

Date range: 8/5/2021-5/30/2022



**DC Peace Team
Community Safety Unit: Data Sheet
Columbia Heights Civic Plaza**

Qualitative and Quantitative Description

Objectives of the CSU project:

Generally the purpose of the CSU project is to offer alternative community protection mechanisms in light of existing tensions and potential for ongoing conflict. More specifically the objectives include:

1. Improve community relations and imagination around public safety
2. Prevent violence and destructive conflict through nonviolent responses
3. Offer a channel to enhance access to needed resources for those in the Plaza and contribute to the Plaza becoming a more accessible and enjoyable place for all community members

Quantitative Data:

De-escalations: 73 (included 4 knife incidents)
Interventions to prevent arrests or de-escalate police/security: 12
Empathy Connections: 250 (began counting in May)
Number of CSU team members over project: 25 (12 Spanish speakers)
Number of hours deployed: 461
Thrive DC pamphlets distributed: 175

Sample Stories of Struggle and Deep Empathy:

“X broke down in tears describing the pain in his legs from knife wounds. These occurred when he was hanging with a few guys in an apartment and was suddenly attacked as part of a gang initiation that he didn’t know was occurring.”

“X was sad about a broken relationship with his partner. He even shed some tears when talking with [CSU member].”

“X says he regrets ‘falling into his vices.’ X was extremely emotional and it got to the point of him sobbing while telling us about how he has fallen into addiction. He also said he has 10 children who live here, but he is in the streets because of his addictions and I believe he does not have contact with his children. Y was also crying with him and saying how much he relates to him. How events in life triggered their addictions and how hard it has been for them.”

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“After protecting X from getting into a fight multiple times, we offered to walk X elsewhere and he showed us his house with his brother around the corner on Kenyon St. At the end of the night X offered a hug of gratitude after a long day of struggle with another group member who was trying to fight him.”

Examples of de-escalation:

Knife incident: Two residents got into the plaza circle with fists up and started going in a circle. CSU member worked on “x” since he spoke some English, asking him to take a

breath, saying someone was going to get hurt. Then a CSU member noticed “y” pulled out a knife and started brandishing it toward “x”. A CSU member quickened my words with “x”, saying let’s walk down here, we would get him some food, he’s better than this, he’s valuable while starting to gently move him with my hands and arms to take some steps back slowly. Another CSU member returned and started to help converse with him. We got him to cross the street to the Trivoli building. After he calmed down a bit, he started to cry about the pain, meanness, and violence. He spoke about Ukraine and seemed to say he knew people there. He asked why wasn’t anyone helping. I tried to acknowledge the pain and struggle while affirming that some were trying to help. Soon he was thanking us for helping him as tears continued to roll. He shared about his 1-2 yr. old boy and showed us pictures as we affirmed him as a father and how his boy loved him and would want him to be safe.

Knife incident: Walking back toward the ambulance a CSU member heard some yelling across the street, right outside the Giant. CSU members ran over, arriving right as a resident (“x”) pushed another man (“y”). The man was very confused and asked repeatedly “who is this guy?.” At this point CSU member noticed that “x” with mental health challenges had a knife out. He continued to yell at the man. CSU members put themselves between the two men. CSU member told the “y” without the knife to move away. CSU member grabbed the y’s backpack which was thrown and brought it to where he could easily reach it. “Y” grabbed his backpack as well as a brick. CSU members maintained their place between “x” and the man, who began threatening to use the brick on Muhammed. CSU member continued to implore “Y” to leave the area. “Y” walked backwards around the corner as we escorted him. CSU member eventually told the man to cross the street and he complied. As “Y” created more distance, “x” did not follow him.

Knife incident: A resident “x” was brandishing a knife towards another resident “y”. A CSU member slowly approached and held up their hands and said repeatedly in Spanish “It’s not worth it.” This distracted one of the parties for a bit. Then “x” and “y” continued yelling at each other and from time to time “x” with the knife would approach and brandish it and CSU member

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would try the same tactic of approaching with hands up and saying “It’s not worth it.” CSU member convinced “y” and another resident who was escalating the situation to cross to the Plaza side with the CSU member and this effectively de-escalated the conflict.

“[CSU members] were involved in interventions to prevent a fistfight. Tactics used included distraction through dialogue about the issue or about other topics, splitting our attention to each party, interposition with moving hands and even clapping at times to get one party’s attention, occasional dancing, occasional distractions by pointing elsewhere, and creating distance by walking a party away”

“I saw X shove Y hard onto the ground. He was angry and defensive and kept calling her names and wanted to go after her. We physically blocked him a couple of times. After he saw Y break a bottle, X began striding over to her to fight again, and we were able to distract him. We made enough space for his friend Z to talk him down a couple of times. Things that worked: physically blocking him with our bodies, pulling him back by his shoulder, distracting him, talking with him about using respectful language because respect is important to him personally.”

“X (security guard at the X Building) was trying to get a man to get up off the ground and was yanking his blanket from him. [CSU member] crossed the street. [CSU member] spoke with the man to see if he could get up and asked if he wanted to walk back to the plaza side; he said yes. This man had staples/stitches in his scalp, a problem with his left eye... and seemed out of sorts and in distress. Other men standing by looked concerned but did not step in...Eventually, [CSU members] walked the man back to the plaza side, where he sat down leaning back against a tree”

“X was extremely intoxicated and he was having trouble respecting people’s personal space...He was bothering some women who were just trying to enjoy the music, so I physically guided him away from them. He seemed interested in a family with a young daughter and I guided him away from them as well. I occasionally got him to sit down but he was very animated.”

“The guard pulled out his baton stick not using any noticeable de-escalation other than ignoring him and then telling him to back off. He also soon called for backup. [CSU members] walked closer for visibility. As X turned we would wave him over and we got his attention. He wandered a bit and then started talking to us...We tried to keep him distracted and he shared about recent injuries including a broken nose which was also visible. He turned back to the police since he wasn’t happy with how they were treating him. A second officer had shown up also just telling him to back off...We asked if he wanted some water. He said yes and he wanted to report the police. So we looked up the number for him and asked him to walk to the plaza with us to try and call, and so we could create more space between the parties. He agreed. We got him to sit down looking away from the Trivoli building. The number wasn’t working on the weekends so we wrote it down for him and engaged in small talk for a while...We eventually took him to the local CVS to get his Ibuprofen. He was very grateful and we departed with hugs.”

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Direct instances of connecting folks with community resources:

Examples

“X was looking for help. Wanted to try and not drink today. Was interested in resources but said they often made him pay or refused him due to lack of legal documentation. Got his brother’s number who he lives with and will try to see what service options for detox, etc. might be available.”

“[CSU Member] also talked with some local business owners who experience challenges when people from the plaza come into their stores and ask customers for money, it drives away business and they need to earn a living and keep their stores safe, and they tend to see calling the police as their only option even if they prefer not to. She talked with them about contacting DCPT team members as a non-police alternative when that happens.”

“I talked with X who said he had been punched in his right eye last Sunday on 14th Street. He said he could not see out of his eye and he was having a lot of pain. After discussing various options, he agreed to go to the Upper Cardozo Health Center two blocks away. [CSU Members] accompanied him there, but by the time we got there, they were not accepting any more walk-ins (they close at 9 pm M-F). I agreed to accompany him there tomorrow morning, meeting him at 10 am at the plaza.”

“X was connected to Miriam’s Kitchen for housing assistance.”

Individuals Transforming:

1. “A” explained that he got a chef job and his eye is all healed after a couple weeks ago he almost got into a fight and was quite drunk.
2. “B” was gone for about 2-3 weeks in de-tox, reconnected with her local siblings
3. “C”: was drunk and laid out multiple weekends in Aug.; cleaned up and sober multiple weekends after that; haven’t seen him in the plaza for a month.
4. “D” got a regular job and continues to stop by and help others
5. “E” was present early in August; younger; haven’t seen since
6. “F” is now working, had fresh clothes on, and even treated her to a meal.
7. “G” Got an apartment.
8. “H” got job, health insurance, hotel
9. “I” sober since May 15th and not back at plaza. Working during the week.
10. At least 4 people entered a 28 day treatment program at Federal City, one recently graduated and in an outpatient program via our on the ground partner District Bridges.
11. Escorted 2 persons to a de-tox at Regional Addiction Prevention.

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