







July 20, 2020

By Electronic Mail and First Class Mail

Mayor Bernard C. "Jack" Young Office of the Mayor 250 City Hall, 100 North Holliday Street Baltimore, Maryland 20202

Commissioner Michael S. Harrison Baltimore Police Department 601 East Fayette Street Baltimore, Maryland 21202 Crista M. Taylor, LCSW-C President and CEO Behavioral Health System Baltimore 100 South Charles Street Tower II, 8th Floor Baltimore, Maryland 21201

Marilyn J. Mosby Baltimore City State's Attorney Office of the State's Attorney 120 East Baltimore Street Baltimore, Maryland 21202

RE: Demand for Urgent Action Following Police Shooting of Ricky Walker, Jr.

Dear Mayor Young, Commissioner Harrison, Ms. Taylor, and Ms. Mosby:

The undersigned write following the July 1, 2020, shooting of Mr. Ricky Walker, Jr., a Black Baltimore resident experiencing a behavioral health crisis, by one or more Baltimore (City) Police Department (BCPD) officers.

In the publically released 9-1-1 call and body worn camera video captured by responding officers (available <u>here</u>), it appears the family of Mr. Walker called 9-1-1 seeking help regarding Mr. Walker's behavior. The video shows Mr. Walker in the basement of the family's home, with only one way in or out. Upon the BCPD officers' arrival, a family member leaves the basement and over the next 10 minutes police surround Mr. Walker and display handcuffs, apparently to take Mr. Walker into custody. As of the BCPD's July 9, 2020, press conference, Mr. Walker remained hospitalized

with injuries from the shooting. During his hospitalization, Baltimore's State's Attorney announced criminal charges against Mr. Walker.

This is another tragedy in a long history of BCPD interactions with people of color and people with disabilities – all too often Black Baltimoreans with disabilities – ending in harm to members of the community BCPD officers are sworn to protect.

Mr. Walker's shooting is yet another example of multiple failures in Baltimore's public health and safety systems. The BCPD is all too often Baltimore City's *de facto* behavioral health crisis response service. **This is inappropriate and must stop.** The City's reliance on the BCPD to perform first-responder functions that should not be performed by law enforcement too often violates the civil rights of Baltimore residents. This does not advance efforts to rebuild community trust in the BCPD.

On the other hand, the Baltimore behavioral health system's failure to effectively engage individuals like Mr. Walker in supportive community-based services and failure to provide "24/7" crisis response services rooted in and responsive to Baltimore communities leave Baltimore residents with no other option but to call 9-1-1 seeking BCPD intervention in moments of crisis.

The community knows what needs to be done to address these critical issues. Since 2017, our organizations have been involved with implementation of the Consent Decree in *United States v. Baltimore City Police Department, et al.*, containing agreed-upon reforms following the U.S. Department of Justice's findings of widespread civil rights violations by the BCPD and the City of Baltimore. Among other things, with community input in 2019 the parties to the Consent Decree conducted a "gaps analysis" of Baltimore's behavioral health system, including recommendations for expanding and improving the system's alternatives to unnecessary and inappropriate BCPD interactions with residents experiencing behavioral health crises.

Unfortunately, nearly all of these recommendations, which many of our organizations have endorsed, have not yet been implemented. Continued failures by the City of Baltimore to implement these expert recommendations, endorsed by the community, will only serve to defeat the Decree's requirement that BCPD provide "the least police-involved response possible consistent with public safety."¹ The grievous harms to Baltimore residents like Mr. Walker will continue.

We demand that the following actions be taken *immediately* to prevent future tragedies like Mr. Walker's:

¹ United States v. Baltimore City Police Department, et al, (D.Md. Case No. 1:17-cv-00099 JKB), para. 98.

- Baltimore City's 9-1-1 call center and the BCPD must be able to connect to and dispatch behavioral health system resources, including non-BCPD mobile crisis response teams available 24/7, who can employ effective de-escalation strategies onsite and divert individuals in crisis from involvement with the BCPD. Mobile response teams must be prepared to travel to crises taking place in any neighborhood in Baltimore, and to arrive on scene as quickly as BCPD officers would.
- 2) Baltimore must implement a fully-functional crisis response system, including non-BCPD 24/7 mobile crisis teams but also peer support services, walk-in crisis stabilization centers for individuals seeking immediate help, crisis respite beds and apartments for individuals with disabilities and their family members, and linkages to community-based services and supports, including housing services as needed.
- 3) The Baltimore City State's Attorney and the BCPD must end the prosecution and the criminalization of Baltimoreans experiencing behavioral health crises. The criminalization of disability in Baltimore fills Maryland's jails and prisons with people with disabilities, all too often Black residents of Baltimore with disabilities, every single day. A prison or a jail is no place to be for a person with a behavioral health disability, and yet is too often the destination after contact with the BCPD.
- 4) The BCPD must train all of its officers on effective de-escalation strategies, including creating space, making use of physical barriers, and "waiting out" situations presenting an imminent risk of serious harm, as detailed in active BCPD de-escalation policies, and these strategies must be consistently employed when police are asked to respond to people experiencing behavioral health crises.

These actions must begin **now**, or must be accelerated, to prevent further BCPDinvolved shootings of people of color and people with disabilities in Baltimore. Our city must provide a public safety and public health response to behavioral health crises that reimagines justice for these members of our communities.

Sincerely,

/s/ David Rocah Senior Staff Attorney American Civil Liberties Union of Maryland

/s/ Jennifer Mathis Director of Policy and Legal Advocacy Bazelon Center for Mental Health Law

/s/ David Prater Managing Attorney Disability Rights Maryland

/s/

Monique Dixon Director of State Advocacy/Deputy Director of Policy NAACP Legal Defense and Educational Fund, Inc.

cc: BPD Monitoring Team C/o Kenneth Thompson Venable LLP 750 East Pratt Street, Suite 900 Baltimore, Maryland 21202