2022 Annual Report

Center for Innovations in Community Safety at Georgetown Law

**CENTER for INNOVATIONS
in COMMUNITY SAFETY**

GEORGETOWN LAW

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Overview

Though the debates over policing did not dominate the front page for most of 2022, policymakers across the nation continued to attempt to make good on the promise of transforming the criminal legal system. Municipalities across the nation have launched or expanded alternative first responder programs to provide more effective and tailored responses to emergencies and community needs. Community violence intervention programs are expanding exponentially across the country. Reform prosecutors continue to gain footholds in district attorney offices nationwide, most recently in places like Hennepin County, Minnesota (where Minneapolis is located), and Alameda County, California, after the November elections.

Nonetheless, the movement is also in the midst of a backlash in response to homicide rates that rose in some places in 2021, threatening a return to the failed "tough on crime" policies of over-policing and overincarceration that have devastated many Black and brown communities and exacerbated entrenched poverty.

Against this challenging backdrop, the need for CICS' singular approach to community safety is clear: we promote individual interventions and systems-level change to transform and end overreliance on policing and to mitigate the devastating impacts of racial and ethnic discrimination and economic inequality in the criminal legal system. Over the past year, CICS has successfully leveraged its unparalleled expertise and experience, its deep relationships with a broad spectrum of community stakeholders, and its commitment to community-based change to strengthen our existing programs and grow into new areas.

Flagship Programs

ABLE

Active Bystandership for Law Enforcement (ABLE) is a program developed by CICS in partnership with the global law firm Sheppard Mullin and designed to build cultures of active bystandership and peer intervention within law enforcement agencies. Decades of research show that intervention in real time is often the most effective way to prevent harm, and that training can teach people to intervene more effectively. Yet, before ABLE, few law enforcement officers were taught how to intervene to prevent harm, and there was little effort to intentionally build police culture that supports such intervention.

ABLE has continued to grow dramatically since its initial launch in 2020, in response to the death of George Floyd while three bystander officers looked on. This year, the ABLE team has welcomed an additional **118 agencies** to the program and coordinated an additional 35 Train-the-Trainer classes, certifying an additional **804 ABLE instructors** at ABLE agencies. Backed by over 1,750 instructors, the ABLE Project is now being implemented in **314 law enforcement agencies** across 40 US states and 3 Canadian provinces. ABLE agencies are comprised of approximately **158,000 law enforcement officers** and serve approximately 100 million constituents.

Agencies of all types have sought out the program in the last year, including some of the largest agencies in the country. The Los Angeles Police Department joined in March 2022 and the Chicago Police Department joined in February 2022. Along with the productive partnerships the team has built in large city departments, ABLE has also been well received in rural and suburban areas, as well as in smaller cities. 54% of ABLE agencies are comprised of less than 100 sworn officers.

We expect that 2023 will bring broader involvement between ABLE and federal law enforcement agencies. In May 2022, President Biden signed an Executive Order on Advancing Effective, Accountable Policing and Criminal Justice Practices to Enhance Public Trust and Public Safety. This Executive Order requires that all federal law enforcement agencies issue use-of-force

"ABLE represents the real hope for positive change and the actions needed for an improved law enforcement culture across the nation. This is something we can all get behind."

Officer, Phoenix Police Department

"Departments searching for a course to improve a culture... here it is!"

Trooper, Massachusetts State Police

policies that include, at minimum, a requirement that officers be trained in the affirmative duty to intervene to stop any officer from engaging in excessive force. As ABLE remains the gold standard for duty-to-intervene trainings nationwide, CICS is currently negotiating agreements with several federal law enforcement agencies to provide training that will meet the requirements of the Executive Order. We have recently completed an MOU with DOJ's COPS office to elevate knowledge about ABLE in the nation's law enforcement agencies.

In order to build capacity sustainably, the ABLE team has sought out and for-malized strategic partnerships with state-based institutions that can promote aware-ness of the ABLE program and streamline training delivery to less well staffed or resourced law enforcement agencies. In addition to existing relationships in the states of Washington, New Jersey, and Texas, the ABLE team has completed agreements with the Colorado state government, the Utah Local Governments Trust, and the International Association of Campus Law Enforcement Administrators (IACLEA).

A cornerstone of the ABLE approach is continual engagement with law enforce-ment changemakers, policy experts, and voices of the community. As a result of this engagement, the ABLE team has introduced several programmatic enhancements over the past year. In keeping with efforts to deepen the level of services delivered to agencies, the ABLE team launched a revision of the ABLE standards for the first time since the program's inception. The revised standards focus on providing enhanced support for the programmatic aspects of ABLE and will be supplemented with an enhanced application process designed to prepare agencies to hit the ground running with ABLE training and implementation. The launch of these revised standards and the enhanced application took place in August 2022.

In February 2022 the ABLE team published our first two-hour annual refresher training, focusing on one of the program's core pillars; officer health and wellness. The course prompts students to think critically about the relationship between officer wellness, misconduct, and mistakes. In addition to the curriculum itself, the ABLE team supported the rollout by providing two live learning sessions where over 100 instructors and program coordinators across the country were able to connect with the curriculum team directly and learn how to best present this material in their departments.

CICS is also engaged in a cutting edge effort to evaluate ABLE with Google's Jigsaw project, Dr. Evan Barba of Georgetown's Communication, Culture, and Technology Department, and Dr. Andrea Headley of Georgetown's McCourt School of Public Policy. The CICS-led team is modifying Jigsaw's virtual reality Trainer program to build a scenario capable of testing the degree to which law enforcement officers at ABLE agencies intervene after receiving the training. CICS expects the software development to be completed next year, and hopes to launch the research evaluation prior to 2024.

314
agencies

1,538
instructors

158,000+
law enforcement officers

100,000,000+
constituents

Police for Tomorrow

The Police for Tomorrow Fellowship is designed to help line-level police officers become potent agents of change within their departments. By helping these officers understand the social, historical, and scientific context within which they police, PfT equips them to shift the culture and practice of policing from the inside.

PfT graduated its third cohort of Metropolitan Police Department (MPD) Fellows in May at a ceremony attended by Dean Treanor, MPD Assistant Chief Morgan Kane, and MPD Chief of Staff Ben Haiman. The thirteen graduating fellows completed an 18-month program that began just months after the COVID shutdown and grappled with the George Floyd and Breonna Taylor protests as well as the Capitol Insurrection. After 12 monthly workshops on topics ranging from mental health crisis to domestic violence to community violence intervention, fellows launched their 6-month capstone projects. The capstone projects covered a variety of areas, including: research related to providing equipment and training that would improve MPD's ability to respond to medically urgent scenes; a resource pamphlet for officers to provide to members of the community who are in need of food, shelter, or mental health support; and a program focused on digital conflict resolution and de-escalation for those who are at risk of violence.

In September, CICS launched an experimental fourth cohort of sixteen MPD fellows at a workshop featuring a conversation between ABLE co-founder Rosa Brooks and MPD Chief of Police Robert Contee. While PfT fellows have traditionally been selected from a pool of officers with 0-3 years of experience, this new cohort has been selected from a pool of officers with 3-8 years of experience, with the goal of providing greater context for their overall participation in the Fellowship.

"What led me here specifically to Georgetown was definitely the Police for Tomorrow program."
Ryan Malo, L'20

"The topics we're dealing with—race and policing, de-escalation, homelessness, the opioid crisis, the adolescent mind…these are the biggest topics in policing right now."
Stephen Benson II, Cohort 2, Executive Office of the Chief of Police

Growth Areas

Alternative First Response

Americans make at least 240 million 911 calls each year, the majority of which involve issues that do not require a police response, such as noise complaints, minor traffic incidents, and mental health crises. Traditionally, police officers across the country have been deployed to respond to these calls and to otherwise deal with the fallout of social problems such as drug addiction and homelessness. Because these officers carry with them firearms and the power to arrest, their unnecessary deployment to these calls increases the risk of needless violence.

The result of this approach has been over-policing and under-protection for those who most need help. One in five fatal police shootings involve mental illness; even in the best case scenarios, police cannot provide the best available care to those in need of treatment. After 50 years, the law-enforcement-centered war on drugs has left us with higher overdose rates than any other peer country. But in the past few years, municipalities across the country have begun to establish alternative first responder programs that utilize peer responders or clinicians, either alone or alongside police officers, to respond to a subset of their calls.

With notable exceptions, these programs are in their infancy, as advocates and local governments experiment with a variety of models. Over the past year, CICS has begun working to understand the challenges faced by these programs and develop solutions, including by working with Georgetown Law's first ABA Legal Education Police Practices Consortium fellow to conduct research into alternative first responders' ability to successfully divert 911 calls and partnering with NYU's Policing Project on their Reimagining Public Safety initiative..

In the next year, CICS plans to hold several events that will help these programs build their collective knowledge base and make productive connections among practitioners across different responder models. We are also exploring ongoing educational partnerships in this area.

Hospital-Based Violence Intervention: Police in the Emergency Room

Victims of interpersonal violence are at an elevated risk for both violent re-injury and violence perpetration. Across the country, hospital-based violence intervention programs (HBVIPs) are emerging as a promising innovation to bring trauma-informed care to these victims and reduce further violence. HBVIPs offer holistic services to provide safety planning, social, legal, and medical services, and trauma-informed care to hospitalized, violently injured patients. One of the cornerstones of HBVIP efficacy is establishing a trusting, therapeutic relationship with participants as soon as they arrive in the hospital. This can be particularly difficult in the chaotic setting of the emergency room where multiple systems of care, including hospital and law enforcement – all of which have a history of implicit and explicit racial biases – interact.

In 2021, the hospital-based violence intervention program at Medstar Washington Hospital Center (CVIP) asked CICS to help it solve a problem that HBVIPs across the country have been facing: patient care and essential provider/patient trust is undermined, often unintentionally, by law enforcement officers in the emergency room. A national survey of trauma care providers found that law enforcement officers in the emergency room sometimes engage in problematic law enforcement behaviors, including intrusion into patient care, questioning without allowing for consent or while incapacitated, overbroad searches and seizures, inappropriate disclosures of protected health information, and inappropriate control of disclosures to family. These interactions with victims and hospital staff can undermine the very goal that law enforcement and medical providers share: community safety.

To solve this problem, CICS and CVIP have entered into a partnership to develop, implement, and evaluate protocols and training for both law enforcement and medical providers to guide their interactions in the emergency department. This partnership has already conducted focus groups of DC Metropolitan Police Department officers and victims of violent crime, and in the next year will complete the policy and training development processes. We expect this work to be supported by both national philanthropic organizations and the District government, which recently passed legislation supporting this work and publicly praised Georgetown for being a thought leader in this cutting-edge field.

"I'd be remiss for not thanking . . . Georgetown for really being thought leaders regarding hospital-based violence intervention programs in the District. There is simply no way we would have gotten to this point without your steadfast commitment to improving the lives of victims and survivors in the District."

Charles Allen, DC Councilmember

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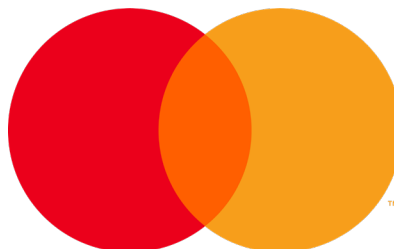**The Center for Innovations in Community Safety is Grateful for the Support of Our Partners**