LDF Calls for Advancing Alternatives to Police and Community-Based Services for Black People with Mental Illness

Today, the Legal Defense Fund (LDF), in partnership with Bazelon Center for Mental Health Law, released “Advancing An Alternative to Police: Community-Based Services for Black People with Mental Illness,” a brief examining the incarceration, institutionalization, and police violence that Black people with mental illness, and all people with mental illness, face in law enforcement encounters when community-based mental health services are not available to respond to their needs.

“Advancing an Alternative to Police” notes that to protect Black people and others with mental illness, it is critical that we expand culturally competent, community-based mental health services. The services needed include clinical services, such as ACT, and mental health crisis services, but also non-clinical services, such as supportive housing, peer support, and supported employment. The brief outlines how developing an alternative to a law enforcement response requires action in three areas: re-directing requests for police intervention, developing the services needed for a non-police response, and maintaining on-going community based services.

The brief also recommends a list of actions that government authorities should take to better support Black people and others with mental illness, including the following. A full list of recommendations for local, state, and federal actors is included in the brief.

Congress should pass, and the President should sign legislation to:

- Empower states and localities with the resources they need to provide these critical services and supports and require that they be culturally competent.

- Provide strong financial incentives, including through federal grant programs, for communities to use the mental health system, rather than law enforcement, to respond to calls involving people with mental illness.

- Invest in programs that help expand the behavioral health workforce, including peer support/services, and provide incentives to individuals from Black and Brown communities to join the behavioral health workforce.

The U.S. Department of Health and Human Services (HHS) should:

- Promote and fund services that prevent encounters with law enforcement, including ACT, mobile crisis services, peer services, supported housing, and supported employment.

- Support programs that address underlying problems — sometimes called “social determinants of health”— that may prompt mental health crises for people with mental illness, such as supportive housing and supported employment programs.
• Allow federal Medicaid dollars to be used to support housing for people with mental illness.

States and local governments should:

• Conduct public education campaigns to inform people about alternatives to calling 911 and law enforcement, as well as the availability of community-based mental health services. Such campaigns should effectively reach Black communities—including by acknowledging trauma, featuring Black service providers, and reducing stigma about mental health services.

• Ensure that affected communities are involved in the design, implementation, and evaluation of all alternatives to a law enforcement response to people with mental illness, such as advisory councils and working groups.

• Expand the mental health workforce, including peer services, by among other things, taking advantage of federal Community Mental Health Services and Substance Abuse Prevention and Treatment block grants and Certified Community Behavioral Health Center (CCBHC) funds, investing in professional development, and identifying and removing barriers to entry for Black people and others.

• Take steps to diversify the mental health workforce to reflect the racial, ethnic, cultural, sexual orientation, and gender identity diversity of the communities served. Peer workers should reflect the lived experiences of people in the communities they serve, including Black communities.

• Address the social determinants of health, which helps prevent mental health crises. States and local governments should invest in programs that, among other things, help people secure and maintain housing and find and maintain employment.

According to the brief, “Since the risk of harm to the individual is so great, and the actual threat to public safety is usually small, mental health advocates stress that law enforcement response to people with mental illness should be avoided whenever possible. Contact between law enforcement and people experiencing mental health crises—even when officers respond alongside mental health workers in the ‘co-responder’ model—should be limited to only the rarest exceptions because of the potentially dire consequences... It is too late to avoid the tragic deaths of Natasha McKenna, Saheed Vassell, Daniel Prude, Walter Wallace, Jr., and the other Black people with mental illness who have lost their lives during encounters with law enforcement. But it is not too late for stakeholders to demand action and for our policymakers to respond with effective solutions.”

“We urgently call upon national and local stakeholders to center community based, trauma informed approaches that integrate peers, language diversity, cultural competency, and cross disability accessibility. Effective alternative responses to crises are needed. Robust longer-term services, including peer services, Assertive Community Treatment (ACT), supported employment, and supported housing, delivered equitably and without bias, are also critical. Black communities must be centered and participate in decision-making about the systems that will serve them. These systems must be a meaningful alternative to a police response.”

“Implementing a comprehensive community-based mental health system can and will stop violence against Black people with mental illness. We urgently call on our cities, states, and the federal government to implement these systems now.”
Read the full brief [here](#).

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