CITY OFFICIAL & EMPLOYEE INTERVIEWS

The Safety and Health Innovation Through Neighborhood Engagement (SHINE) Study

Margaret Roach, Melanie Mayfield, Tonia Poteat, Lauren Brinkley-Rubinstein

SHINE

Bellwether Collaborative for Health Justice
Department of Population Health Sciences
Duke University

Table of Contents

Executive Summary

This report provides a rapid analysis of findings from an ongoing process evaluation of the Holistic Empathetic Assistance Response Team (HEART) program. The report focuses on facilitators, challenges, and areas for improvement for the HEART program from the perspective of City Officials and City Employees. Semi-structured, one-on-one, qualitative interviews were conducted with n = 7 participants. The sample included participants who were elected to city council (n = 4) and employees in city departments (n=3) representing the City Manager's Office, Neighborhood Improvement Services, and Community Development. Interviews took place between April – June 2024.

Key Facilitators

- **Support from City Officials**: City officials expressed unanimous support for the HEART program, viewing it as a positive addition to public safety and expecting future expansion.
- **Data-Driven Planning:** The program's planning phase was viewed as intentional and thorough, including a year-long preparatory phase utilizing data-driven decisions. This approach built trust among stakeholders and ensured the program's credibility, sustainability, and success.

Key Challenges and Opportunities

- **Scope and Resource Confusion:** Participants emphasized the need for clear communication about HEART's capabilities and limitations. They also discussed challenges related to local resource needs, emphasizing the importance of coordination with other organizations to ensure equitable services.
- **Data Collection and Program Evaluations**: Some officials expressed a need for a better understanding of the program's impacts and outcomes. Participants stressed the need for external, independent evaluations to provide a more objective assessment of HEART's impact on community safety.
- **Funding and Investment:** Challenges related to funding the HEART program were identified. Participants supported expanding HEART but recognized budget constraints and the need for fair investment across all public safety agencies.
- **Political Challenges and Implications**: Perceptions of the HEART program as politically polarizing emerged as a challenge. However, participants identified that HEART has counteracted politicization by framing it as an augmentation of existing services rather than a replacement, and not as a disinvestment from police.

<h1 style="text-align: center;">Facilitators</h1>

City Officials' Perspectives and Support

Overall, city government officials held favorable opinions of the HEART program. One participant stated, "I think there's unanimous support for HEART," and another described the city council's perception of HEART as "mostly positive." Most participants expected a future vote to expand HEART. As one participant explained, "I think in our current structure on council there's probably solid support for it." Another participant expressed a desire to eventually see the expansion of HEART to 24 hours a day citywide.

When asked about the community perspective on HEART, one participant said, "I think it's viewed very positively," mentioning that "the few that have come to testify at public comment have had very good interactions." Another participant explained, "I think the community on the whole really likes it and feels that it's a good way of handling nonviolent offenses and freeing up law enforcement for the more serious issues in the city." One participant described that they perceive that local business owners also appreciated HEART, feeling it provided a more "community-sensitive response."

Participating officials viewed HEART as a "new way of doing public safety." They felt that HEART contributed to public safety by de-escalating situations, providing connections to resources, facilitating crisis intervention, and offering support based on their training as social workers and counselors. One participant noted, "They have expertise in mental health and dealing with mental health crises, expertise that someone trained in law enforcement, fire, and even EMS don't typically have or have quite as in-depth and perhaps also are able to have the institutional knowledge to be able to connect individuals with whatever services are available."

Program Planning, Design, and Implementation

Participating city officials identified the HEART program's planning and implementation phase, marked by intentionality and thorough preparation, as a significant contributor to its credibility, sustainability, and success. One official highlighted the importance of the year-long preparatory phase, stating, "The department was created, envisioned, and debated a full year before [HEART] put a responder on the street. That was very much a reflection of [their] deliberate approach to data analysis and consensus building around how to launch the program."

Support was expressed for data-driven and evidence-based processes and decisions during program design, such as utilizing a three-year 911 call analysis to understand and categorize calls effectively. This scientific approach helped build trust among stakeholders across the political spectrum.

Importantly, the HEART program was designed to complement, rather than compete with, other first responder agencies. Officials emphasized the importance of a "both/and" approach, where investments in community safety were not framed as being in opposition to police funding. HEART is perceived less as an "ideological program" and more as "just a tool in the toolbox."

Participants commended the decision to develop a new city department, the Durham Community Safety Department (DCSD), for HEART, allowing it to operate independently while functioning within the existing emergency response framework. The program's success was also attributed to collaborative efforts and consensus-building that included a wide variety of stakeholders in public safety, health and social services, and local communities and organizations.

A key aspect of HEART's design was the leadership's openness to hearing opinions and addressing skepticism without defensiveness. This approach helped build trust and fostered a collaborative environment where all voices were heard and valued.

The department leadership was also viewed as fostering a supportive culture, described as having a strong team spirit, a supportive environment for staff, and a commitment to their mission.

Challenges and Opportunities

HEART Program Scope and Local Resource Environment

Challenges

Participants discussed several local community challenges related to HEART's current scope and local resource and service needs. One participant mentioned "some level of confusion" about what HEART does, such as whether they are service providers, crisis interventionists, or long-term service providers. There were concerns about "scope creep" and HEART needing to learn "the ropes of being a service provider."

One participant expressed concern about the HEART program creating division among organizations that provided similar services but "can't do the same level of things that HEART can do." The examples given, that may be viewed as out of scope, were buying a neighbor lunch or providing neighbors with tents. It was stated that a neighbor may think, "Well, I'm not going to work with [service or organization] because you can't do this, so I'm only going to work with [HEART]," and that it was important to "work together to ensure that we are kind of working within the same parameters so that people… are getting equitable services."

Participants also identified several local resource and service needs in the Durham community related to violence prevention, housing, employment, youth and family support, street infrastructure, and social and health services. One participant stated, "Obviously, this is the United States of America, and we don't have adequate services across the board." Another participant discussed gaps in the sheltering system, wraparound services, local hospitals, social services, and jail mental health services. One participant felt that "The closest we're getting to social services [in the local community] is HEART" and HEART was identified as an organization that could help to fill current resource and service gaps. Despite this, there were still concerns regarding HEART's capacity to fill the gaps and scope creep.

Opportunities

Participants suggested addressing challenges related to community resource and service needs and defining HEART's scope. Participants described wanting to "better understand what [HEART's] lane is." One participant expressed that they wanted to HEART to be "able to put out a clear and consistent message of, "Here's what we do. Here's how we do it." To alleviate confusion about HEART's services and capabilities one participant mentioned that "it might be helpful to sort of be able to set those parameters and sort of what are the expectations or what are the limits? Where can there be some level of flexibility?"

While HEART began as a "short-term crisis intervention," it has expanded to include ongoing services until they can connect individuals with long-term care providers. While HEART can fill

the intermediate gap between short and long-term service and resource needs, one participant stated that there was a need to think about "how the system can improve." This was "because if we fix the system as opposed to just filling the gap, I think we will be in a much better place as a community to get long-term solutions to [the populations that need them]." Participants envisioned HEART helping to identify resource and service gaps to those better suited to fill them, stating that it was important that HEART does not become "a Band-Aid on other systems that aren't working like they need to."

To address scope creep, participants emphasized the importance of ensuring HEART's operations did not duplicate those of external organizations. This has been accomplished by HEART and other local organizations by coordinating their efforts through weekly meetings, providing access to information systems, and good communication between organization leadership.

Data Collection and Program Evaluations

Challenges

While internal data collection and self-assessment efforts by DCSD were recognized positively, some officials expressed a need for a better understanding of the program's impacts and outcomes. One participant felt the HEART program "has yet to be really scrutinized." A few of the participating city officials expressed a need for a better understanding of the program's impacts and outcomes, with some officials admitting, "I need a better understanding," or "I don't know" when asked questions about the HEART program.

Opportunities

Officials stressed the need for external, independent evaluations to provide a more objective assessment of HEART's impact on community safety. They expect that this will assist their future decision-making about the HEART program: "What are they doing well? What do they need to improve on so that they can provide that for us to provide support for them through policy? Because policy is what drives the budget." Participants also desired more qualitative data to capture a broader range of voices and experiences with the HEART program.

Funding and Investment Challenges

Challenges

Participants identified several challenges related to funding and investments into the HEART program. Participants noted the pay crisis, the difficulties in ensuring all first responders are aid adequately, and the expense of expanding the HEART program. As one participant explained, "I mean we know that our police recruits especially are 17% under market. We can't have people

who carry guns in our community not being paid well." Participants wanted to ensure investments went into all parts of community safety rather than just one agency.

There were also differing opinions about whether funding, resources, and staffing for the HEART program should be shifted away from other first response agencies. One official stated, "I don't wanna frame our investments in community safety as HEART versus police." Another said, "I think a lot of police departments would feel threatened, that okay, their budgets may decrease over time." Participants wanted to ensure that investments went into "all these different parts of community safety" rather than just one agency.

Opportunities

Providing competitive and fair pay across public safety agencies was identified as a critical need. Participants supported expanding the HEART program, with some favoring a 24-hour expansion. Others recognized budget constraints and suggested expanding one HEART team to 24 hours. Participants also expressed support for future programs in the DCSD, such as the Office of Survivor Care.

Political Challenges and Implications

Challenges

The politicization of the HEART program emerged as a challenge, with politics being described as "one of the biggest drivers and then one of the biggest threats to this work." Some participating officials noted that after the initial council that voted for HEART, subsequent councils were less supportive, even voicing concerns that it would be "very easy for a different elected body to undo [the program]." The HEART program's association with progressive politics created tensions and divisions in City Council: "And there was a little bit of a backlash [in city council] to the hyper-progressivism that created HEART. There was a group on Council that [felt] HEART was a threat to traditional law enforcement… And that this was a resource fight. And that HEART was emblematic of a disinvestment of police."

Opportunities

Despite these challenges, participants identified that HEART has counteracted politicization by framing it as an augmentation of existing services rather than a replacement, and not as a disinvestment from police. Additionally, HEART recognizing and appreciating the work of other first responders was seen as crucial in gaining their support and fostering a collaborative environment. A key opportunity to counteract the possible politicization of HEART is to provide program evaluation that clearly shows HEART's impact on public safety and health outcomes in the long and short term.