

# Ann Arbor Unarmed Crisis Response Community Survey

## Introduction

As directed in [Resolution R-21-129](#), the City of Ann Arbor is tasked with exploring opportunities for an unarmed response to public safety calls in the city. The City of Ann Arbor has asked Public Sector Consultants (PSC), a Lansing-based, nonpartisan research and consulting public policy firm, to help gather input from community members about how to develop and implement this program. As a part of this process, PSC is conducting a community survey on the goals, design, and implementation of an unarmed response program.

The survey should take less than 10 minutes. Your responses are confidential and will only be used to inform program development. Only aggregated responses will be publicly available.

For more information, please read the City's [Interim Report on Unarmed Police Response](#), prepared by city administration in December 2021.

Please mail or return this survey to the **Ann Arbor City Clerk's office** (second floor) at **301 East Huron Street, Ann Arbor, MI 48104**, by **4pm on Friday, November 4, 2022** so that your responses may be recorded.

## Survey Questions

1. Please read each statement and select how strongly you agree or disagree with the statement.

|  | Strongly Agree           | Agree                    | Disagree                 | Strongly Disagree        |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| A. I support creating an unarmed crisis response team for Ann Arbor.                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. The unarmed crisis response team will benefit my community.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Having access to an unarmed crisis response team will make my community safer                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. In a nonviolent or non-life-threatening situation, I would call the unarmed crisis response team.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. The unarmed crisis response program should be funded through a new tax assessment.                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. The unarmed crisis response program should be funded through a reallocation of existing city funds. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please answer the following questions.

2. Rank the following list of potential goals for an unarmed crisis response program from most to least important. Number the potential goals from 1 to 7, with a 1 as most important and a 7 as least important.

- Diverting individuals from the criminal justice system
- Ensuring better outcomes for individuals in crisis
- Providing access to nonmedical care and resources
- Building a more trusting relationship between social service recipients and the agencies that serve them
- Focusing the police on more appropriate criminal justice activities
- Decreasing opportunities for harmful interactions with the police
- Other, please describe: \_\_\_\_\_

3. What services or needs would be most important for an unarmed crisis response program to address? Select **up to four**.

- |   |  |
|---|--|
| <input type="checkbox"/> Mental health crisis   | <input type="checkbox"/> Transportation for nonemergency services (for example, doctor appointments, grocery shopping) |
| <input type="checkbox"/> Suicide prevention, assessment, and intervention                 | <input type="checkbox"/> Social service referrals and resource connections   |
| <input type="checkbox"/> Connection to grief and loss counseling                          | <input type="checkbox"/> First aid for nonemergency medical needs  |
| <input type="checkbox"/> Homelessness assistance  | <input type="checkbox"/> Wellness checks   |
| <input type="checkbox"/> Housing crisis   | <input type="checkbox"/> Other, please describe:   |
| <input type="checkbox"/> Assistance for individuals who are intoxicated or have overdosed | _____  |
| <input type="checkbox"/> Minor acts of juvenile delinquency                               | _____  |
| <input type="checkbox"/> Non-domestic-violence dispute resolution                         |  |
| <input type="checkbox"/> Medical transport  |  |

4. How would you prefer to access the unarmed crisis response team? Select **one**.

- A new, standalone phone number
- 9-8-8, a new country-wide mental health crisis line
- 734-544-3050, Washtenaw County Community Mental Health's crisis line
- 211, a source of information about local resources and services
- 911
- Other, please describe: \_\_\_\_\_

5. Who do you prefer runs the program?

|  | Do not want              | Unsure                   | Acceptable               | Prefer                   |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| A nonprofit organization contracting with the City                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A nonprofit organization that is financially and operationally independent from the City | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| An existing city department that is not the police department                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A newly created city department  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other, please describe:<br>_____   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

6. What other feedback or ideas would you like to provide for consideration? Please write clearly.

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## Demographic Questions (Optional)

Thank you for participating with the City of Ann Arbor. The city is trying to gain a better understanding of who we are reaching to find ways we can continuously improve public engagement efforts and support inclusivity. To help us gain this understanding, please complete the following demographic questions. This portion of the survey is completely voluntary; you are not required to fill it out.

1. Do you live in Ann Arbor?

Yes       No

2. Do you work in Ann Arbor?

Yes       No

3. What is your age?

- |  |   |
|--|---|
| <input type="checkbox"/> Under 15 years of age | <input type="checkbox"/> 40–49 years          |
| <input type="checkbox"/> 15 to 17 years        | <input type="checkbox"/> 50–59 years          |
| <input type="checkbox"/> 18–19 years           | <input type="checkbox"/> 60–69 years          |
| <input type="checkbox"/> 20–29 years           | <input type="checkbox"/> 70 years or older    |
| <input type="checkbox"/> 30–39 years           | <input type="checkbox"/> Prefer not to answer |

4. Which identifiers would you use to describe yourself? Select **all** that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Korean                                    |
| <input type="checkbox"/> Asian                            | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> Asian Indian                     | <input type="checkbox"/> Samoan                                    |
| <input type="checkbox"/> Black or African American        | <input type="checkbox"/> White                                     |
| <input type="checkbox"/> Chamorro                         | <input type="checkbox"/> Middle Eastern or North African           |
| <input type="checkbox"/> Chinese                          | <input type="checkbox"/> Hispanic or Latinx                        |
| <input type="checkbox"/> Filipino                         | <input type="checkbox"/> Some other race (please describe):        |
| <input type="checkbox"/> Japanese                         | _____  |

5. What is your gender identity?

- |   |  |
|---|--|
| <input type="checkbox"/> Woman/girl             | <input type="checkbox"/> Transgender man/boy                 |
| <input type="checkbox"/> Man/boy                | <input type="checkbox"/> Gender non-conforming or non-binary |
| <input type="checkbox"/> Transgender woman/girl | <input type="checkbox"/> Prefer to self-describe: _____      |

6. How do you identify your sexual orientation? Select **all** that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Asexual                      | <input type="checkbox"/> Queer                            |
| <input type="checkbox"/> Bisexual                     | <input type="checkbox"/> Same-gender loving               |
| <input type="checkbox"/> Heterosexual or straight     | <input type="checkbox"/> Other, please describe:<br>_____ |
| <input type="checkbox"/> Homosexual or lesbian or gay |   |
| <input type="checkbox"/> Pansexual                    |   |

7. Which best describes your household income last year?

- |  |  |
|--|--|
| <input type="checkbox"/> Less than \$24,999  | <input type="checkbox"/> \$75,000 - \$99,999   |
| <input type="checkbox"/> \$25,000 - \$34,999 | <input type="checkbox"/> \$100,000 - \$149,999 |
| <input type="checkbox"/> \$35,000 - \$49,999 | <input type="checkbox"/> \$150,000 - \$199,999 |
| <input type="checkbox"/> \$50,000 - \$74,999 | <input type="checkbox"/> \$200,000 or more     |

8. Do you own or rent your primary residence?

- Rent
- Own
- Other, please describe \_\_\_\_\_

9. Please describe your history with the criminal justice system. Select **all** that apply.

- I have personally had no substantial interaction with the criminal justice system.
- I have received a civil or misdemeanor citation (for example, parking tickets, speeding tickets).
- I have been arrested.
- I have been tried or convicted of a crime.
- I have been incarcerated.
- I have had what I consider to be an inappropriate or abusive interaction with a responding police officer.
- I have been the victim of a crime and have interacted with the justice system (e.g., police, courts) in relation to that crime.
- I prefer not to answer.