

MEMORANDUM

TO: Robert Bobb, Co-Chair of the DC Police Reform Commission
Christy Lopez, Co-Chair of the DC Police Reform Commission

FROM: Disability Community and Policing Working Group as convened by the DC Developmental Disabilities Council

DATE: November 9, 2020

SUBJECT: Recommendations to Support DC's Disability Community

Rationale and Background

The Disability Community and Policing Working Group was convened by the DC Developmental Disabilities Council and came together for 12 meetings to discuss issues that the disability community has faced in interactions with police officers in the DMV. The group was made up of disability advocates including the undersigned groups and individual community members. We began this process by learning about existing initiatives and creating space for people in our community to share personal experiences that they have had in interacting with the police. We learned a lot, including the following:

1. There are groups and individuals that have been working on these issues for many years. We are not the first group, and likely won't be the last, that aims to improve our community by re-thinking how law enforcement operates in it.
2. There are different schools of thought about how law enforcement should change (e.g., abolition, reform) and our focus needed to be on what will best support and protect people with disabilities.
3. Many people had stories of personal interactions or those of close family or friends who had poor interactions with police officers. We also discussed the long list gathered by the National Alliance of Multicultural Disabled Advocates of people with disabilities who have been killed by police (<https://withkeri.com/category/namd-advocates/>).
4. People with disabilities are often misunderstood and treated poorly when they are survivors of crime or witnesses to crime. A nuanced understanding of reasonable accommodations when it comes to crime investigations and other interactions with law enforcement does not seem to exist.
5. People of color who also have disabilities are disproportionately represented in the number of people who have been harmed by police officers. None of us should make any recommendations or changes without being informed by the real life experiences of the people most affected by this problem.

We submit these recommendations because we want to reduce the need for police and ensure that when police officers are interacting with people with disabilities, those interactions remain respectful

and safe. Throughout history in the DMV, many injustices have been committed against people with disabilities at the hands of police officers and very little has been done to correct the behaviors, actions, and attitudes that have led to this harm. We aim to eliminate all murders committed by police officers. We believe responses to behavioral health and disability related crises require unarmed individuals with specialized expertise and a deep understanding of disability and behavioral health issues. We recognize that all DC government agencies and community groups must come together to support this effort – it is not just the responsibility of MPD.

Recommendations are directed at various organizations or groups, including:

1. DC Police Reform Commission (PRC)
2. Department on Disability Services (DDS)
3. Metropolitan Police Department (MPD)
4. Department of Behavioral Health (DBH)
5. Office of Unified Communications (OUC)
6. Non-governmental community groups (Community)

Recommendations for Consideration by the DC Police Reform Commission

1. MPD: Appoint at least one person with a disability or a family member/caregiver of a person with a disability to MPD Chief's Advisory Council (made up of Chairs of District Citizens Advisory Councils, plus 4 members selected by the Chief) and include this requirement in policies and procedures that establish and govern the Chief's Advisory Council.
2. MPD: Provide education to all staff that includes best practices in working with people with disabilities, including people with intellectual and developmental disabilities, in any and all types of interactions they may have, including crime investigations involving witnesses, survivors, or accomplices who may have been manipulated by people they thought they could trust.
3. MPD: Establish a policy that deadly force is NEVER used with people with disabilities and develop alternative practices that preserve and protect people's lives.
4. MPD: Create a Disability Liaison Unit that is designated to work with the disability community and explore whether it should be combined with the existing Deaf and Hard of Hearing Liaison Unit.
5. MPD/DBH: In addition to broad crisis-intervention training (CIT) for all police officers, establish more specialized, dedicated crisis-intervention teams made up of behavioral health and disability professionals who can provide an unarmed response to behavioral health and disability-related crises.
6. OUC: Ensure that dispatchers receive education from behavioral health and disability services professionals to appropriately identify a behavioral health or disability-related crisis and dispatch unarmed behavioral health or disability professionals who can best respond to those situations.
7. DDS: Develop education and information for Service Coordinators, Direct Support Professionals, and other service provider staff about ways to more effectively support people who have had or are likely to have interactions with law enforcement and the criminal justice system, including alternatives to calling the police. This could include, but may not be limited to extensive training

on de-escalation, recognition of different types of disabilities, basic intervention techniques, mobile crisis teams, strict staffing patterns that include effective matching for people who have had police called on them before, etc.

8. DDS: Provide education to people with disabilities and their families/caregivers regarding their rights as it relates to interacting with the police, which should include, but may not be limited to, fourth and fifth amendment rights and information about Smart911 so they can make an informed decision about whether or not to provide their information to Smart911.
9. MPD/DBH/DDS: Police officers should receive education directly from people with disabilities on issues that are important to them and strategies for working with people with disabilities. Police should also receive education alongside behavioral health professionals, disability services workers, social workers, etc. Possible training curriculums or programs include:
 - a. Curriculum developed by the Ethan Saylor Alliance in Maryland (<http://mdod.maryland.gov/about/Pages/Saylor-Alliance.aspx>)
 - b. The Arc's National Center on Criminal Justice and Disability's Pathways to Justice Program (<https://thearc.org/our-initiatives/criminal-justice/pathway-justice/>)
10. All DC Government and Council of DC: Consider the extensive recommendations provided by DefundMPD to shift funds from MPD to social services that support the health, well-being, and peacefulness in our communities. This includes enhancing funding for DBH, DDS, DACL, and other community building agencies.
11. Community groups: Create a public awareness campaign that supports awareness of disability issues, the names and lives of people with disabilities who have been harmed or killed by police officers, alternatives to calling the police, and information to encourage and support people with disabilities and their families/caregivers to join their local Citizen Advisory Council.

We look forward to working with you and are happy to answer any questions. You may contact Alison Whyte, Executive Director of the DC Developmental Disabilities Council (alison.whyte@dc.gov, 202-340-8563) for further information or support related to these recommendations.

Signed:

DC Autism Society

Chi Bornfree, LLC

The Arc of DC

Ron Hampton, Chairperson of the Disability Community and Policing Working Group

Masipula Sithole Jr., Founder and Facilitator, Rhythm for Recovery