

The right — and wrong — way for authorities to respond to a mental health crisis



Regarding the Oct. 18 front-page article “[Fatal cases show peril of policing mentally ill](#)”:

The New York Police Department implemented Crisis Intervention Team (CIT) training over a five-year period (training [15,000 officers](#) from 2015 to 2020), but the number of individuals experiencing a mental health crisis killed by police during that period more than doubled: Sixteen people were killed, up from seven during the prior seven years. Our experience differs from the data cited by The Post: All but two of those killed in New York City were people of color.

Forty hours of CIT training can’t compete with the hundreds of hours of firearms and tactical training officers receive and a command-and-control law enforcement culture. Correct Crisis Intervention Today NYC

is urging the city to invest in a model that would pair emergency medical responders with trained peers with lived experience, removing this responsibility from the police and shifting it to those with the skills and mind-set to connect with people in crisis and keep them from harm.

The city has not heeded our recommendations. Meanwhile, the NYPD halted its CIT program, [citing the pandemic](#). The outlook for people experiencing mental health crises in this large area is not good.

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