

Public Health and Safety

<p>Are there plans to increase social services staffing to help de-escalate situations where police may have been called, but are not the right responders to the situation?</p>	<p>The City is currently piloting the Crisis Assistance Response and Engagement (CARE) program to embed mental health professionals into the City's emergency response infrastructure. CARE includes two multidisciplinary response teams comprised of a CDPH Mental Health Clinician, CPD CIT Officer, and CFD Community Paramedic, and one alternate response team comprised of a Mental Health Clinician and Community Paramedic. The teams work in ten community areas citywide and have responded to over 350 911 calls with a mental health component since program launch in September 2021, conducting an additional 300 follow-ups over the phone or in-person with individuals after the initial crisis. The CARE Program also embeds a CDPH Mental Health Clinician in the 911 call center to enhance the City's ability to respond appropriately to 911 calls with a mental health component. This winter, CARE will expand to include a fourth alternate response team focused on substance use-related crises.</p> <p>The City also operates the Narcotics Arrest Diversion Program (NADP), a partnership between the Chicago Police Department, Chicago Department of Public Health, and community substance use treatment provider Thresholds. NADP offers treatment instead of criminal charges for individuals arrested for possession of illegal substances. Since program launch in 2018, NADP has diverted over 900 people, 80% of whom start treatment. Those diverted are 44% less likely to be re-arrested in the future, indicating that the program can support successful connection to appropriate care and interrupt cyclical utilization of public safety resources. In 2023, the Chicago Department of Public Health will launch a 60-bed stabilization housing pilot program for high utilizers of emergency medical and public safety systems with complex behavioral health needs, and a sobering center focused on providing an alternative to jail or emergency rooms for people with alcohol use disorder. Both programs will seek to provide evidence-based health services to prevent behavioral health crises and connect individuals to ongoing community-based care.</p>
<p>Will we look at deconcentrating polluters in POC neighborhoods as part of this plan?</p>	<p>The Mayor's Office Sustainability team, the Chicago Health Department, and the Environmental Equity Working Group (an advisory body coordinated by the Chief Sustainability Officer's team), are beginning a community co-designed process to run a cumulative impact study and move toward a cumulative impacts ordinance.</p>
<p>Does the plan address immigrants and how they are victimized and exploited by employers and landlords?</p>	<p>Several objectives and policy ideas mention Chicago's immigrant populations, including Civic & Community Engagement, Housing & Neighborhoods, Lifelong Learning, and Public Health & Safety. You can review all the goals, objectives, and policies here: https://www.chicago.gov/content/dam/city/depts/dcd/we_will/WWC_PolicyIdeas_071422.pdf</p>

<p>What is the status of talks between HUD and the City about the concentration of pollution in the South and West side? Will the City be transparent about the negotiations regarding settling the complaint?</p>	<p>The Mayor's Office and Department of Planning and Development take the HUD findings seriously and are working on a response. The City's response will be communicated by the Mayor's Office when available.</p>
<p>Do any of the panelists have an analysis of how the history of redlining might disrupt the programs they are having success with in other places?</p>	<p>The panelists acknowledge and understand the legacy of discriminatory policies and the specific racial context of the US and Chicago, and how it differs from international peers. The panelists also understand that historical patterns of discrimination in investment and development have led to concentrations of disinvestment in certain neighborhoods and areas of the city, which may make it more challenging for programs to be impactful and sustainable. The City's framework of Health Equity in All Policies is working to ensure that this consideration is given to all policy and program work conducted by City agencies, so that capacity can be properly deployed to respond to residents needs and to address practices that would lead to this uneven programmatic success.</p>
<p>Does the City have a strategy for keeping people of color from going to jail?</p>	<p>The City recognizes that exposure to the criminal legal system is a social determinant of health that creates trauma for the individual as well as their community and can potentially have long term economic and chronic health impacts. The Public Health & Safety and Civic & Community Engagement pillars includes policy ideas related to residents returning from the criminal justice system. Please provide additional feedback via the surveys: www.wewillchicago.com/surveys</p>