Introduction

The City of Austin has made numerous reforms to public safety over the years, including conducting an investigation of systemic discrimination and bias within APD and establishing the Office of Police Oversight.

The April 24, 2020 death of Mr. Michael Ramos during an interaction with APD officers amplified calls to end disparities in how communities of color are treated when they interact with officers. Those calls became part of a moment of national racial reckoning with the May 25, 2020 death of George Floyd at the hands of a Minneapolis police officer.

In August 2020, after hours of community testimony, the City Council passed a historic budget to redefine public safety. The City of Austin is committed to implementing policy and cultural changes to address the disproportionate impact of police violence on people of color and other affected communities.

Council approved an APD budget of approximately $290 million which reflects a budget change of $153.2 million. The adopted budget directs that $153.2 million in police funding to be reallocated in the following ways:

- **Reduce & Reinvest** APD funding by approximately $31.5 million – taken primarily from cadet classes and overtime – to reinvest in permanent supportive housing and services, EMS for COVID-19 response, family violence shelter and protection, violence prevention, workforce development, and a range of other programs.

- **Transfer** a number of APD functions (and related funding of approximately $76.6 million) out of APD over the course of the fiscal year. These include Forensics Sciences, Communications/911 call center, strategic support, and internal affairs.

- **Create** a Reimagine Safety Fund to potentially divert approximately $45.1 million from APD toward alternative forms of public safety and community support as determined through the year-long reimagining process.
Council also directed the City Manager to return to Council during the mid-point of the 2021 fiscal year to amend the public safety budget following public engagement on the Reimagining Public Safety (RPS) Process.

In response to these Council actions, the City Manager charged his Executive Leadership Team with creating a City-Community Reimagining Public Safety (RPS) Task Force to consider new ways to help and support the community in times of crisis.

This report delivers the mid-year recommendations and body of work completed thus far by the RPS Task Force.

**A Message from the RPS Task Force Chairs**

This is a historic moment, at least in our lifetime, that nationally and locally there has been a strong call for an uprising to completely rethink policing and reimagine public safety as we know it in this nation.

It is a time that cities all across the country are seriously considering defunding policing and investing in alternative solutions for public safety. This moment in time is a reflection of many years of community work here locally and around the nation to critically examine the role of policing in our lives and our ability to be safe. As a result of these uprisings, the City of Austin has convened this task force which is a community-city joint task force to reimagine public safety.

We hosted our first task force meeting on August 24, 2020 and we have convened monthly to move this critical work forward. We decided early on to make all of our meetings public and to provide interpretation into Spanish or other languages as requested. This is part of the effort to truly make this an accessible conversation to people at home.

We began our process by looking at the history of policing before we developed any recommendations. A working group of task force members created a timeline looking at the history of policing, starting with colonization and enslavement and ending in 2020 in Austin locally.

From our timeline, we then developed values to guide our work as well as guidelines for our governance and decision making. Our values were developed collectively and serve as a guiding compass to together reimagine public safety.

We are now at a proud place to share the final proposals to reimagine public safety from our task force working groups. We submit these recommendations in response to the Council.
direction for the City Manager to return to Council during the mid-point of the 2021 fiscal year to amend the public safety budget following public engagement on the Reimagining Public Safety Process. You will find the task force final recommendations in the last section of this report.

As Co-Chairs we would like to thank all of the task force members who dedicated many hours of listening, expertise, and struggling together to develop this body of work. We also honor and recognize the work of many community members that were not on the task force but contributed hundreds of hours volunteering to help us think collectively and more practically speaking how to reimagine public safety, not just policing.

Paula X. Rojas
Communities of Color United

Brion Oaks
City of Austin, Equity Office
Task Force Community Members

- Quincy Dunlap - Austin Area Urban League
- Hailey Easley - Austin Asian Community Health Initiative
- Emily Gerrick - Texas Fair Defense Project
- Monica Guzmán - Go! Austin/Vamos! Austin (GAVA)
- Priscilla Hale - allgo
- Dawn Handley - Integral Care
- Chris Harris - Texas Appleseed
- David Johnson - Grassroots Leadership
- Amanda Lewis - Survivor Justice Project
- Nelson Linder - National Association for the Advancement of Colored People (NAACP)
- Kathy Mitchell - Just Liberty
- Chas Moore - Austin Justice Coalition
- Cary Roberts - Greater Austin Crime Commission
- Paula X. Rojas - Communities of Color United
- Matt Simpson - American Civil Liberties Union (ACLU)
- Alicia Torres - ICE Fuera de Austin
- Cate Graziani - Texas Harm Reduction Alliance

Task Force City of Austin Members

- Nuria Rivera-Vandermyde - Deputy City Manager
  - Rey Arellano - Assistant City Manager
  - Shannon Jones - Interim Assistant City Manager
  - Farah Muscadin - Director, Office of Police Oversight
    - Brion Oaks - Chief Equity Officer, Equity Office
Centering Those Most Directly Harmed by Systems

The Meaningful Community Engagement Work Group of the RPS Task Force has led the efforts to ensure across the body of work and recommendations of the task force that those most directly harmed stand in the center of the engagement and design of our recommendations. Throughout this process many of our workgroups have leveraged strategies and opportunities to engage those most directly impacted in the development of their recommendations. The RPS Task Force efforts to center those most directly harmed culminated in a city-wide listening session on April 10, 2021 with interpretation services in ASL, Arabic, Burmese, Mandarin, Korean, Urdu, Spanish, and Vietnamese. Over 150 community members joined the listening session to share their experiences with public safety in our city as well as their ideas on how we can reimagine public safety. The task force accepted in-person, written, audio, and video testimony. More than 1,200 people watched the conversation on Facebook. The following is a snapshot of what we heard:

1. Divert funds from APD to community services such as:
   - Health care
   - More clinics for substance abuse and recovery
   - COVID-19 care
   - Mental health services
   - Affordable and accessible housing
   - Ending food insecurity
   - Financial assistance to victims and families of victims of police brutality & ICE deportation
   - Financial assistance to families hit by the pandemic and the recent winter storm

2. Recurring stories from community members being profiled, harassed, bullied, and falsely accused by the police because of their race, gender, language barriers, and citizenship status; Stories of family members who have been killed by the APD

3. Youth participants spoke on being targeted by the police and subjected to the school to prison pipeline
4. A need for 9-1-1 call-takers to speak multiple languages for appropriate police response
5. Stories of APD collaborating with ICE to deport undocumented/immigrant Austin residents
6. More housing, mental health counseling, and jobs for folks experiencing homelessness
7. Lack of trust in police because of police intimidation and police brutality towards communities of color
8. Abstaining from calling the police because situation is worsened or ignored by police
9. Healthcare functioning as a pipeline for the police to criminalize people seeking care
10. Non-crime related matters should be relegated to non-police trained professionals such as:
   • Mental health crises
   • People experiencing homelessness
   • Traffic violations
   • Noise complaints
The following is the summation of recommendations developed by the eight working groups of the RPS Task Force. These recommendations were voted on and formally adopted by the members on April 15, 2020. These recommendations reflect the guiding values of the task force, rooted in divesting from systems that cause harm to investing in holistic approaches to community safety. It is our desire for these recommendations to embody our commitment to put forth sustainable and long term solutions, a reflection of collaboration with the community and positioned to advance racial equity.

1 To avoid any potential conflict of interest in recommendations that directly impact departments referenced in the work group recommendations, City staff abstained from voting on the recommendations.
Equity Reinvestment in Community Working Group

**Goal:** Identify and create upstream mechanisms that prevent the need for policing and invest in impacted communities to address long standing inequities.

**Contact:** Paula X. Rojas, paulax@mamabaila.com

**Working Group Members:**

Paula X. Rojas, RPS task force member

Monica Guzmán, RPS task force member; email: monica@goaustinvamosaustin.org

Marisa Perales; email: marisaperales@hotmail.com

Andrea Black; email: andrae@mayfirst.org

Elias Cortez; email: elangcortez@harmreductiontx.org

Raul Alvarez; email: ralvarez@canatx.org

Nyeka Arnold; email: nyekaarnold@gmail.com

Amy Madore; email: amymichelemadore@gmail.com

Rocío Villalobos; email: Rocío.Villalobos@austintexas.gov

Jasmin Patel; email: jasmin.navin.patel@gmail.com

Ricardo Garay; email: Ricardo.garay1@gmail.com

**Background & Context**

“Criminality” and violence stem from systemic failures to support community wellbeing in a universal and nondiscriminatory way. We recognize that violence occurs not only interpersonally but also from structural neglect and oppression, as we have all observed during the global pandemic, the recent winter storm, and regularly in the City’s lack of low-cost housing, adequate intervention to protect flood prone property, and response to loss of wages. We call for the City to halt investment in the violent and oppressive practices of policing and to pivot those dedicated resources to reimagined services designed to meet the needs of our communities.

By grounding ourselves in the history of policing in the US and in Austin, we can better understand the historical role of law enforcement as a mechanism to protect property and wealth through the use of violence. The US became the wealthiest country in the world via intentional policies and practices of exploitation and genocide. The current racial wealth divide (see “The Economic Impact of Closing the Racial Wealth Gap,” 2019, McKinsey & Co.) in our country is not by accident. The system of racial capitalism has cemented a racial hierarchy in all markers of life, including health, income and wealth, with white communities at the top, Black communities at the bottom, and other communities of color in between. Today in Austin, Black and Brown
communities have the highest rates of poverty, unemployment and housing insecurity. Related historical practices such as redlining and housing discrimination have resulted in geographic concentrations of poverty that are disproportionately communities of color in Austin. Our recommendations focus on these geographic communities.

**Recommendations**

The Community Equity Reinvestment Working Group of the Reimagining Public Safety Task Force makes the following recommendations to the Austin City Council and Quality of Life Commissions for divestment from policing and investment in community wellbeing, stability, growth and safety.

There is both a need for **immediate, direct economic support** for Austin residents who have been made the most vulnerable and are facing critical needs as well as **long-term and sustainable investment** in community equity. We recommend the following actions:

1. **The City invest at least $11 million from the current fiscal year budget** to be used to address the needs of 10 neighborhoods that have high concentrations of poverty, high unemployment, limited access to health insurance, high concentrations of COVID cases and/or a high level of need for basic-needs assistance based on calls to 2-1-1. See: https://coh-tx.maps.arcgis.com/apps/webappviewer/index.html?id=8d9051e9503d4338b6469c7a343881a1

2. **The City invest $44.8 million annually starting in FY 2021-22 to support long-term and sustainable investment in community equity.**

   a. The City will develop **strategically located neighborhood “hubs” managed by local grassroots organizations and administered by the City’s Equity Office in collaboration with Austin Public Health** to:

   i. **Oversee the implementation and distribution of a guaranteed income pilot program** for residents in the hubs’ jurisdiction in the form of direct recurring cash payments. Total $12 million annually.

   ii. **Direct new and existing city resources** to the neighborhood hubs to distribute in accordance with short-term priorities established via a community-driven process that includes meaningful involvement by residents.

   iii. With a commitment from the City to invest an additional $6.5 million annually per hub (total $32.5 million), work with residents to identify longer-term needs for their communities and prioritize how funds are spent.

**Use of Funds from Current-Year Budget**

The city must work with local community members to identify the communities that would benefit most from immediate community equity investment and that have a history of experiencing structural violence. The data are very clear. There are a number of Austin neighborhoods that are suffering simultaneously from over-policing and under-investment. We recommend the following datasets be used to identify and prioritize the neighborhood areas that have the greatest number of cross-sector challenges be prioritized:

- Over policing, concentrated surveillance, and patrol data
- Calls to 211 by Zip Code & Call Type: https://coh-tx.maps.arcgis.com/apps/webappviewer/
• Unemployment and underemployment rates
• Poverty and low-income neighborhoods
• Focus Areas Identified in the Central Health 2020 Demographics Report: https://central-health.net/wp-content/uploads/2020/09/demographic_report_2020_2020_09_04.pdf which includes data on asthma, behavioral health, COPD, diabetes, heart failure, and hypertension; insurance coverage (MAP/Medicaid/uninsured) and transportation
• Housing insecurity: areas, such as those identified in the Uprooted Report, that are vulnerable to gentrification and displacement
• Areas vulnerable to flooding
• Areas lacking tree canopy coverage
• Neighborhoods near brownfields, landfills, recycling, and wastewater treatment facilities
• Food insecurity: areas that lack access to fresh foods or grocery stores, referenced in recent TX Appleseed reports
• Predatory lender locations (Payday)
• COVID- looking at data re new cases, mortality rates, testing site availability, and vaccine access

The City via the Equity Office will set aside $100,000 each for 10 neighborhood areas that have seen the greatest health and economic impacts from the pandemic. The City, through the Equity Office, must engage community partners (organizations) already engaged with and centering residents, to identify and distribute to residents in need. The City will use the remaining $10 million (of a total of $11 million from current fiscal year funds) to provide rent assistance to prevent evictions and direct assistance for basic needs to residents of those neighborhoods (including direct cash assistance, assistance for rent, utilities, food, medication, and health care, and assistance for other delayed costs such as DACA and naturalization fees). Community partners will identify community members needing assistance, and program funds will be used to address the needs of individuals identified by community partners for assistance. Community partners will use this outreach as an opportunity to identify individuals who might serve on advisory councils for neighborhood hubs.

The work done between now and the end of the fiscal year will inform and facilitate the selection of 5 or more neighborhood hubs that will operate on an on-going basis starting in FY 2021-22.

**Annual Investment of Funds to Support Neighborhood Hubs**

Once at least five neighborhood hub sites have been selected, the City Equity Office will designate panels of community members that will select partner organizations to manage and lead the organization of each hub. Screening should be stringent; the panel should demonstrate that selected organizations have an established history of direct community engagement and outreach with directly impacted communities, especially non-white communities, marginalized and underserved populations, and other survivors of structural violence. Priority should go to grassroots organizations that demonstrate direct relational practice with the communities they serve. If there are no willing or existing organizations, the City should explore establishing paid resident councils composed of directly impacted communities and seek similar organizations that would
be willing to house the hub resources and infrastructure.

Once these locations and organizations are identified, the hubs will serve as both drop-in centers for easy and multilingual access to resources for residents as well as bases for funded outreach efforts to reach residents at their doorstep in order to meet needs and bridge the gap left by poor accessibility and navigation. There are currently city-run Neighborhood Centers in some of these communities, but they are not meeting the needs of community members and many residents do not feel safe accessing them. These neighborhood hubs will be created and staffed by the neighborhoods, and local community members will determine and prioritize both the needs in their community that the hubs should address and what resources are needed. These hubs can also serve as the “resilience hubs” that City Council Member Kathie Tovo has recommended and should receive support for both emergency and ongoing community needs.

We recommend the addition of two staff members to the city’s Equity Office: a Financial Manager and Program Manager, both dedicated to the implementation of the neighborhood hubs. In addition to the supportive program funds partner organizations will receive to make the hubs operational, the City will also provide funds to hubs to hire a community member to serve as a city liaison responsible for coordinating between organization staff and the Equity Office staff. The city must be responsive to the city liaison in each hub. The city liaisons will help direct resources to groups in need. (Total central staffing $300,000 annually)

Once established, the hubs will implement the following recommendations of the Community Equity Reinvestment group:

A. Pilot a Guaranteed Income project.
   a. Why?
      i. Cities across the country have begun to implement guaranteed income pilot programs. These pilots target particularly vulnerable and underserved communities and provide a steady and reliable income stream that helps recipients respond to needs as they arise and at their own discretion. Nearly half of the US population experiences income fluctuations of 25% or more, and nearly 40% of the population cannot afford an emergency expense of $400. As income inequality in the US steepens year after year, millions of Americans are living paycheck to paycheck, and we are beginning to see concentrated areas of poverty experience parallel rises in policing and respective declines in residents’ social determinants of health. Cities have begun to stimulate these regions with direct and consistent cash assistance and are seeing complete revitalization of these communities. Previous and ongoing experiments have found the following results for participants: better educational outcomes, substantive improvements in physical and mental health, significant reduction of predatory debt, and greater confidence in having basic necessities met. They have also found no appreciable impacts on the labor market.

In Austin, we have the foundation to make this pilot possible. We have facilitated a few successful initiatives and have the infrastructure needed to launch such a pilot. As a result of the COVID pandemic, the RISE resolution launched programs that have transferred one-time direct cash assistance to residents facing the health and economic impacts of the pandemic. We now have the mechanisms and expertise needed to launch a more impactful
guaranteed income program.

In addition to the multiple RISE programs implemented by the city of Austin, there are innovative pilot programs occurring locally as well as nationally. One example is a recent partnership with local philanthropic funds ($1.2M) that partnered with 100 families on a 12-month pilot starting in March. This initiative has invested $12,000 per family over 12 months ($1,000/month). Research on the impacts is currently underway to learn from the families.

As the City of Austin considers how to reallocate resources for and reimagine approaches to anti-displacement, housing stabilization, and public safety, the Innovation Office, Equity Office, Neighborhood Housing and Community Development, and the Mayor’s Office are exploring income transfers and Guaranteed Income programs that adopt a strength-based approach. This approach includes listening to and learning from communities and providing unrestricted capital while allowing families to have choice and control over their initiatives. Guaranteed income programs also serve as a form of repair for the historic and structural economic inequities that Black, indigenous and other communities of color have faced for hundreds of years nationally and locally. A substantial investment from the city of Austin is imperative.

b. How it will work:
   i. Guaranteed Income Project Pilot: $1,000 monthly for one year to 200 households per hub x 5 hubs. Total $12 million annually.
   ii. Cash grants will go to neighborhood hubs that will directly distribute funds on a recurring basis to eligible residents in the area.
   iii. The project will be targeted to people who are most in need based on established criteria rather than an open lottery.
   iv. The City Equity Office will convene a process that determines eligibility requirements using the equity assessment tool.
   v. The Equity Office staff have offered their support and have stated they are willing to coordinate with staffing and direct cash assistance.
   vi. The Equity Office will support efforts to provide benefit recipients financial counseling services for each potential recipient of guaranteed income funds. These financial counselors will walk each prospective recipient through a personalized explanation and exploration of their benefit services and explain how guaranteed income payments may interfere or impact other benefit payments they are currently receiving.
   vii. The Equity Office will facilitate coordination with Texas Health and Human Services to ensure that guaranteed income payments are not included in benefit-related calculations of income so as to not interfere with essential benefit services that eligible residents may currently be receiving. The Equity Office will take significant measures to meet with other successful guaranteed income pilot projects in order to research and explore methods in which the distribution of guaranteed income payments does not interfere with other benefit payments residents may be receiving.
viii. The Equity Office will also implement an evaluation process so as to measure and assess performance on an annual basis. This data can inform continued implementation and support consistent improvement in accessibility, feasibility, and reach. It can also be helpful for other similar efforts across the country.

B. Identify current area-specific city funds that are designated for communities also selected for hub placement and designate hubs as the fund managers for those resource pools.

a. Additionally, we believe our communities could widely benefit from access to public resources such as city buildings, equipment, police vehicles etc. As demonstrated in our winter storm, there were so many resources available that the city failed to mobilize or make accessible. Buildings went unused that could have been used as shelters from the cold; heavy-duty police vehicles capable of weathering the conditions could have been used to transport stranded and hungry individuals but they remained vacant and unused. Thus, we demand public and community ownership of city equity and property and expect the city to provide access to resources that are either under-utilized or misused.

b. Any funding streams devoted to area-specific interventions (Project Connect, Riverside Togetherness) should be redirected to neighborhood hubs for leadership and decision-making capacities, informed and driven by feedback solicited from residents of these areas.

C. The city will set aside a larger pool of new renewable funds from both the APD budget and other city funds. Total $32.8 Million annually. The City must commit to continuing to redirect funds away from APD. But redirecting funds from APD’s budget is insufficient for the deep investments of significant resources that are needed to provide communities with the tools to implement housing and neighborhood stability measures—measures that will assist in preventing crises, rather than simply responding to them. In addition to funds redirected from APD’s budget, various other funding sources intended to address housing instability and displacement must be placed in the hands of the communities that are most directly impacted—communities that have been demanding anti-displacement resources from the City for decades. Among those funding sources that should be overseen by directly impacted communities are: affordable housing bond funds, the housing trust fund, the Mayor’s Strike Fund, Project Connect anti-displacement funds, and general revenue funds (collectively referred to as, “anti-displacement funds”). The city will work with local, directly-impacted community members to develop longer-term proposals for community reinvestment, which could include new low-cost housing on city-owned property, anti-displacement measures to maintain existing housing, flood mitigation efforts, expanded direct cash assistance, etc. Decision making will be place-based and will occur through a community planning process developed by community member councils. Resources will be allocated for both the planning process and to implement the projects that are identified. In addition, short-term investment programs will be funded by the City, using funds redirected from APD’s budget, and will be administered by the hubs, to prevent displacement and destabilization of communities. These micro-loan and micro-grant programs are detailed below.

D. Develop and implement a community-based investment process to support investments that proactively prevent crises rather than respond to crises, by empowering communities to implement housing and neighborhood stability measures.
a. Why?

i. The impact of housing insecurity is profound. Tenants, whose wages do not keep up with rent, are cost-burdened, experience financial strain and/or displacement have been shown to experience a wide variety of chronic stress-related health impacts. Factors such as poor housing quality, stress of financial and housing instability, and lack of funds for nutritious food and healthcare often lead to poor health outcomes. Disruption of social networks can exacerbate these health challenges.

The city must invest in the assets that these communities already possess, such as social cohesion among community members and neighborhood businesses, and provide resources to prevent some of the economic stressors that impact community residents’ health.

It’s crucial that these communities are provided the resources to determine and develop the appropriate solutions for the various stressors and issues they face.

b. How it will work:

i. With oversight from the geographically-based neighborhood hubs, community members will lead the process to manage city-designated funds for area-specific impact. The city should make an initial investment of $6 million per hub and commit to an additional annual deposit of $6 million per hub per year for the next 10 years to establish a micro-loan program, an emergency micro-grant assistance fund, and a rental micro-grant assistance fund. These are described in more detail, in Section D, below.

ii. Hubs will develop community member councils who will decide how these neighborhood funds and grants should be administered. The micro-loans will not replace emergency relief funds or crisis relief funds; these are purely intended to be used for community development and equity investment.

iii. These community member councils will also determine how anti-displacement funds should be invested. The use of an equity assessment tool is required to determine how funds will be used. The community member councils will engage in community planning efforts to determine appropriate place-based measures to achieve housing stability. These councils must include renters among their members.

E. Anti-Displacement Funding and Community Assistance Funding

a. A portion of the micro-loan program funds--up to 50%--may be used to develop a small business capital fund or small business loan program to support existing community-serving businesses in the area and/or to develop innovative economic security models for vulnerable residents, such as cooperative businesses (e.g., day-cares) run by local residents.

b. At least 50% of the micro-loan program funds will be used to provide micro loans for individual and family needs, such as rental assistance, home repair assistance, childcare assistance, car repairs, and other unforeseen needs. The micro-loans will not replace emergency relief funds or crisis relief funds,
c. Separately, funds will be allocated to community hubs to support an emergency assistance micro-grant fund. This micro-grant fund will be used to provide emergency relief for residents facing urgent financial burdens, such as utility assistance, eviction prevention assistance, assistance with medical expenses, etc.

d. Separately, funds will be allocated to community hubs to support a Rental Assistance or Tenants’ Support Program, post-pandemic.

e. At least 25% of current and future affordable housing bond money and affordable housing general fund dollars -- in addition to other funding sources, such as the Mayor’s Strike Fund and Project Connect anti-displacement funds -- will be allocated to the community hubs for purposes of implementing place-based anti-displacement measures. These anti-displacement measures may include land acquisition, community land trusts, and other displacement mitigation strategies. Community member councils may also use bond money to oversee the development of housing or other resources on city owned property within the hub’s geographical boundaries.

f. A portion of the above-described anti-displacement funds will be set aside for use by community member councils to develop the capacity of tenants, homeowners, and other vulnerable populations to organize, strategize, and advocate for policies that protect deeply affordable rental properties and home ownership.

**Current Fiscal Year Costs**

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establish 10 community partnerships ($100,000/partnership)</td>
<td>$1 million</td>
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<tr>
<td>Provide financial assistance to meet immediate community needs ($1,000,000 per area)</td>
<td>$10 million</td>
</tr>
<tr>
<td><strong>Total - Current Fiscal Year Funds</strong></td>
<td><strong>$11 million</strong></td>
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**Annual Investment FY 2021-22 and Beyond**

(Note: The total request reflects the establishment of only 5 neighborhood hubs. If more than 5 hubs are selected, the totals should be adjusted accordingly.)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Staffing, administration, and programming for 5 neighborhood hubs ($500,000/hub)</td>
<td>$2.5 million</td>
</tr>
<tr>
<td>One city liaison (to neighborhood hubs); two Equity Office hires to provide oversight and support to the program</td>
<td>$300,000</td>
</tr>
<tr>
<td>Guaranteed Income Project Pilot ($1,000 monthly for one year to 200 households per hub x 5 hubs)</td>
<td>$12 million</td>
</tr>
<tr>
<td>Community Investment Fund</td>
<td>$30 million</td>
</tr>
<tr>
<td>Establish Loan Program to support existing small businesses &amp; entrepreneurship opportunities; half of these funds will be used to fund a micro-loan program for emergency rental assistance, emergency home repair assistance, eviction prevention, and other unforeseen emergencies. ($4 million per neighborhood hub, total $20 million)</td>
<td></td>
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<tr>
<td>Establish Emergency Assistance Fund to provide emergency relief for residents: housing assistance; utility assistance; home/car repairs; health expenditures; etc. ($1 million per hub, total $5 million)</td>
<td></td>
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<tr>
<td>Continuation of Rental Assistance Program in neighborhood hub areas - post-pandemic. ($1 million per neighborhood hub, total $5 million)</td>
<td></td>
</tr>
<tr>
<td>Total - Annual Investment</td>
<td>$44,800,000</td>
</tr>
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</table>
Secure funds from other city revenue sources to support neighborhood hubs:

| Bond Funding Dedicated for Affordable Housing | Dedicate 25% of funds to mitigate displacement in neighborhood hubs |
| Annual General Fund Allocations for Affordable Housing | Dedicate 25% of funds to mitigate displacement in neighborhood hubs |
| Other anti-displacement funds | Community member councils for designated hubs to direct and oversee expenditure of the majority of anti-displacement funds. |

In addition to advancing our goal of equity reinvestment, we support the recommendation from the Public Health Reinvestment working group regarding a Community Health Workers Network and Training Hub.

As an additional step towards this City’s divestment from policing and investment into community wellbeing, stability, growth and safety, this Working Group supports and calls for the implementation of the Community Health Workforce recommendation set forth by the Public Health Reinvestment working group. We believe the development of a community health worker workforce complements our recommendations in advancing our goal of equity reinvestment. We envision collaboration between our proposed community hubs and the development of a workforce that would create opportunities for many of the people in our communities who have not been given access to or have been able to have stable careers with dignified compensation. For years and years, systemic racism has destabilized our communities and preyed on our poverty and necessity, targeting people of color and feeding them through the pipelines of military enrollment and law enforcement training. Providing new opportunities centered in community care and collaboration, investing in the expertise that lived experiences provide, and prioritizing healing and restoration rather than violence and oppression, is a clear step towards community wellbeing, stability, growth, and safety and we urge Council to adopt this measure.
Centering the voices of those most directly harmed by systems in Reimagining Public Safety conversations by creating processes and opportunities for disproportionately impacted residents to offer up their experiences and own thoughts on what they need to feel safe. The input will ensure task force working group proposals and recommendations are informed by community members and not just organizational representatives.

Contact:

Alicia Torres: atorres@grassrootsleadership.org

Members:

Alicia Torres, RPS TF member; email: atorres@grassrootsleadership.org

Rebecca Sanchez; email: rsanchez@grassrootsleadership.org

Monica Guzmán, RPS TF member; email: monica@goaustinvamosaustin.org

Cary Roberts

Temitope Olujobi; email: temitolujobi@gmail.com

Doris Adams; email: dee.adams543@gmail.com

Lucy Nguyen; email: lucy@aachi.org

Background & Context

The current system and procedures Austin City Council has in place for engaging the constituents they serve does not meet the need for the community to feel heard and be involved in the decision making process. The Reimagining Public Safety Meaningful Community Engagement Workgroup strongly recommends that the City Council significantly improve the process in place as it is imperative for our community to have input on actions that affect our everyday lives. This is especially true for community members who are the most impacted by decisions the City makes around public safety, ie, our undocumented, people experiencing homelessness, disabled, LGBTQIA+, low income and/or BIPOC community members who are not represented in the City Council and are often disregarded.

The Meaningful Community Engagement Workgroup gathered testimony from the most directly impacted community members on their experiences trying to engage with the City Council and influence decision making that impacts their lives. Resident feedback was gathered through public virtual listening sessions as well as a set of online surveys. From this information we have determined that the main areas of focus for the City Council to remedy the current system and procedures for engaging directly impacted constituents in decision making should be:

Power to The Polls
Artwork by Adriana Arriaga
Sourced from Amplifier Art
1. Community Outreach
   a. Ensure information communicated by the City is transparent and language accessible

1. Community Engagement
   a. Ensure residents are centered and engaged prior to, during and after all decision making

2. Accessibility
   a. Language (translation + interpretation)
   b. Time/location
   c. Technology

3. Investment
   a. Ensure equitable community investment to support improved involvement of directly impacted constituents in the City decision making processes

With these main areas of focus, we constructed a set of community centered recommendations that are essential for the City Council to implement to better engage with the constituents they represent. The recommendations are intrinsically linked to the Reimagining Public Safety Task Force Guiding Values which we, not only as Task Force representatives but also constituents and community members, firmly maintain should be at the center of all City Council operations.

Recommendations

A. Recommendation 1 - Prioritize community access to decision making in city council meetings that is transparent and culturally responsible with the diversity of cultures, accessibilities & languages of constituents:

   • Utilize paid commercials, TV, Radio, social media, billboards & busses, bus stops (in multiple languages) to notify the community about City Council conduct prior to, during and post any city council meetings

   • Community members don't all have access to and/or know how to navigate the City of Austin website to find information about the City and City Council therefore, it is essential to use a variety of communications tools to notify the public. During the Project Connect campaign, we as community members have observed how capable the City of Austin and City Council can be with regards to publicizing information and community outreach. The Meaningful Community Engagement Workgroup recommends that the City Council utilize much of the same strategies and systems employed during the promotion for Project Connect to publicize all City Council meetings.

   • All information being publicized should be translated in all the most spoken languages, taking into consideration geographic areas that have specific communities with high limited English proficiency. All information should also be ready to be immediately translated if requested by community members. During City Council Meetings, before each council vote takes place, publicly name how many community members
(registered/spoke against/for) an item.

• i.e. Even though 367 people registered against this item, City Council is voting unanimously to approve, etc.

• Report back re: Actions taken by City Council Meeting after each meeting to include:
  • Votes and how each member voted
  • The public response/commentary, i.e. how many folks registered or spoke in opposition & for items
  • Both reports shall be written in accessible language describing what the vote means, so they are easier to read and understand
  • Revise the City of Austin website that would ensure it is professionally translated, much easier to navigate, more user-friendly

B. **Recommendation 2: Make City Council meeting processes more accessible to community members to participate in while centering the voices and experiences of those most directly impacted.**

• Implement a Tier System that allows people who are the most impacted by an upcoming City Council decision to share testimony first, working with CBOs and the Equity Office to identify relevant tiers for the particular decisions being considered
  • i.e. In the RPS Task Force Community Listening Session the speaker tier system we created prioritized those who have been most directly been impacted by actions taken by APD

• Significantly improve the current translation and interpretation service system by offering a larger variety of languages spoken by our community members in real time during City Council meetings and make the audio recordings available for community members to visit at any time.
  • Burmese
  • Spanish
  • Korean
  • Arabic
  • Chinese (Mandarin)
  • Vietnamese
  • Urdu

• Make speaker registration and speaker waiting process more efficient and accessible for virtual or in-person city council meetings, including:
  • Allowing registered speakers to testify in whichever format they chose, including submitting video, audio, voicemails, and written testimony to be played during the meeting and simultaneously interpreted on the spot
• Reducing dial-in waiting time by allowing registered speakers to leave voicemails for virtual meetings
• Creating a system that allows community members to dial into city council meetings at any time
• Eliminate the rule of people having to pre-register to speak; council meetings should be open for everyone to participate at all times
• Eliminate the rule of people that will need translation having to request interpretation and registering 2 days before everyone else

• **Recommendation 3:** Require City Council members to develop a robust community engagement strategy to actively engage and center community members in their district most impacted by city council decisions.

• Have at least 1 community listening and feedback session, and 1 Q & A session (available in multiple languages, accessibility formats, etc.) on items they are sponsoring/co-sponsoring for each city council meeting.

• Publicly identify *actual* connections that were made with community organizations or groups to solicit input and expertise from community members on proposed items.

• Invest in community-based organizations who have relationships with people most impacted by decisions and create a rich two-way communication to assure that you make constituent informed decisions.
  
  • Given the strong oral tradition in many communities, holding sessions where people can discuss issues firsthand will support a feeling that their opinion matters. Optimally these would be more intimate events held where people live/or in small community-based Zoom sessions and could be co-sponsored by the CBOs. Building positive relationships with the community is central to assuring community engagement.

• Invest in and engage with existing community centers and neighborhood “hubs” proposed by other Reimagining Public Safety Task Force work groups.

• **Recommendation 4:** IMMEDIATELY invest $5M for the Communications & Public Information Office (CPIO) budget to cover translation and interpretation services, and every city department must:

  • Include a base budget line item for community engagement, flexible funds to pay partners (community organizations) for the following (including/but not limited to):
    
    • translation/interpretation services
    • child care
    • venue support
    • remote access support
    • request community organization(s) to provide facilitation
    • community person(s) who can provide above
- stipend for resident(s) with lived experience to support above
- Engage community partners (organizations) who are already engaged with and center residents; and,
- $250K, annually, added to the base budget of the Equity Office for 2 new staff members (salary/benefits for 2 FTEs).
Patrol and Surveillance Working Group

Addressing why and how patrol and surveillance policies harm Black, Indigenous, and People of Color (BIPOC) communities and fail to develop community safety. The group will explore how to divest funding from these operational areas towards creative solutions to community needs.

Contact:

David Johnson: criminaljustice@grassrootsleadership.org

Working group members:

David Johnson
Sue Gabriel
Rodney Sáenz
Bethany Carson

Background and context:

POLICE ARE NOT PUBLIC SAFETY

Police do not and cannot prevent crime from happening. In 2019, fewer than half of crimes in the U.S. were reported, and fewer than half of those reported were solved.¹ Only 32.5% of household property crimes were reported and only 17.2% of property crimes reported were cleared.²

Police do not spend most of their time addressing violent crime. Less than 1% of calls APD responds to are related to violent crime.³ Even then, there is often little they can do by the time they arrive. Consider this person who took our survey and recounted their experience with police after a home robbery:

“We experienced a home robbery here in Austin and our door was broken. The officers told us they couldn’t do anything about it. They said if it made us feel better they could take some finger prints but it was very unlikely anything would come of that.”

Since police don’t prevent crime, or “solve” crime in most cases, what do they do? Patrol policing emerged out of a need to surveil and exercise control over Black, Brown, and poor

³ https://austinjustice.org/assessment-of-apd-calls-for-service/
communities through threat of violence.\textsuperscript{4} Based on present day data and lived experience, its impact remains the same. Patrol is not only ineffective, but actively harmful to those communities.

- From 2015-2021, police killed at least 35 people (4 more died in their custody but APD claimed they were suicide or accidental deaths).
- The Joyce James report found that “residents in Austin neighborhoods with a higher percentage of African American or Hispanic/Latinx residents, those in poverty, and neighborhoods with higher crime rates, had disproportionate force and severity of force used upon them.”\textsuperscript{5}
- According to the city’s Joint Analysis of APD Racial Profiling Data, racial profiling data reveals stark racial disparities in motor vehicle stops and searches. Black people make up about 8% of Austin’s population but account for 14% of traffic stops, 25% of stops resulting in searches, and 25% of stops resulting in arrest. Black people were most overrepresented in all categories except citations where Hispanic people were most overrepresented. White people were underrepresented in all categories.\textsuperscript{6}

**COMMUNITY ENGAGEMENT**

Consistent with the task force principles of prioritizing those most directly harmed by our current policing systems, the Patrol & Surveillance working group met with 40 people directly impacted by incarceration, deportation, or immigration enforcement to hear about what safety means to them, as well as their experiences with policing. To date, we have collected 39 surveys, which were disseminated by word of mouth to people directly impacted and their immediate community.

Our respondents’ experiences, feelings, and beliefs reflect what we see from the history and aggregate data: that police do not keep them or their communities safe. Participants expressed support for the vision of reallocating harmful areas of policing to other community resources that would make them feel safer.

Imagining a safe community without police patrol and surveillance can seem idealistic, but in reality these spaces exist today. Consider the experience of one participant in our community engagement session:

“We moved to a pretty white, affluent suburb. And I remember seeing that there were no police by the grocery store, not at the parks. Nowhere. If you want to know what a community without police looks like, go to a wealthy, white suburb. It’s what their day to day looks like. It’s very unmarked by any sort of surveillance, any sort of police presence. And I remember how striking that was...The fact is that when there is economic security, childcare, healthcare, housing, food and water, the need for the police to be there clearly isn’t necessary. I just want to remind

\textsuperscript{4} See the history of policing timeline developed by the task force, including the Fugitive Slave Law, “vigilance committees” to “drive Latinos out of Austin,” the decision to create a police force in Austin due to the fact that “a large number of Negroes turned loose by their owners are congregating in and about Austin,” and APD Chief Morris’ order that “all Black people found idle without work should be arrested and fined with vagrancy.” https://austintexas.gov/publicsafety/task-force
\textsuperscript{5} http://www.austintexas.gov/edims/pio/document.cfm?id=352525
people who want to block this idea by saying we can’t abolish the police that there are many instances in our society right now, where you don’t see the presence of police in people’s day to day community. That’s important to remember.”

LONG TERM VISION AND RECOMMENDATIONS

Long term, we must divest from this entire racist, classist model of patrol policing.

- **The entire $210,604,299 Neighborhood-Based Policing line item in the APD budget should be phased out** because it is based on an inherently problematic model. Driving around looking for “criminals” is based in a system of surveillance and control enforced through the threat of violence.
- **No more cadet classes.** Training officers in this model will inevitably create an “us vs. them” mentality regardless of what the training looks like.
- **Phase out all use of deadly weapons.** Maintaining a fully armed and staffed police force is a public safety threat. It is intolerable that many Black and Brown people pulled over in traffic stops fear for their lives from the people who are paid to protect them. This reality cannot be addressed with more community outreach; it will only be resolved by stopping the danger to their lives.
- **Traffic enforcement should be decoupled.** State level changes are needed to decriminalize traffic offenses and allow unarmed civil servants to direct traffic and make stops for civil traffic violations. There are some interim changes that are possible now.
- **Reallocate money from policing to reinvest in economic, health, and housing resources that create REAL safety and well-being for overpoliced communities.** Communities of color are deprived of the resources they need to survive, which fuels a vicious cycle of criminalization. We are all safer when everyone in our community has what they need to survive.

IMMEDIATE BUDGET RECOMMENDATIONS

The following recommendations should be implemented beginning in FY2021 to reduce the public safety threat posed by patrol and surveillance and to reinvest in holistic public safety. The majority of these items are budgeted year after year, creating the opportunity for ongoing reinvestment in community resources and services.

**Safety is...an end to discriminatory and dangerous patrol.**

Communities of color in Austin live under constant threat of police violence. They are heavily overrepresented in police use of force incidents and homicides. Particular programs and units glaringly contribute to these disparities and dangers. Black and Brown people are heavily over-represented in the data APD uploads into the Texas Gang Database. The Riverside Togetherness Project, which increased police presence to patrol for low level traffic and 'quality of life' offenses in the several block radius of where Mike Ramos was killed is still in operation.

APD seriously injured dozens of people in last year’s racial justice protests but is still responsible

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APD seriously injured dozens of people in last year’s racial justice protests but is still responsible for “crowd management”. Property can be declared a nuisance and seized if allegedly patronized by people committing a crime, feeding displacement, gentrification, and the wealth gap. APD houses a US Marshals task force notorious for its toxic warrior culture and unaccountable killing of civilians at rates higher than local police departments. Numerous reports have noted the persistent warrior and “us vs. them” mentality of the cadet academy. Yet the city continues to fund these programs and units that have been found to increase danger and disparities for people of color. The best way to stop this disparate harm is to cut funding for what causes it.

**Recommendations:**

1. Defund the following budget items:
   - $216,581 Crowd management
   - $2,276,488 Gang Suppression Unit
   - $312,381 Nuisance Abatement
   - $600,000 Riverside Togetherness Project
   - $1,453,743 US Marshals’ Lone Star Fugitive Task Force
   - $685,161 Weapons and military supplies (rifles, pistols, ammunition, “less lethal”, targets & backers)
   - ~$7.6M Training and recruitment of new cadets

   Total: ~$12.5 Million

2. Disarm traffic patrol that cannot be immediately decoupled:
   - It is unacceptable that Black and Brown community members must fear for their lives during routine traffic stops. Officers who conduct routine traffic stops should not be armed with deadly weapons, but instead receive more and better training in de-escalation. We understand that this recommendation will require reorganization of how APD structures patrol, as all neighborhood patrol units currently take part in traffic enforcement. This unit could also be used as a pilot for further disarmament of the department, consistent with our recommendation to entirely phase out the Department’s use of deadly weapons.
   - No weapons budget should be included with the addition of new sworn FTE’s.

3. Reallocate this money to fund services that will help mitigate the impact to communities most harmed.
   - Fund immigrant defense through the public defender’s office
   - Fund direct cash assistance for overpoliced communities through a guaranteed

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8 A ProPublica analysis found that the toll of nuisance abatement actions falls almost exclusively on minorities and that there are devastating impacts for people not convicted of any crime. https://www.propublica.org/article/nypd-nuisance-abatement-evictions


10 Federal grant funding. Not included in total as the funding could not be reallocated.

11 This year is unique because Council did not allocate money to cadet class salaries and decreased other line items. Based on the budget proposed by the City Manager for this fiscal year, these items would equal $7,972,069.

income pilot through geographic neighborhood hubs as proposed by the Equity Reinvestment in Community working group.

- Fund health, including behavioral and mental health initiatives for overpoliced communities, including funding for community health workers as proposed by the Public Health Reinvestment working group.

**Safety is...being able to live and exist peacefully in your neighborhood, social, and recreational spaces without constant police presence and harassment** The history of policing in Austin shows that police originated to exercise control and violence over communities of color.\(^{13}\) Racial profiling reports, the number of people of color killed and brutalized by APD, and the lived experiences of people we've interviewed show that this has not changed. (One respondent reported that three officers drew their guns on their teenage son while he was walking in Coronado Hills. He was told he “fit the description” of someone the police were looking for but was ultimately let go. Another respondent was arrested while parked at the gym in an interaction where the officer asked to search the vehicle, was verbally threatening, and used physical force.) We must end policing of recreational and free speech spaces and significantly decrease neighborhood patrol. We know what safe neighborhoods without constant police presence look like because that's the reality of most white, affluent neighborhoods. The city must stop funding excessive policing and reallocate funds to resources such as direct cash assistance, low-income housing, and anti-displacement funds for overpoliced communities.

**Recommendations:**

1. Defund the following budget items
   - $3,174,647 Overtime
   - $5,634,493 Park Police
   - $2,042,835 Mounted Patrol
   - $53,519 Specialized Patrol
   - $17M ~10% of “Neighborhood policing” patrol
   - $7,408,707 Motors

   Total: ~35.3M

2. End investigative / discretionary stops and “officer initiated” calls:
   - People pulled over in discretionary stops are disproportionately Black and brown. In Fayetteville, North Carolina de-prioritization of all violations other than speeding, DWI, running stop signs or lights, or other “unsafe movement” led to a 50% decline in the number of Black drivers searched - one of our largest disparities in Austin\(^ {14}\). Use of force, injuries to civilians and officers, and complaints against officers also decreased. Reallocate money previously spent on these stops to resources that create real safety for overpoliced communities.
   - This would reduce interactions like one person described in our survey. “Was pulled over because I reached into back seat to stop plastic bag from flying out window. Cop thought I was hiding something. Ultimately cited for expired sticker.” They reported that this caused financial struggles, a negative mental health impact, and created or worsened distrust of law enforcement - all because an officer saw a conscientious move to stop trash from flying out the window as suspicious.

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\(^{13}\) [https://austintexas.gov/publicsafety/task-force](https://austintexas.gov/publicsafety/task-force)

3. Decouple the following items from APD:
   • Traffic enforcement units that do not involve directing traffic, conducting traffic stops, or filing criminal charges:
     • $99,536 Traffic Administration
     • $590,760 AV/Wrecker
     • $2,766,584 Highway enforcement / Commercial vehicle unit
     • ~$300,000 Vehicle Abatement
   • $4,471,999 Special events: Take APD entirely out of event review and security. Convene a team of community members to co-create a reenvisioned process for event safety that includes unarmed security. Re-assess needs and reduce spending so that some of this money can be reallocated.
   • $1,445,684 Lake Patrol Search and rescue functions would be performed more quickly and effectively by EMS. Currently, people needing medical care experience dangerously long wait times because the first responders are police instead of paramedics. Any portion of this budget not needed for search and rescue functions should be reallocated.
   • $309,928 Homelessness (HOST): This should be reallocated to a public health and social service response that does not involve APD or any armed security. Total: ~$10M

Safety is...freedom of speech and movement without surveillance
In Austin, community members who are organizing events or simply going about their daily lives are subject to ever-growing surveillance. Through video surveillance and real-time monitoring, we are all being watched. Through the Austin Regional Intelligence Center (ARIC), a cadre of untrained informants are encouraged to report “suspicious behavior”. Recently, Black activists organizing cultural events were surveilled by a social media mining contract, also through ARIC. This data, as well as police interactions are uploaded into databases shared with hundreds of other law enforcement agencies, including DHS and ICE. This surveillance leans into Trumpian narratives of Black organizers as “Black Identity Extremists” and lays the groundwork for COINTEL-PRO style attacks on community organizers at the local and federal level. It also endangers immigrant communities by sharing their location data with ICE, placing anyone who leaves their home at risk of deportation and family separation. The city must immediately defund and decommission this surveillance infrastructure and ensure that data is deleted from shared law enforcement databases.

Recommendations:

1. Defund the following budget items
   • $2,022,228 Austin Regional Intelligence Center (ARIC)
   • $2,402,429 *Real Time Crime Center / HALO
   • $55,500.00 StarChase Pursuit Management Technology Solution
   Total: ~$4.5M

2. Provide transparency about the use (technical capabilities, function and location) of all APD drones, including the 13 donated by Austin Crime Commission. Immediately cease the use of these drones for video surveillance and delete any footage from law enforcement databases.

3. Ban the use of facial recognition software, such as Clearview AI\(^{16}\), by any APD officer or city employee.

15 Rough estimate based on $2.1M Traffic Investigation (Major) line item that includes both Vehicle Abatement and Vehicular Homicide Investigation.
16 This report found that APD had conducted 11-50 searches using Clearview AI. This could potentially be due
Safety is...ending the war on drugs and treating drug use as a public health issue

Communities of color have been deeply harmed by the war on drugs. Many drug possession and distribution statutes were crafted to have intentionally harsher sentences for substances more often used by Black, brown, and poor communities. Many disparities remain. The 2020 Austin racial profiling report showed stark racial disparities in probable cause searches leading to arrest and prosecution for drug charges. K9 units can exacerbate the impact of existing bias, as it has been shown that handlers often consciously or unconsciously cue their dogs when they expect to find something, which then allows a search. They can also lead to greater use of force and escalate encounters unnecessarily due to the historic trauma associated with police dogs, particularly for Black Americans. Furthermore, criminalization and incarceration fail to address addiction or its underlying causes. Imagine the behavioral and mental health treatment services that we could fund with $10.4 million, and the impact on safety in families and communities if the city funded recovery instead of punishment.

Recommendations:
1. Defund the following budget items:
   - $1,713,812 K-9 Unit
   - $1,286,953 K-9 Interdiction
   - ~7.5M Narcotics (conspiracy, support, street)
   Total: $10.4M

2. Reallocate this money to fund:
   - Behavioral and mental health treatment services, particularly Harm Reduction drop-in centers and concurrent Medication Assisted Treatment programs as recommended by the Public Health Reinvestment working group
   - Low-income and supportive housing, including a harm reduction housing first program as recommended by the Public Health Reinvestment working group and housing trusts for trans people of color, housing subsidy programs, and crisis safety net programs as recommended by the VSSP working group.

Safety is...an end to manipulative and self-promoting police interactions with community

When police are paid to hand out food and toys, and have dialogues in under-resourced communities while continuing to harass, injure, and kill members of those same communities, that is manipulation not relationship building. When officers attend neighborhood or business association meetings, it’s a paid opportunity to lobby for more officers in response to concerns about property damage or loitering, while doing nothing to provide resources that would address the root causes of those issues. When uniformed officers run programs for under-resourced kids or hand out baseball cards in schools, we are teaching a whole new generation that safety means police, even as youth of color are killed by police outside the limited context of those programs. It is APD’s responsibility to stop the harm, not the community’s responsibility to trust or forgive police while harm continues to occur. Instead of paying officers to do damage control for APD’s use of a free trial, without the knowledge of department leadership or the public. https://www.buzzfeednews.com/article/ryanmac/clearview-ai-local-police-facial-recognition?utm_source=dynamiс&utm_campaign=bftwfwd&ref=bftwfwd&d_id=2086347
18 https://www.themarshallproject.org/2020/10/15/mauled-when-police-dogs-are-weapons
Recommendations:
1. Defund the following budget items:
   • $2,513,050 Community Partnerships
   • $728,285 District Representatives
   Total: $3.2M

2. Reallocate this money to fund:
   • Community-based violence prevention education programs as recommended by the Violence Survivor Services and Prevention (VSSP) working group
   • Community Rooted Safety grant program as recommended by VSSP working group
   • Cure Violence or Hospital Based Violence Intervention program as recommended by VSSP working group

Safety is...equity and accountability
Currently there are no mandatory screening processes to assess the equity impact of APD contracts, grants, and donations, and little transparency or opportunity for community input prior to approval of this funding. Contracts to surveil and attack community members and activists, such as the recent purchase of less lethal weapons immediately after they were violently used against protestors, have been non-transparently approved even after enormous public outcry about the harm they have caused. Despite its massive budget, APD has still dipped into the general fund to cover unallocated expenditures for items such as overtime and drones. APD has quietly accepted donations from groups such as the Austin Crime Commission, furthering deeply embedded historic alliances between police and white elites.

Recommendations:
1. Take contracting out of APD control.
2. Create a mandatory equity screening process for all APD contracts and grants.
   • Require all potential APD contracts over $5,000 be reviewed by the Equity Office (through the process recommended by the Uprooting Punitive and Harmful Culture working group) BEFORE APD is able to enter into a competitive bidding process to solicit the product/service or submit a grant proposal, such as the one approved recently for less lethal weapons. The contract or grant should not be solicited if it received a failing score from the Equity Office.
   • Any new contract or one up for renewal over $50,000 must pass the Equity Office screening prior to soliciting the product/service AND receive community input in a public meeting posted with 10 days notice before it can be approved.
3. Any proposed spending, including grant funding or donations, for previously unallocated items (such as the recently purchased highway drones), or overspent budget items, (such as recent overtime expenditures), should require Equity Office approval, and then come before Council for a vote before pulling money from outside the department.

19 https://www.kut.org/austin/2020-11-02/austin-police-pledged-to-stop-using-less-lethal-rounds-on-crowds-then-it-ordered-thousands-more
BUDGET TOTALS

Reallocate this year: ~$66M. Some of these items are already in Reimagine and Decouple funds, but have not yet been reallocated. No funding that has been shifted from APD into the Reimagine or Decouple fund should be given back to APD. True reimagining involves shifting resources to true solutions for holistic public safety, not moving money around from one APD function to another.

Decouple this year: ~$10M. These are functions that are needed for public safety but can be done more effectively and with less harm outside of APD. Some of this funding should be able to be reallocated to other areas once staffing expenses and necessary functions are reevaluated in the decoupling process.
Police Staffing: Patrol and Criminal Investigations Working Group

Evaluating current police staffing and patrol models to develop recommendations for effective alternative approaches to crime deterrence while reducing the negative impact of patrol and criminal investigation procedures on vulnerable communities.

Contact:

Kathy Mitchell: mitckagardener@yahoo.com

Members:

Cary Roberts
Kathy Mitchell
Sue Gabriel
Jessica Johnson
Nick Hudson
Chas Moore
Amanda Lewis

Background & Context

1. Lake patrol should be handled by EMS.

Why: Austin Police Department Lake Patrol enforces state laws and city ordinances on 28 miles of Austin waterways, along with Travis County Sheriff’s Office Lake Patrol, LCRA Rangers, and Texas Parks and Wildlife. APD operates 7 boats with 10 FTE’s at a cost of $1.4M. Duties include “talking with people about safety, picking up fatigued swimmers, helping stranded boaters, watching for reckless drivers, supporting the APD dive team in search and rescue, and underwater evidence recovery, [and] pulling dangerous debris like submerged tree limbs out of the water.” The most common complaint handled by APD Lake Patrol is noise. Since so much of APD’s work is related to saving lives rather than addressing criminality, and several other police agencies have concurrent jurisdiction, we recommend that APD presence at the lake be eliminated in favor of an allocation of $1.4M to EMS, adding 5 additional EMS FTE’s (1 Captain and 4 Clinical Specialists) along with the purchase and outfitting of two ambulance boats capable of providing Advanced Life Support care on the water.

Workgroup Members In Support: Jessica Johnson, Amanda Lewis, Kathy Mitchell, Chas Moore
2. The use of police dogs should be discontinued.

Why: A review of Austin dog bite cases from 2015 to 2019 has yielded the following information:

- Dog bite incidents primarily involve Hispanic and Black men.
- It is likely that some incidents have involved children.
- In only 2 of 55 cases did the bitten person have a gun.
- 35% of cases appear to involve no crime at all.
- Every person attacked by a dog will “evade” or “resist” and most did. Some garnered serious additional criminal charges related to resisting.

Force incidents involving K9 bites should be eliminated by eliminating the use of dogs to stop or find a fleeing suspect. According to the APD website, “Typically the K9 teams are used to locate suspects who have fled the scene of a crime.” At minimum, the practice of training dogs to bite people should be abolished and existing units created to use dogs against people should be disbanded. Any K9 trained to attack a human being should be retired to a good home.

Workgroup Members In Support: Jessica Johnson, Amanda Lewis, Kathy Mitchell, Chas Moore, Sue Gabriel

3. The use of police horses should be discontinued.

Why: Many other cities such as Baltimore, Washington D.C., Boston, Tulsa, Las Vegas, Kansas City, and Saint Paul have disbanded their mounted units. The mounted patrol performs ceremonial duties and crowd control downtown. Crowd control can be handled in a variety of ways without horses. The mounted unit should be eliminated and the horses moved to good homes because the ceremonial purpose is not sufficient to the continued expense. The horses are very expensive to maintain and after nearly a decade APD has not been able to build the needed stables with the money approved by voters. Officers in the mounted unit have already been migrated to patrol, and should be permanently reassigned.

Workgroup Members In Support: Jessica Johnson, Amanda Lewis, Kathy Mitchell, Chas Moore, Sue Gabriel

4. APD should discontinue the use of officer self-initiated calls.

Why: Criminal investigation as practiced by patrol officers in self-initiated calls appear from the available data to rarely result in a report, let alone an arrest for a crime. These same self-initiated stops represent 35% of “call” volume, take longer than other kinds of calls, and sometimes result in force incidents. Non-traffic self initiated calls should also be eliminated and that officer time allocated back to 911 call response as needed, or eligible officers can be moved to criminal investigation units with more structure for the pursuit of actionable information about crimes.

Workgroup Members In Support: Jessica Johnson, Amanda Lewis, Kathy Mitchell, Chas Moore, Sue Gabriel
5. There should be a community full-curriculum review of the cadet academy.

Why: Police are supposed to protect and serve the community, but according to numerous reports commissioned by the city, APD has been trained as if officers are in a war zone and any civilian could be an attacker. Changing the “us vs. them” mindset into a mindset of community service, with a guardian role as part of that service, but to effectively include other service roles that police are called to fulfill, will only occur with significant change to the curriculum. APD has consistently attempted to minimize the degree of change needed, and attempted to coral the change to a handful of courses. According to a Kroll memo from February of this year, not long before the vote to restart the Academy, “interviews of Academy supervisors and instructors suggests the paramilitary model continues to predominate.” (Kroll, Feb. 26, 2021, p. 5) Kroll further notes that APD leadership does not agree with key assessments from other reports related to paramilitary academies. As of February, instructors insisted that “cadets who have not experienced being physically assaulted or punched before arriving at the Academy should experience this,” and “were unable to provide a persuasive rationale as to why such an exercise could not reasonably occur towards the end of Academy after cadets have received all essential defensive tactics training.” (p. 6) To ensure that a new model is woven through the entire curriculum, the entire cadet curriculum and all teaching materials should be released to the public to foster transparency and create trust with the community.

Workgroup Members In Support: Jessica Johnson, Amanda Lewis, Kathy Mitchell, Chas Moore

6. In the spirit of truly reimagining public safety, any pre-arrest diversion strategies should not be in lieu of decriminalization of homelessness, mental health issues, sex work, substance use and poverty, which are often the focus of pre-arrest diversion programs and which can and should be addressed through community-based, non-police initiated interactions by peer-run harm reduction and other outreach programs.

In addition, any pre-arrest diversion strategies should not create programs that rely on officer discretion. These police encounters can still escalate and cause serious harm to individuals and communities as well as result in racial disparities for who is arrested.

Why: By investing in the recommendations brought forward by the Equity Reinvestments in Community and Public Health Reinvestments working groups, the need for a pre-arrest diversion type program would be almost non-existent.
Public Health Reinvestment Working Group

Exploring ways redefine public safety (and in some ways public health) to include access to affordable, equitable, accessible, high quality healthcare and housing. Focus will center on recommendations for public health reinvestments in the community while divesting from harmful punitive models.

Contact:

Cate Graziani (cgraziani@harmreductiontx.org)

Members:

Gilberto Pérez
Surabhi Kukke
Joanna Saucedo
Cate Graziani - RPSTF member
Bryan Garcia
Chris Harris - RPSTF member
Elias Lang Cortez
Rachel Lee
Snehal Patel
Quincy Dunlap - RPSTF member
Shannon Jones - RPSTF member
Aaron Ferguson
Mary McDowell
With input from:
Hailey Easley
Ricardo Garay

Background & Context

Public Health is the art and science of preserving and promoting human wellbeing through collective social efforts. Public health safeguards the right of individuals and communities to define health, and allows initiatives that balance the needs of the individual with those of the collective to prevail. Public health is the practice of protecting and cultivating human wellbeing, and sustaining the right of individuals to pursue health and happiness. Central to these efforts is the
recognition that racism, socioeconomic inequality, gender & age discrimination, racist laws and policing, hatred, and ultimately ignorance are foundational causes of health inequity.

A public health approach holds systems of power and privilege accountable to address these systemic injustices and prioritizes actions that uproot inequality. Public health takes a humanistic approach to public affairs, relying foremost upon science and reason to guide its interventions. Self-correcting mechanisms ensure intellectual humility and a willingness to revise beliefs in accordance with the evidence. In the pursuit of healthy populations and thriving communities, public health initiatives assess social determinants of health, identify disparities and harmful structures, and implement prevention and intervention strategies to ensure equitable access to high quality, accessible and culturally informed healthcare.

**Background & Context - Community Health Workers (CHWs)**

The Public Health Reinvestments Work Group believes that in order to reimagine public safety, improve health outcomes and transform our community, we must invest in a public health workforce that is well remunerated, highly regarded and serve an essential function in ensuring the wellbeing of our communities. We recommend the City invest in a substantial cadre of Community Health Workers and the establishment of a CHW Network and Training Hub.

**Community health workers** are frontline public health workers who are from and have a close relationship with the communities they serve. Because of this close relationship to the communities they work within, CHWs serve as trusted liaisons between health and social services and community members to facilitate access to services and improve quality of service delivery. CHWs perform a continuum of work including individual health promotion, peer support, and service delivery, as well as community health promotion such as elevating community health needs to decision makers and advancing community empowerment and social justice, all based in the assets and needs of their communities. They help community members establish medical homes to avoid using emergency rooms and urgent care for primary care, improving continuity of care. CHWs have also been shown to reduce costs, improve health outcomes, improve quality of care and reduce health disparities.

**Workforce development**: Creating an opportunity for working class people of color in Austin to have meaningful dignified jobs with competitive salaries will be an essential part of achieving equity and building resilience in the city. This can create a new pipeline to replace the one that exists funneling people of color into law enforcement. Building a cadre of community health workers supporting communities most impacted by heavy policing will create more safety and better outcomes over time. Stable jobs with social value and a realistic salary ladder is necessary to repair the detrimental impacts of over-policing and a solution to the perceived loss of gainful employment for people of color by diverting from policing. APD resources can and must be reinvested in an APH workforce that reflects the communities that need it most.

**Network and Hub**: CHWs are most successful when they are part of a network of CHWs and work out of community-based organizations. Establishing a Hub for regular and free, or low cost, training and certification will provide a resource for CHWs to build and strengthen skills and receive the support and reflective supervision necessary to address the potential for burnout and vicarious stress. Furthermore this hub could serve to educate and train employers on guidelines, evaluation, and support for CHWs in Central Texas. CHWs will receive training on topics such as chronic health, COVID-19, violence prevention, perinatal health, substance use and misuse, harm reduction, mental health, crisis de-escalation, trauma-informed care and local resource navigation. All training and supervision will be built on an anti-racist, anti-stigma framework, and population education methodologies to recognize lived experiences and community ingenuity to help build consciousness and empowerment within the community to promote health and safety.
Resources must be multilingual with investments to ensure that translation and interpretation are available as needed. Ultimately, this hub should be led and run by CHWs, Community Health Worker Instructors and community allies.

**Background & Context - Community Health Centers**

The [2017 Austin Travis County Health Assessment](https://www.austintx.gov/Place/Department/AH/Health-Access-Improvement-Plan) (CHA) found that:

- income in Travis County is unequally distributed between households and by race/ethnicity.
- having a low income is associated with increased risk factors and worse health outcomes.
- Approximately ¼ of the population aged 18 to 64 in Travis County does not have health insurance, and cost is a barrier to health care for many. Barriers include financial access and physical access to health care as well as knowledge of existing services.
- one out of six people report forgoing seeing a doctor due to cost.

For these reasons, the Community Health Improvement Plan’s top priority in 2018 was “Access to and Affordability of Health Care.”

The City of Austin has a long history of underfunding low income communities of color, leaving them without the same access to health resources and infrastructure as whiter, wealthier neighborhoods. Using a health equity lens, this recommendation calls on the City to rectify decades of under-investment in the health of these communities by opening low-cost and sliding scale integrated care clinics in those neighborhoods and ensuring accessibility by providing transportation and telehealth options. The City should recognize that access to high quality and affordable healthcare is the cornerstone of a healthy and safe community.

These clinics can be co-located with existing Community Recreation Centers to expand the services offered. Alternately, portions of recently closed schools in East Austin can be repurposed for this kind of community space.

These Community Health Centers will be staffed by the Community Health Workers for the neighborhood with clinical services being offered multiple times per week by medical residents, nursing students and licensed counselors, ideally in collaboration with the Dell Medical School and UT School of Nursing. Counselors should reflect the demographics of the community if not from the community they are serving. Clinical services should include, but not limited to preventive health screenings, triage, rapid testing and referral and must have telehealth options. Other health promotion activities like classes for cooking, exercise, mindfulness/meditation and support groups should be part of what is offered.

Community health workers can provide linkage to care, coordinate with community organizations to offer support based on the needs of the community, including domestic violence and sexual assault prevention and response, sex worker outreach and harm reduction support. Each center should be equipped with one van that is accessibility equipped to help people get to clinic days and other programming. Highest priority of these Community Health Centers must be in the most over policed and heavily gentrified neighborhoods in the Eastern Crescent of Austin.

There is no mistaking that what makes individuals feel healthy and safe is not the presence of police, it is the presence of infrastructure that cares for them and meets their needs when and where they arise. A robust Community Health and Recreation Center model has the potential to create the environments that result in strong health and safety outcomes for our most vulnerable communities.
Background & Context - Low-Cost Medical Supply Closets

The City should invest in stocking community medical supply closets that offer low-cost medical supplies for residents unable to afford full price supplies. When sterile bandages and wound care are needed to avoid and prevent more intensive medical care, cost should not be an obstacle to getting the resources needed to protect the health and well-being of our communities. These closets should shelter wound care supplies, feminine hygiene products, pregnancy supplies, diapers, baby food and formula, first aid care, cold and flu medicines, mobility aids, products associated with care for the elderly, vitamins, pregnancy tests, sterile syringes, harm reduction supplies, Plan B medicine, family planning supplies, anti-bacterial cleaning supplies, and pain relief and management medications.

These closets should be available in all the Community Health Centers staffed by a community member paid a living wage. All products should be sold on a sliding scale, where someone hoping to buy supplies can buy them for what they wish to pay from $0 to $15 an item. These closets should be accessible to anyone without presentation of identification necessary.

The City subsidizing these supplies will result in reduced expenditures in other areas where people may seek medical care. They will also promote community health and well-being and support families in taking care of medical problems that may arise without having to go in debt especially since over 60% of Americans can't afford a $500 emergency.

Background & Context - Food pantry

Food and nutrition is an undeniable aspect of good health. Food deserts are a well-documented crisis throughout the country and East Austin is no exception. Making inexpensive nutritious food accessible to everyone should be a major priority of our public health system. To this end, this workgroup proposes the availability of Free Food pantries and fridges at every Community Health Center. The city should build partnerships with local growers and wholesalers to make culturally relevant dry goods and produce available to community members. Ideally the Center should have access to land where community members can till the soil and grow what is needed for the community. The community members that take leadership in growing the food should receive stipends for their service and contribution.

An additional measure the City should take is to provide the facilities for a licensed commercial kitchen within the Community Health Centers. These kitchens should be equipped with all necessary kitchen gear to prepare meals for neighborhoods or catering events. The facilities should be available to small business owners for a small fee. The City should also develop emergency contracts with local restaurants in the event of emergencies where workers can be paid to set up in kitchens and be equipped with ingredients and everything needed to provide hot meals.

For all of these initiatives, there should be no requests for identification or for documentation or the requirement of documentation for a proxy of someone to receive supplies. This is intended to be a community sustained project centered in mutual aid and collective community care. People should not face limitations in accessing the services they need to survive to serve a bureaucratic end.

Background & Context - Mental Health Services

An additional component of public health is the mental wellbeing of our community members and residents. There are very little programs and services that either offer clinicians that can effectively and competently provide services to predominantly marginalized populations such as people with disabilities, queer and trans individuals, Black and brown people, and our immigrant
and undocumented community members, or non-English speakers or that provide low-cost sliding scales services and almost none that offer both. We call on the City to support and reinvest in the collected mental wellbeing of our communities and to invest in the provision of mental telehealth opportunities for particularly vulnerable populations.

Too often, queer people of color succumb to preventable or treatable illness and disease. The stresses associated with oppression, combined with lack of access to or inadequate health care, exacerbate or create avoidable health problems. Wellness dialogues, workshops and resources that draw from the rich expertise of the community and include a holistic approach to health and wellness and seek to provide safe spaces for community members to educate and empower themselves around health and wellness issues. This program should produce and host more community events centered on mental health and education that is friendly and trained to work with people of color and queer and trans folks.

**Background & Context - Renewable Energy Investment**

Just as access to food and water are major factors in assessing public health in our communities, we additionally find access to power just as crucial. People in our communities must be able to have heat and cooling capabilities especially with the drastic conditions in Texas as we witnessed in the recent winter storm as well as with the heat we are bound to witness this upcoming summer. We use power to prepare food, many even depend on it to power life-dependent medical equipment. We believe the City should invest in self-sufficient power sources that communities can benefit from. We call for the city to build additional Community Solar facilities particularly in communities that struggle the most to make on time payments on their utility bills. The city should collaborate with Austin Energy to get eligible residents in the area connected to the solar grids and receiving power to subsidize reliance and payments on current energy sources. This service should be provided with no cost to residents and covered by City subsidies or federal and state grants associated with renewable energy sources incentives.

**Background & Context - Funding for Medication Assisted Treatment**

The Public Health Reinvestments Work Group believes that in order to reimagine public safety, improve health outcomes and transform our community, we recommend the City to invest in Medication-Assisted Treatment, particularly methadone, programs.

MAT is a proven pharmacological treatment for people who are using or misusing opiate derivative drugs, governed by Opioid Treatment Programs (OTP). The backbone of this treatment is FDA approved medications, methadone and buprenorphine. They activate opioid receptors in the brain, preventing painful opioid withdrawal symptoms and decreasing illicit drug use. MAT has multiple demonstrated health benefits including the reduction in drug use, overdoses, and infectious disease acquisition. However, in Travis County individuals who are uninsured and who cannot self-pay, face a long waiting list for methadone treatment; Individuals on a waiting list are ten times more likely to die of an overdose.

Moreover, MAT is extremely cost effective compared to the hundreds of thousands spent annually if people are left untreated, and draw heavily on EMS, ERs, jails and other public services. The annual cost for methadone maintenance treatment averages about $4,500 per person. There is a six-fold return investment for every dollar invested in treating a person with opioid use disorder who is involved with the criminal justice system

Therefore, we call on aggressive policy that recognizes MAT as a prevention modality to provide person-centered MAT that is free, on-demand, and equitable to people using/misusing drugs in Travis County, and to reduce the long waiting period for funded treatment that we are currently experiencing.
Background & Context - Expand Community-based Harm Reduction Services for Substance Use and Misuse

In order to better address the needs of people who are navigating substance use and misuse, mental health issues and homelessness, the Public Health Reinvestments Work Group recommends that the City of Austin expand and fund existing harm reduction services such as syringe access, drop in centers, accessible detox, and adopt additional interventions such as overdose prevention sites and mental health crisis respite centers to broaden the harm reduction infrastructure in Austin and offer alternative peer-run, non-punitive settings and supports.

Harm reduction drop-in centers are community-based programs that provide supplies; sterile syringes, safer drug use and naloxone. These programs serve an essential role in HIV and Hepatitis prevention, yet the environment of safety they create for people who use drugs set them up to offer far more including; on-site Medication for Opioid Use Disorder (MOUD), wound care; drop-in centers; street based outreach; food access; mental health crisis respite; disposal of sterile syringes and injection equipment; vaccination, testing, and linkage to care and treatment for infectious diseases including COVID-19. The drop-in centers would ideally be co-located with an Opioid Treatment Program (OTP), and include a peer-run mental health crisis respite center and on-demand access to medication assisted treatment.

Background & Context - Fund a community syringe disposal program.

Proper disposal of medical waste, such as sharps (e.g., needles and syringes), is equally important in community settings as in healthcare facilities, especially for those that traditional healthcare is inaccessible. Community members use needles and syringes to treat medical conditions, like diabetes, or for safe injection drug use;1 in 12 american households utilize sharps for medical purposes. Improper disposal can result in exposure to blood-borne diseases, such as HBV, HCV, or HIV, through accidental needlestick injuries. Community members, the general public, and public service workers (e.g., waste haulers, recycling plant workers, sewage treatment workers) are at higher risk of experiencing an accidental needlestick injury when used needles are improperly disposed of. Therefore the City should invest in a robust community sharp disposal program by establishing non-traditional disposal sites such as, parks, homeless encampments and shelters, public restrooms, street corners, pre-established sites, etc. Additionally, disposal sites would be established at all Community Health Centers, where people would be able to access additional medical, behavioral, or social services.

Background & Context -Creating Trauma-Informed Systems to support community and staff

The health impacts of trauma are widely recognized and range from long term chronic illness to physical injury to behavioral and mental health challenges. The Public Health Reinvestments Work Group recommends that the City of Austin invest in developing a Trauma Informed assessment process for all programs and ongoing training on Trauma Informed Care for all staff of Austin Public Health.

Trauma is defined by the Substance Abuse and Mental Health Services Administration (SAMHSA) as “an event, series of events or set of circumstances that are experienced by an individual or community as physically and/or emotionally harmful or threatening and has lasting adverse effects on the individual's or community's functioning and mental, physical, social, emotional and/or spiritual well being.” This trauma can be cultural, historical and intergenerational as well.

When survivors of trauma seek health care services, interactions with staff, doctors, as well
as the overarching medical and legal system can be distressing or further traumatizing. Sites of trauma in medical establishments include invasive procedures, the use of stigmatizing language, overt and covert racism, anti-blackness, sexism, homophobia, and transphobia, among many other harmful if not fatal forces. Understanding the connections between trauma, health outcomes and patient behavior is essential for public health systems to address health inequities and mitigate the harm of oppressive systems like excessive policing.

Health systems can contribute to trauma for their clients and their staff if not addressed. Trauma-informed systems “support reflection in place of reaction, curiosity in lieu of numbing, self-care instead of self-sacrifice and collective impact rather than siloed structures.” The responsibility of preventing burnout, healing vicarious trauma, and having job satisfaction does not fall (only) on the individual staff person. In trauma-informed systems, organizations recognize that staff are also survivors of trauma, engage staff in ways to create safe and supportive work environments and prioritize staff wellness.

There is a robust framework for Trauma Informed Care developed by SAMHSA that can be leveraged to improve the policies and protocols of Austin Public Health. This framework of six principles: safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment voice and choice, and a cultural, historical and gender analysis, can serve as the foundation of an assessment tool for trauma informed practice at every level of Austin Public Health.

To develop this tool and establish an ongoing process of quality improvement for trauma informed care, this Work Group recommends the creation of an advisory group of subject matter experts and directly impacted community members to develop a process for implementing an assessment. This assessment should evaluate, among other things, the extent to which client populations namely people of color, LGBTQIA+, people with disabilities are reflected in staff, in particular among management decision makers and how this affects front line staff and clients. Once an assessment tool has been developed the advisory group will provide more detailed recommendations entailing specific and timely interventions in protocols and policy to re-orient the practices and services of Austin Public Health into alignment with the principles of Trauma-Informed Care.

A one-time training will not be sufficient to transform systems that were not designed with survivors in mind. Ongoing training on Trauma-informed Care and healing centered engagement will be an essential component of this systems change work. It will provide the public health workforce an opportunity to transform the models of service delivery, prioritize care for the providers and build meaningful community partnerships that will make public health efforts more equitable and effective.

**Background & Context - Build affordable housing and implement rent control ordinances**

As a working group, we identify the unavailability of affordable housing as a public health crisis. How can our community and our people even begin to consider other public health initiatives when we have such a large population currently experiencing homelessness? When people are without housing, their environments are unreliable and unstable. Food insecurity, little to no medical care, and few mental health support services, all compounded by an ongoing pandemic are but a sliver of the experiences of people living without permanent housing. We must prioritize getting people into housing first. Once a stable housing situation has been achieved, adjustment can take place, people can transition into a continuous sensation of stability and services can then be provided to support their needs moving forward to ensure housing can be long-lasting and future crises can be avoided.
Housing First is a homeless assistance approach rooted in harm reduction that prioritizes providing permanent housing to people experiencing homelessness. A Housing First approach does not require participants to address behavioral health or mandate participation in services either before obtaining housing or in order to retain housing. Housing First is based on the theory that participant choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to make a participant more successful in remaining housed and improving their life. Such a program views housing as the foundation for life improvement and enables access to permanent housing without prerequisites or conditions beyond those of a typical renter. Additionally, formal and informal supportive services are a part of the Housing First model, such as, community health workers, physicians, social workers, harm reduction programs, family, friends, and community.

We don’t need any more transitional housing and promises to get people off of waitlists. Transitional housing is no longer transitional when there are no structures ready to actually permanently house people who are experiencing homelessness. It is only temporary and does nothing to solve the problem other than give this City the cover and presentation that anything is actually being done to address homelessness. This City needs permanent housing that is low-cost and prioritized to be given to people that are currently homeless and have been put on waitlists to wait upwards of four years.

This workgroup additionally recognizes that the gentrification in Austin has been picking up at an alarming rate. Many people who have lived here for years, for their whole lives, are losing their homes and are being displaced as the housing market skyrockets and makes homes unaffordable. This is unacceptable. We must protect the wellbeing and stability of our communities and their homes and respect all the work and efforts they have put into the care and love for their communities. It can be unbelievably devastating to be displaced and feel like everything has been lost, generating extreme levels of stress or even trauma especially for the Black and brown communities being displaced in efforts to bring White investment and business opportunities.

We call for the City to adopt a rent control initiative in which the Equity Office would appoint a Rent Guidelines Board that includes several directly impacted community members that would develop housing market informed ceiling rent rates based on size and style of housing.

When a tenant leaves, the landlord will only be able to raise rent to this limit set and can additionally only be raised by a set percentage between 0% and 4.5% a year which would be determined through a vote on the Rent Guidelines Board.

However, if a resident has been living in their dwelling and renting consistently since 1980, the rent should not exceed a “maximum base rent” determined by the Rent Guidelines Board proposed guidelines (which can be appealed by residents) that should only cover the landlord’s cost for upkeep of the unit. Rent from this maximum base rent will only increase incrementally also based on the recommendation of the Rent Guidelines Board.

**Background & Context - Promote Youth Development**

The best approach for healthy growth and development of young people is to shore up strengths rather than focus on fixing problems, a framework called “Positive Youth Development” (PYD). Effective PYD programs are located within a young person’s community and use a comprehensive approach that centers on significant areas in a youth’s life, such as education, art, and leadership. For instance, for youth who may be making choices that get them in trouble, the most effective intervention for both public safety and positive youth outcomes is to help them take responsibility for their actions, provide opportunities to restore any harm done, engage with pro-social peers, and stay connected to community support.
Background & Context - Make Cap Metro free for low-income residents and expand programs that provide transportation for health care access

Transportation was consistently cited as a major obstacle for people accessing healthcare. In the CTSA, residents and professionals discussed this migration, noting that historically underserved and low-income Black/African American and Latino/Hispanic residents’ displacement into more affordable areas outside of central Austin with less access to affordable health care, healthy food retailers, outdoor recreation space, and means of transportation is significant.

Background & Context - Expand coverage of the MAP program and include MAP users and potential users in the process for deciding what is covered.

Texans have long suffered under the rule of a state government that chooses politics over public health. Without Medicaid expansion, in 2017 ¼ of Travis County residents were uninsured. Although some Travis County Residents qualify for the Medical Access Program (MAP), only a limited number of medications and providers are covered, leaving many without the healthcare that they need. What is covered by MAP should be decided on with input from MAP users. Under the Biden Administration, there have been rumors circulating that counties will be allowed to expand Medicaid on a county-by-county basis.

Recommendations

Recommendations - Community Health Workers (CHWs)

1. Fund a Community health worker Pilot program to hire 50 CHW
   a. $4 million for Year 1 (50 CHW)
   b. $500,000 for evaluation of pilot program

2. Establish a CHW Network and Training and certification Hub
   a. $4 million
   b. Recruitment and retention
   c. Translation and interpretation

3. Commit to build a cohort of 1,000 CHW by 2025.
   a. Specifically serving the Eastern Crescent and communities currently suffering over-policing
   b. See the Biden-Harris National Strategy for COVID-19 as reference for these kinds of goals: “As part of the President’s commitment to provide 100,000 COVID-19 contact tracers, community health workers, and public health nurses, the Administration will establish a U.S. Public Health Jobs Corps, provide support for community health workers, and mobilize Americans to support communities most at-risk”
   c. $70 million

In partnership with Travis County, Central Health, and Dell Medicine open Community Health Centers offering low-cost and sliding scale integrated care clinics serving as home bases for a Community Health Worker workforce.
This is a powerful step towards investment in equitable community-led Community Health infrastructure.

1. Community Health Centers
   a. Health promotion activities
      i. Exercise
      ii. Mindfulness
      iii. Support groups
      iv. Meeting space for community events
   b. Clinical services
      i. Rapid testing
      ii. Triage
      iii. Preventative care
      iv. Mental health counseling
   c. Medical supply closet (free/low cost)
      i. Free clean syringes
      ii. Sharps disposal
      iii. Over the counter pharmaceuticals
   d. Food pantry
      i. Land to grow food - stipend for caretakers
      ii. Partnerships with local growers and wholesalers
   e. Commercially licensed kitchen
      i. For small businesses to use
      ii. Hot meals distribution
   f. Filtered water filling station
   g. Solar powered
   h. Transportation
      i. At least one van

1. Community Health Workers,
   a. Staff community centers
b. Health promotion

c. Home visits

**Recommendations - Community Health Centers**

Open five Community Health Center located in strategic locations concentrated in the Easter Crescent of Austin to combat and counteract the systemic violence, over policing, and targeted gentrification of the communities living here.

a. Cost will depend on City’ decision to build new centers, co-located with existing recreational facilities, or repurpose recently closed school facilities.

1. Develop a contract with Dell Medical School, Travis County, and/or Central Health to fund and support rotating teams of primary care physicians and nurses (students as well) to open appointment slots for care for a duration of at least two weeks per month at each center.

2. Set up non-city staff facility managers, preferably community organizers and members to facilitate and coordinate organizations to use the space for targeted outreach with vulnerable populations.

3. Arrange for the offering of health promotion activities such as exercise, mindfulness, and support groups.

4. Build a water filtering station where local residents can get filtered water for free to fill containers with and take home.

5. Provide at least one large passenger van per facility to allow for transportation to and from services for residents in the area

**Recommendation - Low-Cost Medical Supply Closets**

House one community medical supply closet per Community Health Center and fully stock them with supplies

a.) $250,000 per closet

1.) Hire 3 people per closet that are from the communities where these are placed that are unemployed and pay them a living wage.

2.) Plan to expand and continue to build and stock these closets annually

a.) Recurring pot of $500,000

**Recommendation - Food pantry**

Expected cost of $3 million for five commercial kitchen facilities co-located in Community Health Centers.

**Recommendation - Mental Health Services**

1. Hire 50 clinicians that are members of these populations within an arm or department of Austin Public Health.

a. $2.5 million for salaries and benefits
2. Open city-funded slots for both long and short term care for visits with each clinician. Visits should be sliding scale from $0 to $30 and should not impact compensation for clinicians.
   a. Since clinicians are already being paid, there should not be an associated cost for opening slots.

3. Clinician offices should be placed within Community Health Centers, where clinicians will be able to accommodate both office visits and telehealth calls.

Recommendations - Renewable Energy Investment

1. Build at least three new Community Solar facilities
   a. $250,000 for all three (installation typical runs about $50,000 per facility)

2. Create teams to do community outreach and case management to connect residents to service
   a. $100,000 for compensation and materials

Expected costs for all of the above Community Health Center recommendations:

$15 million per center

Additional Recommendations:

1. Open two additional OTP (co-located with a harm reduction drop-in center) in Travis county in order to address the need for MAT + staff
   a. $4 million for startup costs and first year of operations

2. Fund person-centered methadone treatment
   a. $3 million/year

Recommendation:

1. Open two additional drop-in centers, one center on the south side and one on the northside (co-located with an OTP)
   a. $3 million for startup costs and first year of operations
   b. $3 million/year

Recommendation:

1. Establish 40 disposal sites across Travis County for safe disposal of sharps.
   a. $500,000/year (includes all administrative and disposal costs)

2. Ensure that five of these sites are co-located with Community Health Centers proposed above.
Recommendations:

1. Develop Trauma-Informed Practice assessment process and tool
   a. Funding to convene an advisory group of subject matter experts and community members to create the assessment tool and the implementation process
   b. Build Trauma Informed Practice into the quality improvement plans of all APH programs.
   c. $500,000

2. Establish a fund for ongoing training on Trauma Informed Care and Healing Centered Engagement
   a. Begin with clinicians, community health workers and other outreach workers -
   b. Make training available to new staff as well as ongoing training for all staff that consistently evolve to evaluate current practices, cultural context, and changing community needs.
   c. Ensure training available in multiple languages as needed by staff.
   d. $2 million

Recommendations:

1. Build new buildings to house people
   a. $20 million for 30 100-unit buildings

2. Work with organizations that work directly with people experiencing homelessness to coordinate entry into housing (Not ECHO, not Downtown Alliance)
   a. Additional labor compensation/organizational management costs
      i. $5,000 per organization

3. Provide wrap around services inside the new housing complexes with case managers and trauma-informed teams that can support transition into being housed, job searching, and housing searches. Each resident will receive a three year period from enrollment where no rent is covered.
   a. 9 staff, including 7 caseworkers and 2 administrative and property management per building
      i. $10 million for salaries and benefits annually

4. Residents will then have an additional five years where they can continue to live in city-provided housing for low-cost ($200-300 rent maximum) and will only be asked to exit lease if a job has been secured and worked for 6 months at that point AND housing has been identified that their case manager has deemed will be sustainable with current income. Otherwise they will be granted an extension until these conditions have been met.
5. Residents will also be granted $1,000 upon exit to support the secondary transition stage and support costs associated with moving.
   a. Fund of $3 million/year

Recommendations:

1.) Expand MetroAccess to meet the needs of the community and lower barriers to access. The City should buy CapMetro 10-15 additional buses for this purpose, hire drivers, and aim to eliminate the MetroAccess waitlist.

2.) Any and all MAP/Medicare/Medicaid/TANF benefit recipients should be automatically granted free monthly bus passes every month initially provided upon benefits enrollment. All current recipients should get a pass mailed every month.

Recommendation:

3.) We urge the City to work with Travis County to develop a local Medicaid expansion program.
Reimagining 911 and Non-Police Crisis Response Working Group

Developing a deeper understanding of the needs of people who call 911 to develop recommendations to best address those needs including transitioning 9-1-1 communications from APD to independent or alternate City department management and reimagining a new response system which diverts 9-1-1 calls that come that do not warrant a police response to a non-police crisis line and response team similar to other models other cities.

Contact:
Kathy Mitchell: mitkagardener@yahoo.com
Cate Graziani: cgraziani@harmreductiontx.org

Members:
Priscilla Hale - RPS Task Force Member
Jessica Johnson - RPS Task Force Member
Chas Moore - RPS Task Force Member
Sue Gabriel - RPS Task Force Member
Chris Harris - RPS Task Force Member
Cary Roberts - RPS Task Force Member
Rodney Saenz - RPS Task Force Member
Cate Graziani - RPS Task Force Member
Hailey Easley - RPS Task Force Member
Kristen Lenau - RPS Task Force Member
Kathy Mitchell - RPS Task Force Member
Dawn Handley - RPS Task Force Member
Matt Simpson - RPS Task Force Member
Jen Margulies - Community Member
K. Stellar Dutcher - Community Member
Rachael Shannon - Community Member
Hilda Gutierrez - Community Member

Background & Context

Over the last two decades, sworn officers of the Austin Police Department have killed 28 people
of color and injured many others.

In many neighborhoods and communities across our city, a phone call for emergency help of any kind has become a dangerous risk. Black people, Indigenous people, Latinx people and other people of color in Austin face grim calculations when calling for help, along with immigrants, young people, sex workers, people with mental health crises and their families, people with developmental disabilities and their families, LGBTQ+ people, and survivors of sexual violence and intimate partner violence. Our city as a whole is less safe because many people in Austin cannot count on safe help when they need it.

For far too many Austinites, calling for help requires weighing whether making the call will ultimately do more harm than good. True public safety means investing in responses that don’t put residents at risk. The Reimagining Public Safety process is an opportunity to create systems of care during emergency and crisis situations that provide help without requiring community members to risk their lives or their freedom.

The Reimagining 911 and Non-Police Crisis Response workgroup, made up of representatives from affected communities and concerned community members, presents recommendations centering on the following:

1. **Diversion of majority of 911 calls away from police and towards appropriate first responders**
   - Increased capacity for mental health responders
   - Training for 911 dispatchers

2. **Non-police crisis line and community response team**

3. **Culturally and linguistically appropriate communication in emergency response options**
   - Culturally and linguistically appropriate outreach
   - Outreach on when and how to call for help

4. **Ongoing community accountability and evaluation**

These recommendations are rooted in the values of the RPS Task Force. *Grounded in the historical context of policing* in the U.S. and in Austin, the Reimagining 911 and Non-Police Crisis Response Work Group (hereinafter the 911 Workgroup) acknowledges that *holistic community safety is distinct from policing and should be defined by directly impacted communities*. As such, our recommendations include *divesting from systems that cause harm*, developing or supporting existing crisis response networks that are truly *accessible to all community members*, and that arise from and *center those most directly harmed by existing systems*. Our recommendations also support *sustainability and long-term thinking* in suggesting full and permanent funding for equitable crisis response networks and planning for long-term *accountability to community*.

The 911 Workgroup acknowledges that the task of the uncompensated members of the work group has truly been larger than the timeframe permitted. Winter storm Uri and the ensuing infrastructure crisis further limited community input, in particular because many of the work group members were, and still are, responding to the continuing needs of community members dealing with long-term effects of the storm. Community members most disparately affected
by police violence have been disparately affected by aftereffects of the storm as well, further complicating efforts to gain detailed and crucial community input. Accordingly, we would like to emphasize the need for ongoing input from various affected communities as the process moves forward. Stipends and translation support from the City will be necessary to garner the community input needed to shape implementation of these recommendations.

These recommendations also reflect the understanding of the work group that the decoupling of 911 from the Austin Police Department is currently underway. Although the work group is not apprised of the status of progress towards this goal, the work group strongly supports this decoupling.

**Recommendations**

A. **Divert Majority of 911 Calls away from Police and towards Appropriate First Responders**

1. **Establish a fully funded mental health first response and remove any structural barriers that prevent community access to mental health first response independent from police.**

   **Why:** [APD leads in police shootings during mental health calls](#)

   When people call 911 they should be (and are now) given the following options: EMS, Fire, Mental Health, Police. However, non-police mental health “first response” is currently only available in situations deemed appropriate for phone counseling. Currently, there are limitations on the types of calls that mental health first responders can respond to, specifically regarding calls that involve substance use, use of a weapon, harm to self or others, and calls that involve crime. We must enable mental health responders to actually respond to the types of calls that have previously ended in the death of the person experiencing a crisis, and ensure adequate funding to ensure that trained staff can respond 24/7.

   A determination of the appropriateness of police intervention should be made by the community member requesting assistance in conjunction with the mental health first responder, not by the dispatcher. Policies regarding when mental health professionals can respond to 911 calls need to be reviewed and revised through a transparent community process and dispatchers should be trained accordingly. In addition, call takers need to be adequately trained on mental health issues, both broadly speaking to enhance their general knowledge and in the context of a 911 call, so they can better recognize, interact and route the call.

   Mental health first response teams must be able to respond to mental health crises without police and use police backup as a last resort. Response teams would consist of a medic, & crisis worker and peer/community health worker. The team must be equipped to respond during crisis moments including COVID-19 and severe weather. The team should be provided with appropriate equipment such as vehicles to ensure ability to service all areas of the city.

2. **911 operators and first responders should receive appropriate training with an emphasis on prioritizing the response to and need for mental health services over responding to nonviolent criminal behavior.**

   **Why:** [APD leads in police shootings during mental health calls](#)

   In order to ensure that when someone asks for the mental health option, they get a men-
tal health clinician, training for 911 call operators must go beyond Mental Health First Aid. Although training can only go so far, in order to combat systemic racism and ensure to the best of our ability that call takers do not make fatal decisions based on racist ideas of danger, all call takers must undergo training on anti-racism, that includes examples of racism in a 911 call center, and regular anti-racism supervision. In addition, call takers need to be adequately trained on mental health issues, both broadly speaking to enhance their general knowledge and in the context of a 911 call, so they can better recognize, interact and route the call.

First responders need training to approach all situations with a mindset towards helping community members and addressing unmet needs rather than towards punishment. While police officers should not be responding to requests for mental health services, they should receive training directly from mental health professionals beyond the CIT training.

B. Fund Non-Police Crisis Line and Community Response Team

3. The City should fund a community-run non-police first response outside of the 911 system. This service should also include a community-led resource line and respond to situations that do not appear to require a mental health response (loud music, blocked driveways, etc). Police should not be the entity to respond to non-criminal, quality of life complaints, or to other situations that have been decriminalized in this community.

Why: According to an Austin Justice Coalition report released in July 2020 regarding 911 calls, only 21% of 911 calls pertain to crime. Creating this community resource signifies a pathway to respond and address a host of other community needs without overreliance on police. Calls for service that are unrelated to crime are best served by a civilian community response.

Learning from cities across the country, such as Sacramento, CA, the City should fund a program similar to the MH First program led by community groups most impacted by police violence. MH First is an independent crisis response service, staffed by a team of volunteers trained to de-escalate confrontations and provide direct aid and resources to those experiencing potentially life-threatening psychological issues and other instances of crisis. According to Cat Brooks, one of its founders, the Anti Police-Terror Project developed the program “because large swaths of the Black and brown community are reluctant to call 911, “no matter how great the emergency.” The purpose of the MH First program “is to interrupt and eliminate the need for law enforcement in mental health crisis first response by providing mobile peer support, de-escalation assistance, and non-punitive and life-affirming interventions; therefore decriminalizing emotional and psychological crises and decreasing the stigma around mental health, substance use, and domestic violence, while also addressing their root causes: white supremacy, capitalism, and colonialism.”

Currently this service exists in Austin through 10,000 Fearless First Responders and we recommend that the city should fully resource this group and others like it to allow them to be self-sufficient, autonomous and able to be sustained. 10,000 Fearless First Responders also provides assistance with non-crisis and non-crime situations that should not be handled by police. Funds for the creation of this will come from the Reimagine Public Safety Fund. This initiative would be in addition to non-police mental health first response through 911 (Recommendation #1). We anticipate the budget would be about $2 million annually.
C. Culturally and Linguistically Appropriate Communication in Emergency Response Options

4. Ensure language access for residents with Limited English Proficiency in all emergency response call centers.
   a. Establish a standardized language access procedure used by all emergency response for callers with Limited English Proficiency (LEP).
   b. Provide culturally and linguistically appropriate outreach and education to ensure the community understands the process and know how to use the services.
   c. Call takers must undergo community based cultural competency training and regular refresher training for working with communities with Limited English Proficiency.
   d. Text messaging should be added as an option for accessing emergency response.

Why: Asian immigrant communities in Travis county avoid using 911 for emergency response services because they do not speak English and are unfamiliar with the calling procedures. Reports of being hung up on after speaking in languages other than English and Spanish may have been because individuals with LEP didn't know that the operator was connecting to a translator. Austin Asian Community Health Initiative (AACHI) has requested a copy of the procedure from the department to provide community education to enable the Asian and Asian American communities with Limited English Proficiency to access emergency response services, but the request was denied.

5. The City should undertake a multilingual public education campaign to raise awareness regarding appropriate emergency service use.

Why: Overreliance on police to respond to crises has lead to the murder of many Austin community members such as Mike Ramos and David Joseph. Austinites should be educated on the various emergency services available to them as well as how they work. Austinites should also be aware of the process for language interpretation when they call 911.

D. Ongoing Community Accountability and Evaluation

7. The City of Austin should Conduct a regular and ongoing independent audit (annual, bi-annual, etc.) of emergency response calls and a linguistically and culturally accessible community survey requesting residents’ opinion regarding the effectiveness of emergency response calls.
   a. Language access is a key factor in providing equitable, accessible emergency and crisis response. For example, Asian American communities with LEP often report dissatisfaction with interpretation/translation services provided by community resources. Inaccurate or inadequate interpretation/translation may create life threatening misunderstandings. Regular feedback ensures quality language access.
   b. Audits should also include the number of calls diverted away from police, incidents of police violence in non-crime crisis calls, and the number of calls to
non-police crisis resources. The community-based evaluation should engage a broad range of Austin residents, with a focus on communities most affected by police violence and state intervention, in providing feedback on how first response programs are working for them. The evaluation should seek feedback on perceptions and experiences of emergency/crisis responses and should provide community participants with compensation for their time.

Why: Ongoing evaluation of emergency response services is necessary to ensure that the reimagined systems align with the intention of making crisis response safer, more accessible, and more equitable. Community members who have been most directly affected by police violence are the most knowledgeable sources about whether reimagined systems are improving lived conditions in the city. The city must develop sustainable processes that will ensure ongoing community accountability over the long term.

8. In order to engender community trust in the city’s “Reimagining Public Safety” process— the city should:

1) not return any of the “Reimagining” or “Decoupling” funds to APD.

2) follow the RPS taskforce recommendation and not fund an APD cadet class, and

3) invest the full amount of the “Reimagining” city funds towards holistic community safety recommendations of the taskforce working groups in this year’s budget.

Only with these displays of commitment by the city, do we recommend a second phase of Reimagining Public Safety that allows for transparent and thoughtful community input in creating a Reimagining Public Safety Plan that leads towards effective results for systemic change.

Why: “The timeline for an authentic, thoughtful reorganization process is much longer than 6-8 months. The structural inequities that are foundational to American society are often replicated in policing practices. A divestment of resources from ineffective policing practices to community safety policies and actions that result in more safety for the greatest number of people is our ultimate aim. Bearing that in mind, we must be steadfast in valuing accountability, transparency, efficiency, and humanity.

The process of reimagining public safety and re-envisioning how resources are used to provide for the public’s safety are long term projects. These processes should not be rushed to suit political aims or be held to election timelines. Rather, the timeline set for [Austin’s] process should be based on National best-practices and historical evidence of other [Austin]-based transition processes where personnel and budgets were re-programmed.” Quotes are sourced from Oakland’s Reimagining Public Safety Taskforce Recommendations.

9. Recommendation: The City must “invest in and expand community leadership development to guide public safety initiatives.” Source

Why: “The timeline for an authentic, thoughtful reorganization process is much longer than 6-8 months. The process of reimagining public safety and re-envisioning how resources are used to provide for the public’s safety are long term projects (Source: Oakland’s Reimagining Public Safety Taskforce Recommendations).” Our current system of “public safety” is rooted in systemic oppression established over hundreds of years. Truly reimagining public safety
change will require ongoing cultural/ideological shifting over time, so there should be ongoing input from and accountability to the community to ensure a true reimagination of public safety. In order to ensure that the communities most impacted by systems and ideologies of oppression are able to offer their expertise, the City must commit to investing in community leaders. This may include funding education and training, compensation for participation, childcare, transportation, interpretation/translation services, etc. The OPO currently has a Community Police Review Commission and Public Safety Commission, but their eligibility, application, time commitment requirements, and selection process are inequitable.

10. The City should budget a role for the Equity Office in assessing plans for and implementation of non-police crisis response.

**Why:** It’s essential that non-police crisis response fully serves Black people, Latino people, other people of color and other other communities in Austin (people with mental health issues, undocumented people, and sex workers, for example) who have suffered disparate impact from crisis response that relies on armed officers. The Equity Office, with a focus on advancing equity in all aspects of City operations and experience in conducting equity assessments, is well positioned to assess how equitably non-police crisis response will serve various populations in Austin.

**Additional Data and Supporting Material (Optional as Needed)**

- Safety Beyond Policing: Promoting Care over Criminalization
- Los Angeles Alternative Response Flowchart
- Edmonton 24/7 Crisis Intervention Report Video
Uprooting Punitive and Harm Culture in Intersecting Systems Working Group

Assessing the ways punitive culture directs public safety efforts and developing recommendations and processes for their deconstruction and replacement.

Contact:

David Johnson: criminaljustice@grassrootsleadership.org

Members:
Sue Gabriel
Dana Reichman
Maya Pilgrim
Bethany Carlson
Brion Oaks
David Johnson

Background & Context

The punitive nature of American culture runs deep. We seek to solve many issues around safety and the need to comply with laws and ordinances through fines, detention, incarceration and violence. Austin is no exception.

“We want to be the most livable city in the country.”
- Vision statement, City of Austin

“Austin’s greatest asset is its people…”
- Vision for Austin’s Future

“...Austin is a beacon of sustainability, social equity, and economic opportunity; where diversity and creativity are celebrated; where community needs and values are recognized; where leadership comes from its citizens, and where the necessities of life are affordable and accessible to all.”
- Vision for Austin’s Future

In response to the public declarations above, we - the people of the City of Austin - are left with many questions:

- Sustainable for whom?
- Socially equitable for whom?
• Economic opportunities for whom?
• Where is diversity and creativity celebrated and how?
• What community needs and values are recognized, and by whom?
• What kind of leadership comes from its citizens?
• How will Austin insure that the “necessities of life are affordable and accessible for all” since it has failed miserably thus far?
  • In 2018, according to the Austin Chamber of Commerce, Austin's Median household income was $76,925 and its Median Family Income was $94,617. The National Assoc. of Realtors estimated the 2018 median home price in Austin to be $295,800.

  If the median home price has spiked 66% over three years to 491K, then where is the 66% increase in median family and median household incomes?

“To be the best managed city in the country.”

- Mission statement, City of Austin

Our city council and the City Managers have proven to be easily swayed from their commitments and our values. Recently, the council betrayed the trust of this task force and city by agreeing to a new cadet class against our unified recommendation.

How is this reimagined if you ignore the people that you have tasked with the very process of reimagining your failed system?

Recommendations

Our proposal is to operationalize the Guiding Values of the Reimagining Public Safety Task Force, in order to create a process for the City of Austin to evaluate city initiatives for equity, potential harm, and holistic safety. We seek to apply this process to any system and mechanism in the space of public safety with the potential to cause harm and/or save lives. Our goal is to disrupt and deconstruct the pattern of punitive culture within public safety, in order to build a public safety system that is liberating, supporting, and holistic in achieving community safety. This process should be piloted with the recommendations of the Reimagine Public Safety Task Force based on the initial framework developed by our working group.

• The city should increase funding to the Equity Office by $1 Million immediately, using divested funds, to develop the validating tool, expand the Equity Office staff sufficiently to implement this process on an ongoing basis. This funding increase is a start. We must make our investments reflect our commitments.

• Any item that comes up on the city council agenda is subject to review by the Equity Office through this process and can choose which items it wishes to review. The intent is that the Equity Office would prioritize Reimagine public safety proposals, policing (including the APD budget and contract), public health, housing and economic development.

• The Equity Office must be given 30 days prior to when the item is placed on the agenda to review any item it notifies Council that it wishes to review. The Equity Office review would then be attached to the agenda item when it is posted.
• An Equity Office representative must be given space to present the results of the equity review as testimony to the City Council during the scheduled meeting prior to public testimony on the item.

The validating tool will be built upon the following framework:

**Step 1**

**Be Rooted in History and Shared Understanding** - Complete a historical analysis in the context of systemic racism. Is this project connected to a system that was intentionally created to perpetuate the harm and oppression of one group for the benefit of another and of capitol? What is the impact and legacy of policies, practices, procedures and key decisions?

**Step 2**

**Center Those Most Directly Harmed by Systems** - Gather data disaggregated by demographics to tell you who is most harmed or negatively impacted. Analyze data to also tell you who has benefited.

**Step 3**

**Initiate an Accessible and Co-Creative Process for Community Involvement** - Center those most directly harmed by systems by committing to a process to collaborate, problem solve and design with the community. This process should be accessible and transparent and can be achieved by ensuring language access services, digital access, stipends, and other efforts to remove barriers for participation.

**Step 4**

**Be Holistic and Tackle Root Cause** - What are we trying to problem solve for? How do we follow the leadership of those most directly impacted by punitive and harmful systems to clearly frame and develop the shared understanding of the problem? Conduct a root cause analysis and identify holistic options and multiple solutions that can achieve the desired outcome.

**Step 5**

**Divest From Systems that Cause Harm** - Analyze the project or program for unintended negative impact and outcomes for those most directly harmed. Has the community been engaged at a deep and meaningful level to help identify these unintended consequences? Has modeling been conducted to see routes of potential negative outcomes with solutions and strategies developed?

**Step 6**

**Establish Community Accountability** - How will you ensure accountability, communicate, and evaluate results? Does this project represent sustainability and long-term thinking? Is it framed to just mitigate harm or will it promote equity and make those historically most harmed better off?

Questions that must be answered by the Equity Office’s review process are:
• What are the top challenges/barriers we encounter to deliver the services or deploy specific resources?
• Does the proposal demonstrate program design and delivery that directly addresses the top challenges/barriers you identified?
• What does the data tell us about who's most vulnerable and at-risk for this service or need?
• Is the program design intentional enough to directly get resources to those most in need?
• Are data disaggregated by race and geography available, and are you utilizing those data?
• Were people with lived experience and those directly impacted a part of your program design?
• Do you have a mechanism to get consistent feedback from clients on the customer experience to course correct as necessary? (This tells us if the vendor really understands the needs of the community and the nuances in what's needed to make sure the services effectively benefit those who need it)
• Who already has access, is overserved, or benefits?
• What does the personnel for the delivery of the services look like?
• Are they competent in connecting to the populations as highest risk?
• Do they have community relationships and are truly able to navigate to get to those most in need?
• What are some unintended consequences for this proposal? (Example: masks are recommended, but what does this mean for Black men already the subject of state surveillance, suspicion, and violence?)
• Are there existing negative outcomes or disparities that exist for the populations that will be impacted by the proposed goals or process in this proposal?
• What are the outcomes you intend to create or impact with this proposal or process?

Additional Data and Supporting Material (Optional as Needed)
• https://docs.google.com/presentation/d/1vEQhSQVwpatXnUS6_gCtlY4QuLo-W3UgETpk-9TWHauU/edit?usp=drivesdk
Services for Survivors of Violence and Violence Prevention
Working Group

Exploring opportunities to improve services to survivors of violence both within and outside of APD. So few survivors report their abuse to law enforcement yet so much of the resources to mitigate violence are funneled through that department. We hope to explore ways that victims/survivors can access these resources.

Contact:

Amanda Lewis amichellewis@gmail.com

Work Group Members

Aja Gair - SAFE
Kachina Clark - APD Victim Services
Tricia Forbes - Crime Survivors for Safety and Justice
Courtney Santana - Survive2Thrive
Jenny Black - SANE nurse
Farah Muscadin - Director of OPO
Neva Fernandez - Victim Services Manager DA’s office
Jen Margulies - Undoing White Supremacy Austin
Shelli Egger - Texas Rio Grande Legal Aid, Gun Violence Task Force and Family Violence Task Force
Eloise Sepeda - Mission Capital, Formerly Refugee Services of Texas
Emily LeBlanc - CASA of Travis County
Julie Sweeney - County Attorney’s Office, DVHRT
Noor ZK - Sex Worker Outreach Project of Austin
Connie Geerhart - APD Victim Services
Amanda Michelle Lewis - Survivor Justice Project
Deepika Modali - Asian Family Support Services of Austin
Angel Carroll - MEASURE
Maggy McGiffert - UTMB Center for Violence Prevention
**Guiding Working Group Values**

- **Victims/Survivor** - We define survivors of violence as communities, families, and individuals who have been impacted by violence, including those accused of harm.

- **Healing Justice** - We believe that all survivors of violence and their families should have the opportunity to heal in any way that feels right for them.

  - According to Cara Page, healing Justice is a framework that identifies how we can holistically respond to and intervene on generational trauma and violence and to bring collective practices that can impact and transform the consequences of oppression on our bodies, hearts and minds. Healing resources must be decentralized and increased to meet the diverse needs in Austin. Right now, many people who experience harm have very few options that don't require police reports. Austin should consider creating a collective care/ healing justice strategy with the support of national TA providers.

- **Non-profit and systems accountability outside of the Criminal Legal System** - We know that white supremacy impacts service delivery; organizations that receive city funds, especially through the reimagining process, should undergo an equity assessment process along with continuous equity analysis. Only programs by and for specific communities should be funded to do community-specific work.

- **Universal Precautions for Trauma** - We understand that trauma and harm are widespread; we should act in ways that recognize that anyone we engage with can potentially be victims/survivors of harm.

- **Anti-racism work is anti-violence work** - Culturally-affirming programs and organizations are not only vital for healing but are essential for the prevention of harm and violence. Different forms of oppression are at the root of violence; we cannot end violence without ending oppression.

**Recommendations**

Note: The recommendations that follow are initial recommendations. The SSVVP Workgroup acknowledges that fully reimagining how our city creates safety for survivors of violence and prevents future violence requires more than a matter of months. This is especially true when taking seriously the charge to work in concert with full input from community members. We recommend that additional time and funding be dedicated to the process of more fully developing and planning implementation of these initial recommendations.

**Community Based**

Note: The SSVVP Workgroup is aware that much of the public conversation about Reimagining Public Safety and victims of violence has centered on the possibility of decoupling Victim Services and APD. The Workgroup's recommendations on that matter may be found in the Internal City of Austin section of this document. However, the Workgroup strongly recommends that the City think more broadly about services to victims and survivors in Austin, and understand that Victim Services as currently configured is only one piece of a larger pie. Rather than trying to divide up that one slice even further among resources within and outside of the criminal legal system, the City should expand the entire pool of funding available for survivor healing, and for the restoration and repair of harm. Our recommendations include significant amounts of funding being dedicated to resources outside of the criminal legal system without any reduction of funding to existing Victim Services.
The SSVVP Workgroup acknowledges that the generational violence and community harm caused by our current system of policing means that there are vast numbers of people in Austin who cannot and will not access the criminal legal system for remedies. Accordingly, the SSVVP Workgroup recommends that the City fund a proliferation of community based services that give people who are not going to access the criminal legal system supportive places to turn. We recommend that these funds be drawn from the harmful systems of policing identified for divestment by the Patrol and Surveillance workgroup. These community based services should be fully funded and resourced, culturally responsive, located throughout the city, and have full language and ability accessibility and staff who are paid livable wages with benefits.

The SSVVP Workgroup envisions this proliferation of community options as a way for survivors who are not interfacing with the criminal system to access the kinds of medical, financial, and care resources and services available through resources such as the Crime Victims Compensation Fund and other survivor services that currently require survivor coordination with the criminal legal system. Accordingly, access to all of the community based options recommended here should never require coordination with the criminal legal system. Furthermore, all funded initiatives should ensure that mandatory reporting policies and practices are equitable and do not over-reach beyond State of Texas requirements. All community based options funded by the City should follow the process recommended by the “Uprooting Punitive and Harm Culture in Intersecting Systems” Working Group. The following community-based recommendations address initiatives that will begin to create an environment in Austin in which all survivors of violence have access to care and material support.

Community-Rooted Safety Grant Program

In alignment with the Reimagining Public Safety Task Force values of committing to liberation and freedom, holistic community safety, accessibility, and divesting from systems that cause harm, the SSVVP Workgroup recommends that the City of Austin establish a permanent Community-Rooted Safety Grant program to fund culturally responsive, community-rooted initiatives to address violence and create safer futures. The Community-Rooted Safety Grant Program will invest in community-led prevention and intervention efforts that build community safety. It will elevate and support existing grassroots community-based strategies for creating safety, healing harm, and preventing violence. It will also support community members in developing their practices and building capacity for deepening community safety strategies.

Specifically, we recommend that the City establish a permanent Community-Rooted Safety Grant Program of at least $350,000 per year that will fund community groups to lead promising initiatives in at least one of three areas:

- Safety and Immediate Well-being
- Healing and Repair from Harm
- Prevention - Planting Seeds for Violence-Free Futures

Awards

Grant awards will be for a minimum of two years and a maximum of four years. Organizations may reapply.

Administration

The SSVVP Workgroup recommends that this grant fund be administered through the Austin Public Health Department (APH). We recommend that APH follow the Equity Office’s mini-grant
protocol to keep funding accessible to initiatives led by and for people most impacted by violence and by violent systems of policing.

**Eligible Organizations**

Eligible organizations and groups are those whose primary purpose is to work in culturally-rooted ways with individuals and communities most impacted by racism, poverty, and the violence and surveillance of the traditional policing system. Applicants do not need to be 501c(3) organizations; we recommend that APH follow the Equity Office's mini-grant protocol to keep funding accessible to initiatives led by and for most communities most impacted by violence and by violent systems of policing.

Applicants must center those communities most directly impacted by the prison industrial complex; specifically Black, Indigenous, Latinx, Asian American, LGBTQIA+, Immigrants, Youth, People with Disabilities, and cash poor populations. Applicants will be asked to demonstrate how their proposed effort and their organization itself both reflect this focus.

**Eligible Activities**

Eligible activities under each subject area include, **but are not limited to:**

**Safety and Immediate Well-being**

Example areas of activity may include, for example:

- Crisis Intervention
- Victim/Survivor Emergency Funds

**Healing and Repair from Harm**

Example areas of activity may include, for example:

- Transformative Justice Circles
- Healing Circles
- Pod-mapping

**Prevention - Planting Seeds for Violence-Free Futures**

Example areas of activity may include, for example:

- Economic Empowerment
- Culturally Rooted Parent/Family Support
- Community Defense Zones

In addition, community-directed training or networking in service to the project should be an allowable expense, so that grassroots groups can build their capacity in ways they define as necessary and useful.

**Community Accountability**

The SSVVP Workgroup recommends that grant award decisions be made by a community review panel made up of APH staff members, Equity Office staff members, and community members. Budget allocations to the Equity Office (and any other participating City entity) should be
increased to support the increased workload of participating in the review process. Community members on the review panel would be funded for their participation and should include representatives from organizations led by and for people most impacted. In future years, grant recipients not eligible for the current cycle of funding could also serve on the review panel, with additional compensation provided.

The application process should be as low-barrier as possible. Grant reviewers should all be trained to assess applications based on the project's potential impact or outcomes, not on how well-polished the application may be. Not having a professional grant-writer should not be a barrier to applicants.

The Community-Rooted Safety Grant program should be subject to a periodic outside evaluation process that incorporates substantive meaningful participation from community members most affected by violence.

Trauma Recovery Center (TRC) Model

The SSVVP work group recommends that the city, through the Office of Violence Prevention, provide $1 million in funding for the creation of a Trauma Recovery Center (TRC). TRCs provide free, culturally responsive trauma informed therapy and case management for survivors of all violent crime, regardless of any involvement with the criminal legal system or immigration status. TRCs are located in high-crime areas to serve victims that often do not access other services, and they address the needs of survivors who are traditionally underserved, such as people experiencing street violence, gun violence, people who are homeless, LGBTQ+ victims, and communities of color. TRC's are also uniquely situated to serve victims and families impacted by multiple crimes who have complex trauma and require comprehensive services.

Please see the Alliance for Safety and Justice report: Trauma Recovery Centers: Addressing the Needs of Underserved Crime Survivors in Texas. Also see op-ed in the Austin American Statesman from a Crime Survivors for Safety and Justice member in Austin, Opinion: Our city must do more to break the cycle of violence. Also see report on The Trauma Recovery Center Model. The SSVVP recommends that the formation of Austin TRC be led by people from the communities most impacted by crime and violence and organizations led by and serving those populations.

Sex Worker Outreach Services

Recommendation: $460,000 first year, then $260k annually to fund sex worker outreach services by and for sex workers. Including but not limited to:

a. Survey about violence within the community to strengthen the data available - $200k
b. Peer support programming (bad date list, paid peer mentorship) and mutual aid - $75k
c. Street outreach and harm reduction - $80k
d. Public health campaign against stigma for sex working, unhoused, and drug using populations - $30k
e. Cultural competency trainings for legal / medical /social service providers in Austin - $75k
Community-Based Economic Services

**Recommendation: Expand a larger amount of funding to emergency financial assistance projects.** Immediate cash assistance is a primary need identified by survivors of violence when trying to get safe and heal. Providing multiple avenues for survivors to access low barriers, flexible, emergency financial assistance is very important in order to reach those most vulnerable and most marginalized. Many agencies and community partners could use funds of this nature to quickly support individuals and families, promoting self-determination in the aftermath of violence, and reducing the need for initial or ongoing systems involvement for those who do not want it. A current example of a financial assistance program is the “Bridge to Safety,” a program of The SAFE Alliance, which is currently funded by the City of Austin.

1. Increase the number of community partners who can distribute city-funded brief financial assistance to at least 5 additional sites in the next fiscal year.
   a. Provide centralized distribution as an option for additional funded partners to ease administrative burdens and to ensure that most funds go directly to those seeking financial assistance.
   b. Do NOT require police reports or criminal legal system involvement to access funds.

Funding Recommendation:
- $75,000 p/year, p/site, for direct financial assistance x 6 (1 current, 5 additional) agencies = $450,000
- Allot additional funds for coordination and administrative components of centralized distribution support, and/or for FTE/PTEs if agencies staff distribution themselves x 6 (1 current FTE, 2 additional) = $225,000

1. **Broaden eligibility for brief financial assistance funds to all victims/survivors of violence,** allowing a greater number of individuals and families to utilize these monies in order to access safety and healing resources.

2. **Provide easier access to city-affiliated transportation, including free and deeply reduced CapMetro passes,** to projects/individuals/agencies who are distributing brief financial assistance funds.
   - 100-150 passes p/year, p/site

It is recommended that the city incorporate some of the recommendations outlined in FreeFrom’s [Trust Survivors: Building an Effective and Inclusive Cash Assistance Program](#) report when creating these resources. Funding should:

- Give survivors of all types of violence multiple places to access these funds through culturally rooted community organizations and partners that are readily accessible throughout the city
- Involve multiple options of how cash assistance can be distributed to individuals (for example, cash, venmo, not requiring bank accounts),
- Reserve a certain amount of funds for those most marginalized (people who identify as LGBTQIA+ and BIPOC),
- Not require “proof of” or eligibility requirements for receiving funds,
- Be flexible with no strings attached,
- Be available for victims/survivors to access healing resources with these funds, not just immediate safety resources,
- Not require individuals to “become clients” of an organization or have continued involvement with the distribution site.
- Be able to be distributed quickly, within hours the same day if necessary

Currently, Bridge to Safety (BTS) is a city-sponsored project, administered at The SAFE Alliance, that allows for one-time funding to individuals who have experienced Domestic Violence, Sexual Assault, and/or Human Trafficking in last six months. BTS funds can be used for things like housing application fees, one-time rent or deposits, hotel stays, transportation to any shelter in the US where person wants to relocate (in coordination with that shelter), security, cell phone, gas cards, bus tickets, ID, childcare, education, employment assistance, translation, legal assistance, medical and dental care, or plane fare. Bridge to Safety is meant to be fast — funds are distributed within hours or the same day.

Viewing SAFE’s Bridge to Safety as a pilot, the SSVVP Workgroup envisions that the city would fund more, similar sites, who would be able to distribute these types of funds. Additional distribution sites may benefit from centralized coordination so that each site does not have to fund FT staff, and more money can flow directly to those who need it.

Community-Based Housing Recommendation:

1. Create a subsidy program to incentivize landlords to rent at reduced and stabilized rates to low income trans people of color, as identified through sex worker outreach and harm reduction programs. Since part of project connect’s equity development plan includes potentially buying land to prevent gentrification, this is something that would help make sure these underserved populations of violence survivors are not left out of the picture.
   a. example: St. James Infirmary and Larkin Street youth Services partnership with the City of San Francisco: “Addressing the homeless issue, which disproportionately affects trans people, has been a priority for Mayor London Breed, who last year announced that St. James Infirmary and Larkin Street Youth Services were awarded two-year contracts for the subsidy program. St. James will receive $490,000 annually while Larkin Street will receive $660,000. The total budget request of $2 million also includes $300,000 for trans housing stability case management for two years.” [source](https://www.ebar.com/news/news//287122)

Funding Recommendation: **$500,000 p/year**

2. Fund black trans led initiatives around the city, including a community housing trust for housing units that would serve traditionally underserved populations of black trans individuals who are survivors of state and interpersonal violence.
   a. example: [Black Trans Leadership of Austin](#): $500k for home cost, $40k for 2 house manager part time salaries, $40k for admin salary, $10k legal support, $5k team
3. In addition to, and recognizing the potential intersections with, Community Housing-Based Recommendations 1 & 2, the city must: Increase and diversify funding for housing support, including subsidies, a housing trust, crisis/emergency housing providing Hotel Safety Net stays, food vouchers, and creation of a permanent fund to address the COA housing crisis. Specific attention and resources must be earmarked for victims/survivors who are also experiencing housing insecurity and/or homelessness, and displaced victims/survivors of Domestic Violence, Sexual Assault, and Human Trafficking. Availability of the funds cannot require law enforcement reporting and/or cooperation. Some diversified options, including Hotel Safety Net programs, an example of which is Survive 2 Thrive, already exist in our community, are currently funded by the City of Austin and are in need of additional funding. This need certainly extends to individuals who have experienced many types of violence, including victims/survivors living in homeless camps who may wish to access long term resources, including transitional or supportive housing. Many victims/survivors are in danger but cannot access shelter quickly and must spend time on shelter waitlists, and in the interim need a safe place to go. The Survive2Thrive Foundation (S2T) provides temporary housing to individuals who have experienced Domestic Violence and Sexual Assault who face displacement and homelessness when shelter is unavailable through a five county wide safety net of hotels in Austin and the surrounding counties. These individuals are placed in available hotel suites with kitchenettes and laundry facilities for up to 45 days and given food and necessary resources like case management and telecounseling. The one-time funding also goes to provide transportation stipends, housing deposits/application fees, travel funds, and expenses associated with stabilizing them into semi-permanent/permanent housing. These programs provide victims seeking assistance an immediate option when fleeing violence.

We expect that this recommendation will be taken up by many RPSF Workgroups and requires urgent, specific, and ongoing attention and investment made in line with TF values and SSVVP’s overarching recommendations.

Funding Recommendation: $15,000,000 p/year

4. Offer funding for implementation of SSVVP Economic Recommendations (see above) at any city-funded housing support sites (brief financial assistance & increased access to city-affiliated transportation).

Community-Based Prevention

Recommendation:

1. In the next two fiscal years, fund at least 3 programs or projects that expand or uplift existing school-based and place-based, extracurricular, parenting support, and/or additional community-driven prevention efforts; expand the number of programs funded and/or funding amount in later fiscal years.

Funding Recommendation: $500,000 p/year
- $75,000 p/FTE
- $25,000 minimum for program supplies and direct support to participants
- $20,000 p/location, for expanding site-based and/or extracurricular programs

The SSVVP Workgroup recommends that COA diversify prevention money, particularly via funding that does not flow through the criminal legal system and instead invests in place-based (schools, apartment complexes, neighborhoods, etc.) extracurricular, and non-systems-based community violence prevention programs that uphold RPSF values. Prevention is an effective and financially efficient way to move efforts to reduce violence “upstream,” investing in and serving individuals and families in nurturing and healthy ways that are not crisis driven. Here in Austin, many of these types of primary, secondary, and tertiary prevention activities are already occurring in the community and at non-profit organizations; however more funding, especially for culturally affirming engagement opportunities, and to reach a greater number of youth and men, are needed.

Arts, athletic, and culturally affirming programs, with local examples such as Youth Rise Texas, Creative Action and OutYouth, include primary prevention strategies that have the potential to build community and promote healthy and engaging activities for youth. These types of programs are often the first to experience funding cuts during periods of financial hardship in the community, and need to be uplifted as our city transitions out of the COVID pandemic and post-storm crises. Grassroots organizations, including Man in Me, which works to, “educate, strengthen and support men towards responsible manhood and fatherhood,” are doing meaningful prevention work and reaching parents where they are in communities with everything from meals in local parks to parenting groups. Programs should be place-based and specifically include parts of the city that have been historically impacted by overcriminalization; ensuring funds toward these efforts have, at minimum, parity with what was previously spent to police these areas of the city is critical. These kinds of programs are effective, financially efficient, and could be readily implemented widely throughout the city; they, and community-driven services and resources that are yet to be imagined, will enrich neighborhoods and other areas with resources that can prevent violence and are deserving of the city’s investment.

2. The SSVVP Workgroup also expresses support for the recommendations of the Community Equity Reinvestment workgroup. Cash funds for basic needs and community-directed funding within neighborhood hubs are promising “upstream” approaches to preventing violence.

Education and Engagement of Non-Police Crisis and Healing Options

The city must dedicate funding and resources to help victims/survivors understand their healing and accountability options outside of the criminal legal system. Opportunities to raise awareness include:

- Creating a page on the city’s website detailing options for healing and accountability
- Training 311 operators on how to assist people in crisis find culturally responsive resources
- Partnering with community-based organizations to engage with individuals about what to do in crisis and how to meet long term healing needs.
Internal City of Austin

Mental Health Referral Fund

1. **$360K annually to expand the EMDR training program**, currently housed with Victim Services, to also provide free access to other healing modalities, some of which may be more culturally resonant.

   a. Currently the EMDR program costs 50k annually to train community based therapists in exchange for free therapeutic services to victims/survivors regardless of reporting status

   b. Several community-based organizations can access the therapy referral list; we recommend opening this list of referring organizations to any groups that serve survivors/victims of harm.

   c. This fund would directly pay for healing services instead of requiring victims/survivors to submit for reimbursement

   d. Includes $60k for ½ FTE to coordinate fund

Safety for sex workers

The SSVVP working group recommends that city release individuals arrested, and stop arresting individuals for prostitution and solicitation. The city should advocate for the county to dismiss charges and for the expungement of records for those who have been previously convicted.

The city should also advocate to end Phoenix Court and instead, refer individuals to local community outreach programs that are relevant to their needs, like sex worker outreach programs and harm reduction programs. If the appropriate programs don’t exist or are not robust enough to serve the need, invest in paying people who are already doing the work in-community to continue and build capacity.

Full decriminalization of sex work is the ultimate goal, resisting partial decriminalization such as the “Nordic model” of partial decrim which protects sex workers but criminalizes their clients, thereby increasing incidents of violence and lack of safety and screening ability for sex workers.

In Baltimore many minor offenses will no longer be prosecuted, including prostitution, drug possession, trespassing, open container, public urination, paraphernalia possession, attempted distribution of drugs, and minor traffic offenses. These are all charges that are used to criminalize street economy based people as well as unhoused people. While homicides increased 30% in 2020 across the country, in Baltimore, violent crime dropped 20% with this approach. Given the significant overlap between people dependent on the sex trade, people who use drugs, and people who are unhoused, following Baltimore’s lead in stopping the prosecution of all minor level offenses on this list - while also intentionally including solicitation, so as to not create a partial decrim model that creates further harm - would be directly in service of creating a safer environment for the most marginalized members of Austin’s communities.
Independent Office of Police Oversight

The SSVVP workgroup recognizes that there is specific violence in our city that is perpetrated by the police, and that the degree and type of power and privilege experienced by officers who cause harm requires an equally specific type investigation and accountability process. Reporting this violence to the very department that has caused it is unrealistic and untenable for many victims, and the OPO can be one viable option; many of the solutions outlined by this group aim to provide alternative resources for survivors to turn to, but we find that those will not be fully realized without a safe and independent accountability body to address police harm so long as APD exists. The workgroup recommends that the OPO is relocated from the City Manager’s Office, to a position comparable to the City Auditor, with authority and access to fully engage with city and department administration in responding to the experiences of victims of police violence.

Mandated Reporting

The SSVVP recognizes that overly broad mandated reporting practices harm survivors, discourage seeking help during and/or in the aftermath of interpersonal violence, and promote deeply harmful and institutionally violent racial inequities. As such, we recommend that APD review and revise their policies regarding mandated reporting, with meaningful engagement from Victims Services; specifically, reevaluate and revise current practice of reporting to The Department of Family & Protective Services in all instances of responding to survivors who have kids. Address the reality that current practices disproportionately and negatively impact survivors of domestic violence and their families and communities.

Office of Violence Prevention (OVP)

The Office of Violence Prevention - Austin’s first ever civilian office dedicated to community safety and violence prevention - will be uniquely positioned to support the work of the RPSTF going forward. We recommend that the City create a permanent Violence Prevention Coalition anchored by the RPSTF with the addition of survivors, youth, and individuals with lived experience from the most impacted neighborhoods to guide OVP program development and budget priorities by leveraging power with - not over - community.

Recommendation - $500,000 to facilitate a community-led strategic planning process rooted in the principles of racial justice, inclusivity, transparency, self-determination, and participatory decision-making. During this process, it is imperative to integrate opportunities for healing from collective trauma. For example, Equity-Centered Community Design, created by Creative Reaction Lab, is a unique creative problem solving process based on equity, humility-building, integrating history and healing practices, addressing power dynamics, and co-creating with the community to dismantle systemic oppression. Another model developed by Dr. Lesley-Ann Noel, Associate Director for Design Thinking for Social Impact and Professor of Practice at Tulane University, utilizes a modified approach to design thinking, starting with reflection on one’s own identity and the identities of others and how these show up in both the design process and the proposed solutions. This approach helps people notice diversity, and to see it as a strength in the design process, while co-creating solutions that are relevant to diverse users. Using this approach she has collaborated with the Crescent City Corps to co-create possible solutions to improving relations between the New Orleans Police Department and residents of New Orleans.

Recommendation - $500K to build local capacity to assess, monitor, and utilize violence-related data from a variety of sources. This should include the creation of a Homicide Review Team which is an evidence based program that attempts to reduce homicides and nonfatal shootings.
through a multilevel, multidisciplinary, and multi agency case review process intended to identify system gaps and opportunities. See, Milwaukee Homicide Review.

**Recommendation** - $2 million in immediate funds to implement, monitor, and evaluate pilot strategies to interrupt the cycle of community violence in the neighborhoods most impacted by police violence. There are several models from around the country that have shown both immediate and long-term reductions in gun violence. These proven strategies have similar principles and common best practices, including:

- Identifying and focusing on individuals, groups, and neighborhoods at the highest risk of being involved in gun violence;
- Engaging those individuals in a trusting relationship with trained, culturally-appropriate outreach workers with relevant life experience who connect participants to wrap-around services, supports, and opportunities that provide alternatives to violence; and
- Building trust with key people in the community to learn about ongoing disputes, recent arrests, recent prison releases, and other disputes, then using mediation techniques to resolve them peacefully.

In the future, the pilot model could be scaled up by embedding trained violence interrupters within the community-led neighborhood “hubs” proposed by the Community Equity Reinvestment Working Group.

Victim Services

Victim Services serves a critical role within APD and the safety and wellbeing of survivors and victims would be harmed by physically decoupling from APD before transformational change is seen within the department.

1. Administratively decoupling Victim Services (VS) from APD requires the following:
   a. Full access to offense reports, police radio, CAD, Versadex (all Criminal Justice Information System Reports)
   b. Access to victims at the first police interaction (when patrol officers are dispatched)
   c. Physical co-location of VS staff, within their assigned sworn units
      i. Increases capacity to advocate for victims/survivors when VS advocates can read, enter supplements, and liaise
      ii. Ensures VS Counselors are available at all times when a victim comes in for a statement
      iii. Maintains checks and balances-VS are likely to see issues before the public become aware of it
      iv. Fosters relationship building so that advocates can elevate survivor voices
   d. Victim Services should be the last unit physically decoupled and decoupling should be driven and informed by the communities most harmed, community-based survi-
vor advocates and by Victim Services leadership.

2. **Recommendation** - The VS Manager should report to the Assistant City Manager over public safety or the APD Police Chief.

   a. VS Manager to be included in executive and command staff meetings, and have regular access to the APD Chief for communication and collaboration.

   b. This will serve to educate those in power of the services that VS provides, including direct services to clients, community and law enforcement training, and other programming.

   c. This will ensure that VS has a voice at the decision making tables.

3. **Recommendation** - The APD budget should reflect the value the department attributes to victims' voices. As such, victim service salaries should be competitive and not depreciated by cutting benefits or replacing needed positions with temporary positions. Victim service counselors should be paid a salary comparable to experienced counselors within our community and comparable to victim service professionals in communities of comparable size.

4. **Recommendation** - Dedicate 30 hours of training time (currently 16 hours) for cadets and 2 hours yearly training for patrol officers, and inclusion in Field Training Officer training and recertification. VS will coordinate with outside service agencies to provide training regarding VS role, trauma-informed response to survivors, case studies, role plays, and victim rights, with emphasis on interacting affirmatively with survivors representative of Austin's diverse communities. While there are other components of the Reimagining Task Force that are focused on police training related to history of policing, equity, and cultural humility, the piece that VS would be responsible for coordinating would center on victims, witnesses, and survivors of crime, trauma, and violence.

5. **Recommendation** - Move to a model where each Sexual Assault survivor has the option to speak to a patrol officer, a VS counselor, or both, with the counselor being the first point of contact (either by phone or taking the lead on the scene), so that the survivor will know what the counselor can offer and their options regarding reporting.

   a. Counselors have more experience and expertise; counselors respond to Sex Crimes calls weekly and sometimes daily. Officers respond to Sex Crimes call much less frequently (some as few as every couple of months).

   b. Easier to train 40+ counselors in trauma-informed interviewing for the purpose of taking a report than to train hundreds of officers.

   c. Important to still have law enforcement involved if the survivor is calling 911 to initiate a report.

      i. This is to fulfill the caller's expectation (they may prefer to speak with a police officer as opposed to anyone else).

      ii. Unless it is known that the scene is safe (e.g., offender is not on site, survivor is stable enough to identify a non-law enforcement person as being there to help, etc) then it is important to have law enforcement there.

6. **Recommendation** - Victim services collaborate with the Equity Office and community
stakeholders to implement opportunities put forth by the Community + APD Equity Assessment Series: Austin Police Department, Victims Services Division Report.

a. Development of concrete equity standards and assessment processes

b. Development and implementation of training modules on critical race issues as part of recruiting, training, orientation and onboarding processes

c. Collaboration with Equity Office and community to develop and implement specific accountability metrics for ensuring equitable practices

Total: 22,445,000
We Can Go Beyond
Artwork by Rommy Torico
Sourced from Amplifier Art