



The pandemic, protests, and social innovation: How can we maintain our progress?

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The COVID-19 pandemic has brought transformational change to many of our lives and exposed gaps and cracks in our communities' social safety nets. Similarly, the concurrent protests and social unrest in response to police violence and systemic racism, coalescing most notably around the murder of George Floyd in May 2020, have raised public consciousness and sparked substantial reform efforts intended to rectify social inequities. As our communities start to return to some semblance of "normal" after being rocked by these overlapping crises, what changes will endure? And what can we as citizens do to ensure that the lessons learned from the pandemic and the exposure of systemic injustices over the past year and a half are not forgotten?

The pandemic has wreaked havoc on many people's mental health, and the twin catalysts of COVID-19 and highly visible police violence have led many cities to explore alternative models for responding to mental health crisis calls. In Canada, the high-profile deaths of D'Andre Campbell, Ejaz Choudry, Rodney Levi, Chantel Moore, and Regis Korchinski-Paquet during police interactions led many cities, including Toronto, to begin designing a framework for a community responder model, in which civilian mental health workers replace police officers as first responders to many mental health crisis calls. Many American cities, including Denver, San Francisco, Rochester, Portland, Albuquerque, New York City, and Anchorage, have launched similar community responder programs since June 2020. Dozens more are in the process of building these teams, with plans for launch in late 2021 or 2022. Many of these teams are modelled on the longstanding CAHOOTS program in Eugene, Oregon, which has been sending civilian crisis workers instead of police to respond to crisis calls through the 911 system for over thirty years.

Community responder models are one example of transformational reform that emerged during the pandemic and will likely continue beyond it. However, the problem of stigma continues to hamper the success of community responder programs and similar systemic innovations. For example, the public often mis-perceives people in crisis as being dangerous or violent. My organization, the Reach Out Response Network, is an advocacy-focused non-profit organization supporting

the City of Toronto in developing and disseminating information about our civilian-led crisis-response pilots that will be launching in early 2022. The most common question we get from the public is, "Aren't crisis calls dangerous? If police aren't on the scene, won't civilian workers get hurt?" Our organization has collected substantial data to answer this question, and we've found that no existing community responder model has ever had a serious injury or death of a staff member, service user, or third party. We've also found from 911 call data that fewer than 20% of mental health-related 911 calls have *any* risk of violence or weapons associated with them, and that the vast majority of these are non-violent and could be resolved by a team of civilian mental health experts without police intervention. However, the stigma falsely linking "mental health crisis" and "violence" has been hard to break.

Similar stigma continues to obstruct even the most promising systemic reforms. While the COVID-19 pandemic gave many a sense that we are "all in this together," the reality is that the most vulnerable in our communities (Black and Indigenous communities, individuals experiencing houselessness, and individuals living in poverty) continue to be the hardest hit and most heavily impacted. This current issue of the *Journal of Community Safety and Well-Being*, 6(3), explores the stigma and oppressions that can act as barriers to innovations to aid our most vulnerable, as well as potential solutions. The issue highlights several types of policing reform strategies and creative alternatives to policing, including introducing a training program called *Proactive Alliance* that integrates principles of counselling psychology to create more effective community-oriented policing. However, the innovations described in this issue, encouraging as they are, are only made possible by policy makers, community leaders, and ordinary citizens continuing to care about and advocate for the needs of the most vulnerable in our communities.

While the pandemic and protests merged to expose the gaps within our systems, as these catalysts recede, the onus will shift to all of us to ensure that the lessons we've learned and the changes on the horizon are implemented and maintained. It is up to each of us to stay informed on the challenges and gaps within our systems, and to advocate

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strongly for reforms to ensure that those in need get the care they deserve. The legacy of this past year and a half may well be longstanding changes to our social services to better serve the most vulnerable—but it's up to us to make it so.

CONFLICT OF INTEREST DISCLOSURES

The author has no conflicts of interest to declare.

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