of Police

KUNC | By Leigh Paterson

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Fresh Air

Chris Richardson, one of the mental health professionals who staffs the STAR van, says the program helps vulnerable people feel like they have someone in their corner.

Throughout months of racial justice protests, the city of Denver has been testing out a program that dispatches a mental health clinician and a paramedic to low-level emergencies. The STAR van, short for Support Team Assisted Response, has responded to more than 600 calls since June, many of them related to homelessness, mental illness and substance abuse — not criminal activity.

'Not too long ago, we had an individual who called. She was living in a tent," said Chris Richardson, a licensed clinical social worker with the Mental Health Center of Denver who staffs the van. "She called 911 and was just like 'I can't get my meds. I'm not doing well."

The STAR team picked up her medications; the paramedic explained how to take them. Then, they connected her with housing.

"We get a lot of stuff that is individuals experiencing maybe low level anxiety, stress, possible suicidal ideation, depression that doesn't really rise to the level of being a danger to themselves but is definitely something that they're concerned about enough and I need help right now so they call 911," Richardson explained.

The STAR van is modeled off of CAHOOTS, a non-police response program in Eugene, Oregon, established in 1989. Denver's pilot had been in process for years but following a growing push for changes in policing this summer, several U.S. cities recently looked to the CAHOOTS model as a possible solution.

The workers who staff these mobile units have unique strengths. Chris Richardson, with 13 years of experience in the mental health field, is trained in advanced crisis deescalation and has an intimate understanding of Denver's social services network. This skillset is so different from law enforcement's that police have started calling the STAR van for help; 10% of the calls to the STAR program come from Denver Police Department or Emergency Medical Services (EMS).

"It kinda changes the dynamic that they're part of working towards a creative solution to try and help the community versus what's been seen this year as law enforcement is part of the problem," Richardson said.



Leigh Paterson

Crowds gathered at the Colorado Capitol in June when state lawmakers announced plans to introduce a police accountability bill.

Anti-police protests intensified in some cities following a handful of high-profile police encounters this year. In Philadelphia, last month, police shot and killed Walter Wallace Jr., who they say was armed with a knife. Back in March, Daniel Prude died in Rochester, NY days after he suffocated while police restrained him.

Both families said their loved ones were experiencing mental health crises.

A recent study published in the journal of Health & Social Work which analyzed online survey data from New York and Baltimore found that respondents with a severe mental illness were more likely to experience police violence, regardless of their involvement in any crime. Researchers did not find that mental illness necessarily caused the elevated exposure to police violence.

"It's something that officers dread, absolutely," Maria Haberfeld, a professor of police science at John Jay College of Criminal Justice, said of calls for service when severe mental illness is a factor. "It can end up with a physical encounter. Officers, contrary to what some people might think, they're really not so eager to enter into any type of physical interaction with individuals because it causes the officers a lot of stress."

In Denver, all police officers are required to take Crisis Intervention Training (CIT) but Haberfeld explains that these situations are complex, even for clinicians; most officers lack sufficient training.

With limited resources and personnel, Haberfeld questions how much of an impact a solution like the STAR program can really have. But she agrees that law enforcement should not be the primary option for those in crisis.

"Any model that takes away from police responsibilities that they're not equipped to respond to is a great idea," Haberfeld said.

Denver Police Chief Paul Pazen is a strong supporter of the STAR program; he has spent years advocating for the pilot and sent representatives from the police force to observe the CAHOOTS operation in Oregon.

"If our presence is something that escalates that and people can get the appropriate help and we don't need to be there, that's great," Pazen said, noting that this frees up officers to focus on crime and traffic stops.

Pazen says he has fielded inquiries about STAR from all over the country and the state but describes this level of interest with caution:

"They think 'Oh, STAR, this is the be-all, end-all type of deal.' It's fantastic, it's a great program. But by itself it's not going to be a single solution," Pazen explained.

Instead, Pazen points to a handful of alternatives to a traditional police response: Law Enforcement Assisted Diversion (LEAD), which keeps low level drug offenders out of the criminal justice system, as well as Denver Police Department's Co-Responder program, which pairs mental health workers with police on some calls for service.

For now, the STAR program consists of one van and a rotating group of staffers. Earlier

"The fact we started a pilot in the middle of a pandemic with social unrest on an election year... I can't believe how smoothly it actually rolled out," Chris Richardson said.

Still, Richardson acknowledges the STAR van can't help everyone. For now, it only runs on weekdays between ten and six pm.

"It's not saying that I can help 50,000 people in Denver," he said. "It's I can help one person at a time with whatever they're dealing with and make them feel like they have someone in their corner."





Leigh Paterson

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As KUNC's mental health reporter, I seek to create a sense of urgency and understanding around issues related to mental illness, access to care and happiness in Northern Colorado and our mountain communities.

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