

1 City of Keene
2 New Hampshire

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4
5 AD HOC RACIAL JUSTICE AND COMMUNITY SAFETY COMMITTEE
6 MEETING MINUTES
7

8 **Thursday, September 24,
2020**

4:45 PM

Remotely via Zoom

Members Present:

Richard Van Wickler, Co-Chair
Dr. Dottie Morris, Co-Chair
Pierre Morton
Gail Somers
Julia Atkins
Eli Rivera

Staff Present:

Rebecca Landry, IT Director
Shane Maxfield, Police Lieutenant

Members Not Present:

Aditi Saleh
Tia Hockett
Catherine Workman, Councilor
Stacey Massiah

9
10 Rebecca Landry read a prepared statement explaining how the Emergency Order #12, pursuant
11 to Executive Order #2020-04 issued by the Governor of New Hampshire, waives certain
12 provisions of RSA 91-A (which regulates the operation of public body meetings) during the
13 declared COVID-19 State of Emergency. The meeting was called to order at 4:53 PM. Roll call
14 was conducted.
15

16 **1) Minutes from Last Meeting**

17
18 Ms. Atkins made a motion to approve the meeting minutes of September 3, 2020. Mr. Morton
19 seconded the motion, which passed by unanimous vote.
20

21 **2) Veteran and First Responder Healthcare Presentation**

22
23 Co-Chair Morris welcomed Sheena Bice and invited her to give her presentation.
24

25 Ms. Bice introduced herself and stated that she oversees Clinical Operations for Veteran and
26 First Responder Healthcare (VFR). She continued that every staff member is a Veteran, service

Meeting Minutes

27 member, first responder, or family member of a Veteran, service member, or first responder.
28 That is what makes the company unique and focused. She shared background information of the
29 company, started by Erik Golnick (CEO) and Eric Frieman, when the two of them struggled to
30 find good quality, culturally competent providers for Veterans and first responders and decided
31 to start their own agency. They opened in NH in 2017 and have facilities in three other states,
32 soon to be four.

33
34 Ms. Bice stated that first responders have had repeated exposure to high-risk situations that place
35 them in harm's way, on a regular basis – that is the nature of the job. They have training in how
36 to navigate, mitigate, and manage risk, but even so, they are still susceptible to a stress response.
37 First responders are trained to be and used to being the protectors, and do not often reach out for
38 help on their own. They act as enforcers, counselors, resources, functional support individuals,
39 and so on and so forth, and need to be healthy themselves. First responders have mental health
40 needs, due to the day-to-day crises and chaos, adrenaline rushes and adrenaline dumps; it all
41 takes a toll. That all impacts mental and physical health. There are conflicting demands between
42 work and family, due partially to working overtime and having non-traditional hours that cause
43 them to miss family events and holidays, which can lead to family stress. First responders often
44 feel isolated and misunderstood, and only connected with each other. Sometimes there are
45 staffing shortages and people work overtime and do not get enough sleep, overuse caffeine and
46 stimulants, etc. Stress elevates and arouses, which can help a person focus at work if the stress is
47 a small amount, but when it is chronic, it makes it harder to stay focused and increases irritability
48 and hinders relationships. Stress affects the nervous system, immune system, cardiovascular
49 system, and can increase or worsen anxiety and depression. Chronic, unmanaged stress can lead
50 to PTSD-like symptoms. The goal is to avoid that by making sure first responders get the
51 support they need. One way to do that is in the Academy, by increasing the education and
52 decreasing the stigma around getting help and addressing emotional wellness. That would have
53 an impact on an overall cultural shift.

54
55 Ms. Bice asked if anyone had questions or comments yet. Mr. Morton thanked her and stated
56 that he does have some questions. He continued that a person may have a ton of training, but if
57 stress gets high, it seems that there would be value in having a well-rehearsed and practiced plan
58 for how to deal with it. He asked if Ms. Bice could talk about some of the services that are
59 available to first responders, specifically police officers, and whether they are free or part of a
60 program. Lastly, he would like to hear about what stress actually does to first responders and
61 their ability to perform their jobs, especially when they are constantly involved in critical and
62 emergency or urgent situations.

63
64 Ms. Bice stated that regarding stress management training, VFR wants to have that in the
65 Academy, and also provide interim training throughout a person's career. Training includes
66 what the physical responses to stress are, as well as the emotional, behavioral, and cognitive
67 reactions. Officer Wellness Programs address this. Stress responses can include flashbacks,
68 nightmares, difficulty relaxing, difficulty falling asleep, and muscle tension, especially for law
69 enforcement. Your body tensing up is a natural part of assessing a situation's risk/ramping up to

Meeting Minutes

70 respond. Hopefully your body relaxes once the crisis is over, but how often can your body go
71 through that cycle before you have an injury? Running and jumping can lead to injuries/chronic
72 pain, headaches, lack of sleep, etc., which can be problematic especially when combined with
73 overtime and not enough breaks and not using one's vacation time. Fear, anxiety, and irritability
74 are common emotional responses to stress – every day there is the possibility of a serious
75 incident, which is traumatic. People in law enforcement are exposed to chronic and cumulative
76 trauma. Just putting on the badge, in this political climate, is hard, because you do not know
77 what you will be faced with. To some people at some times, law enforcement officers are
78 “heroes,” and to others at other times, they are “monsters,” and it can feel like betrayal.
79 Disenfranchisement leads to burnout, compassion fatigue, and vicarious traumatization. Ms.
80 Bice gave more examples and signs of possible stress responses and how family life can be
81 negatively affected. She continued that these stress responses are not guaranteed – some officers
82 might experience some or none. It depends on many factors, such as whether there is training, or
83 buy-in to emotional health, or a support group, or support from an officer's department, and so
84 on and so forth – all of those factors start the healing process or protect against burnout and other
85 stress responses.

86

87 Ms. Bice spoke about what VFR offers, in terms of Intensive Outpatient Programming, which is
88 a group five days a week that addresses co-occurring issues of mental health and substance use.
89 VFR is entirely for Veterans and first responders (EMS, Police, Fire, Corrections); no one from
90 the general population is involved, which upholds the integrity of the program. She continued
91 that there are other outpatient group addressing anxiety, relapse prevention, preventing burnout
92 and compassion fatigue, peer to peer, and more. They also have individual therapy and family
93 therapy if that is appropriate. They refer to other facilities in NH and VT for residential care as
94 is sometimes needed.

95

96 Mr. Morton stated that there is a lot of data that talks about all of the ongoing training that police
97 officers and other first responders receive, but when one's amygdala is continuously activated
98 from situation to situation, even with all of the training in the world it is difficult to overcome
99 that. The Police and Policing work group has read about the importance of ongoing mental
100 health awareness and services to first responders and he is really interested in learning more
101 about that. Are there services police officers need to be offered on a weekly or monthly basis or
102 as part of their benefits package?

103

104 Ms. Bice replied some things to offer are: the training in the Academy, and then ongoing
105 wellness trainings, to say “Hey, it's okay if you get help and support; that will actually help you
106 reach the end of your career successfully and move on into retirement.” She continued that the
107 peer-to-peer programs some departments have are amazing. She spoke about how it works when
108 an officer can go to another officer in the department and ask for support due to a difficult call,
109 and get support from a peer who understands and can talk with them about it. A peer-to-peer
110 program is hugely successful when coupled with a culturally-competent, vetted, trusted mental
111 health counselor that is embedded in it. It also helps to cut back on or be cognizant of overtime,
112 which can be hard, but is important. It helps when support staff are trained to pay attention to

Meeting Minutes

113 officers' behavior and look for warning signs of stress, like tardiness or an increase in dark
114 humor; and it helps when officers get some time off in between critical incidents. She continued
115 that she could go on and on.

116

117 Ms. Somers thanked Ms. Bice and asked: are the services directly available to first responders
118 anonymously and separate from the agency they are with, or are the VFR clients typically the
119 agencies? Ms. Bice replied that they are a private, community provider. She continued that they
120 want officers and their family members to be able to access services from any angle – if an
121 officer comes in for services voluntarily, VFR cannot reach out to his/her department about it
122 without that officer signing a release of information. There are also situations where there is
123 departmental involvement but they still need a release of information to protect confidentiality.
124 They will not get anywhere with treatment if the officer worries that VFR will report everything
125 back to their department or that it will impact their job. If there are no safety issues requiring
126 VFR to get anyone else involved, they won't. That is case by case. They assess whether it
127 makes sense to pull in the command, or if it is just an individual seeking services. They are in
128 network with most insurances (she listed many) and in the Community Care network with the
129 VA. They try to reduce the barriers to treatment and care for all clients that come in. Finances
130 will not be a barrier to seeking services, at all.

131

132 Ms. Somers asked what proportion of the services are referred by command, versus individuals
133 coming directly to VFR. She continued that she assumes most of the services are sought due to
134 critical incidents, but Ms. Bice could speak to that, to put it into scope. How are clients generally
135 referred? Are they doing more group sessions and on-going educational services? Have VFR
136 noticed any new trends or changes in the care they are providing? Ms. Bice replied that she does
137 not have those numbers in front of her, but in general, they get more referrals from the peer-to-
138 peer groups than from command themselves. They are not doing Fit For Duty right now. They
139 do departmental trainings/officer wellness, with suggestions for how to improve things like
140 morale and retention and overall health and wellness, and VFR gets a lot of calls after those. The
141 majority of the time it is the individual officer coming to them or the peer-to-peer counselor
142 reaching out, and general word of mouth.

143

144 Co-Chair Morris asked if members of the public had questions. Hearing none, she asked if
145 anyone else on the committee had questions.

146

147 Ms. Landry stated that one of her challenges as the staff liaison for this group is to make sure the
148 conversations eventually come down to focus on recommendations the group can give to the City
149 Council to address specifically the issues that may be happening in our community around racial
150 justice and community safety. She asked if Ms. Bice has any ideas to share about racial justice
151 and community safety and how VFR impacts that.

152

153 Ms. Bice replied that the healthier the officers are, the healthier their interfaces with the
154 community are. She continued that all of the things they have explored today are what they want
155 to see implemented to improve community relations and racial justice – having training

156 protocols, being supportive of officers, being aware of officers' needs, and making some of those
157 recommended adjustments will all lead to healthier individuals. Having healthier officers leads
158 to improved community relations. Officer training in how to manage situations is not enough;
159 there needs to be a focus on officers' health and wellness, and then the other aspects come into
160 play.

161

162 Co-Chair Morris asked if there were other questions or comments. Hearing none, she thanked
163 Ms. Bice for her presentation and all of the information. Co-Chair Van Wickler asked how a
164 referral could be made to VFR for services. Ms. Bice replied that the VRF website has phone
165 numbers/contact information, and she can send the committee a flyer. She continued that some
166 people are uncomfortable with directly calling the office to seek treatment, because it is hard to
167 ask for help, so there is a web inquiry form to fill out, and then a VFR staff person would reach
168 out to that person.

169

170 **3) Discussion: Public Input Opportunities**

171

172 Co-Chair Morris stated that the AHRJCS Committee has been hearing a lot about what is already
173 happening in the community because they said they wanted that information before they started
174 coming up with recommendations. She continued that they have not yet had a presentation on
175 Education. They want to set up a process to get information from not only people who are
176 delivering services, but also the recipients of services/community members.

177

178 Co-Chair Morris asked how the group wants to proceed with having a way for community
179 members to provide input about their experiences. Co-Chair Van Wickler proposed they go on
180 live radio with Dan Mitchell – this would be an interesting topic for him and his listeners, and he
181 advertises his upcoming shows, so people would have the opportunity to hear about it ahead of
182 time and call in live. He continued that a few AHRJCS Committee members could be panelists.
183 He asked what others thought. Discussion ensued. Ms. Somers talked about/asked about the
184 logistics of bringing that information back to an AHRJCS meeting and to the public. Co-Chair
185 Van Wickler replied that every show becomes a podcast, which is a public record in a way. He
186 continued that the Mayor's initial Zoom meeting (about racial justice) was very successful and
187 did not need much substance from the hosts, because the public response was so overwhelming.
188 They got a lot of great input.

189

190 Co-Chair Van Wickler stated that the committee is hearing a lot about how great local police are,
191 and they have the best jail in the community, but there is systemic racism in this region. The
192 committee cannot depart from that as being the objective of its work. It is great that the police
193 are doing a great job, but the community still has issues. If they give the public an opportunity to
194 speak they will hear the very personal stories, that the committee does not know about. It could
195 be a radio session or another Zoom forum like the Mayor did. Public input is essential. A major
196 challenge is that people experiencing racism and difficulties are probably not likely to come to a
197 forum and talk about it. How can the committee reach the people who are not comfortable
198 talking on the phone on a radio show, or do not have access to Zoom?

Meeting Minutes

199

200 Co-Chair Morris asked if the podcast of a radio show, if they went that route, could be part of the
201 committee's public notes/record. Ms. Landry replied no. She continued that she loves the idea
202 of Dan Mitchell's show, but she cannot imagine how it could be part of the public record and a
203 quorum of this body cannot go on the radio show because then it is a "meeting" and they would
204 have to have meeting minutes and try to record it somehow. She likes the public forum idea
205 better. But if a couple committee members have the opportunity to talk with Dan Mitchell, that
206 would be great and they should go for it, but it could not be the means to create a public record.
207 Co-Chair Morris asked if she means that a few committee members could go on the radio and
208 talk about the work and announce when the public forum would be and encourage participation.
209 Ms. Landry replied yes. Mr. Morton stated that he loves that idea.

210

211 Mr. Morton stated that regarding the people the committee wants to reach who are unable or
212 unwilling to attend a public forum, one idea is for the committee to do a phone campaign and try
213 calling the residents of Keene and ask them, say, five simple questions about their experiences,
214 or send something in the mail, since they cannot go door to door due to COVID-19. Those are
215 just ideas.

216

217 Ms. Somers stated that she agrees with Co-Chair Van Wickler's comments. She continued that
218 there are true problems in the community and it all stems around systemic racism. They need to
219 establish a way for those experiences to be brought to the surface. She has an idea but first wants
220 to share an experience. She shared a story about how she and another brown-skinned friend
221 went into a store having forgot their face masks in the car, and the employee stopped them the
222 minute they went through the door to tell them they could not come in without masks. They
223 went back to the car to get their masks, and on their way back into the store, saw a caucasian
224 person not wearing a mask. She let the person know they wouldn't be allowed in without a
225 mask, but the person refused to put one on. Ms. Somers and the person she was with then
226 witnessed this caucasian, unmasked person choose an item and go through the check-out line
227 with it, never once being told to wear a mask. She continued that she was appalled that this
228 caucasian person was not called out, and she was. There is no avenue for sharing this kind of
229 story. Her idea is: could the committee look at creating some sort of community board/place
230 where people can bring these issues to? Then the committee could track these types of issues.
231 People voiced a lot of experiences and concerns at the first Zoom forum and people occasionally
232 send her stories. Could the committee create a standing, more permanent body people could go
233 to with these stories and experiences, even after this committee sends its recommendations to the
234 City Council and is done with its charge? The idea would be for this body to listen to people's
235 experiences, and continue to work on resolutions and address areas that still need attention. She
236 would like others' thoughts.

237

238 Co-Chair Morris asked if there is a way that they can set something up on a website, where it is
239 anonymous, and allow people to input stories and it would flag this committee (for now) and that
240 would be a part of the public record of concerns that people laid out. Her second question is: is it
241 correct that Ms. Somers is saying one of their recommendations could be to create a council of

Meeting Minutes

242 people who will receive this type of information and continue some work on it? It sounds like
243 Ms. Somers was talking about two things. Ms. Somers replied that is correct.

244
245 Ms. Landry stated that she is so excited, because Ms. Somers opened the door to a conversation
246 she has been wanting to have. She continued that she really likes the idea of putting this
247 recommendation into the report to the City Council, saying, we would like a place where people
248 who are experiencing issues with systemic racism can have a voice. She suggests they bring in
249 some people from the City's Human Rights Committee, which is an ongoing, not ad hoc
250 committee. Maybe they would be a good place for people's stories to go to, anonymously or
251 otherwise. She continued that regarding Co-Chair Morris's question about whether that would
252 be possible (on a webpage), and she is the IT Director and thus will find a way to make it
253 happen. They created an anonymous tips webpage for the Police Department and it has been
254 wildly successful.

255
256 Ms. Landry stated that in response to Ms. Somer's story, she wants to say that she has heard
257 from two friends who have recently been in very troubling situations that may not be
258 "characteristic" of Keene but are an example of racism that many people in the community might
259 not be aware of. A friend of hers who is a young, black person said "When I walk down the
260 street in a hoodie, people put their hands on their wallets. When I go in a restaurant, the elderly
261 woman asks to be seated away from me. People didn't ask me my name; they called me 'the
262 black kid.'" Those are the kinds of issues she is really looking forward to learning more about
263 and addressing. She continued that she is sorry Ms. Somers had that experience and that she was
264 treated that way. It is about how they can educate people and create a whole new approach to
265 being comfortable with people in general, not just people based on their color.

266
267 Ms. Somers thanked Ms. Landry and stated that she did call out that store employee, who was
268 very apologetic and said she "didn't even notice" and that it is "hard to manage this new mask
269 policy." She continued that underlying that, she thinks, is the fact that a brown-skinned person
270 stood out to this (white) person more than a non-brown-skinned person. She would like to think
271 there was innocence there but it just shows how deep-rooted some of these things are. She is
272 glad to hear that Ms. Landry can relate and appreciates whatever IT support solutions they can
273 get. This committee would not be doing any justice if they do not get to the very heart of these
274 matters that are not going to surface otherwise.

275
276 Councilor Workman stated that she thinks everything everyone has said is phenomenal and she
277 supports it all. For getting public input: if they are going to do the anonymous "tip line" idea,
278 can they also do an anonymous survey? Does the City have the means to do that? Then they
279 could compile the findings in an easy format. That could go up on social media, which might be
280 more cost effective than mailings. They need to really look at bias in the community. They
281 focused heavily in the beginning on the KPD and policing methods, but it is becoming more and
282 more clear that it is an issue with community members as well and education is important for the
283 community at large, not just institutions.

284

Meeting Minutes

285 Ms. Landry replied yes, they have Survey Monkey they can use, and she really likes the idea of
286 using social media, because they can use geographic tools to target people who are in this area,
287 and they would get a better response on social media than they might get from people coming to
288 a meeting or calling into the radio. However, all of those options are good ways to reach the
289 public. She would love to hire a college to do a scientific survey but she does not know if there
290 is funding available, but if the committee wants, they can ask, and see what the City can do. Mr.
291 Morton replied that he would like to talk with Ms. Landry – “Cost be darned, we can figure this
292 out.”

293
294 Mr. Morton stated that what Ms. Somers shared was powerful. He continued that they should be
295 cognizant of the fact that if they have an anonymous tip line, which yes, they need, they also
296 need to put into place the ability for them to act on what they hear. This will go awry if for three
297 months people are sending in stories, and then the months go by and nothing happens, no
298 education comes about, nothing real comes of it. It would have the reverse effect times five. He
299 definitely thinks they should do this, but there should be some sort of response to the incidents
300 that people share.

301
302 Co-Chair Morris replied that that is why one of Ms. Somer’s recommendations was to have
303 something ongoing beyond the tenure of this group. They can recommend the creation of an
304 ‘implementation committee’ of sorts. Ms. Somers replied yes, and part of the responsibility
305 would be to document and follow-through on the things that come to the surface.

306
307 Ms. Atkins stated that she thinks it is a great idea. She continued that partly what happens, as
308 many of them know, is that people think of something as a “one-off.” Having a means of being
309 able to collect the information and share it people means they can see and show that it is not a
310 one-off incident – they can determine how frequently these incidents happen, the type of
311 incidents, etc., in our community. We live in a great community and it does not happen all the
312 time, but it does happen, and has some pretty daunting effects. So loves the idea of being able to
313 collect the data and share it, because people have a better understanding when they know more
314 than just one incident.

315
316 Councilor Workman stated that if they do the Zoom format to collect public input, and it is very
317 clear that that systematic racism happens in the community, she suggests the committee focus
318 these upcoming forums on recommendations – what does the community want to see moving
319 forward? What does the community think they need to resolve or mitigate this from continuing?
320 Because with limited time and given how big the community interest is, they could be there for
321 another 3-hour meeting just hearing incidents from the public. It would help to have a clear
322 agenda and say they are specifically looking for what the community thinks could be a resolve
323 for this.

324
325 Co-Chair Morris asked what people think about breaking the public forums up by the bucket
326 areas – one week they would do education and get input on education recommendations, and
327 another week would be law enforcement, etc. Would that help? Councilor Workman replied

Meeting Minutes

328 that she thinks it would, and it would also help people plan for their participation, based on their
329 interests and experiences – for example, educators would know they wanted to call in during the
330 forum focused on education. After the forums the committee could come back together as a
331 group to look at people’s feedback and ideas and compile the information to use in their final
332 report to the City Council.

333
334 Co-Chair Morris asked who will follow up. She asked if Co-Chair Van Wickler knows Dan
335 Mitchell and if he can contact him about the radio show idea. Co-Chair Van Wickler replied yes.
336 Co-Chair Morris asked how they want to plan the workshops, and choose the dates, and whether
337 they want to break it down by topic area or not. Ms. Landry replied that she could pull together a
338 suggested time frame and scope for those things, tentative dates for the three workshops based on
339 the bucket areas with a brief introduction for each, making sure they frame the workshops toward
340 seeking recommendations for the committee to consider putting in the report to the City Council.
341 If the committee wants, she could put this together and bring it back to the committee for their
342 approval. Co-Chair Morris asked what people think. Committee members replied that that
343 sounds good.

344
345 Ms. Atkins asked if the Education working group is going to meet before the next committee
346 meeting to flesh out their ideas. Co-Chair Morris replied that is a great idea, and any one of the
347 Education working group members can reach out to the others to set that up. Ms. Atkins replied
348 that she can reach out, if someone else could set up the Zoom. Co-Chair Morris replied that she
349 can set up the Zoom.

350

351 **4) Next Meeting – Agenda Items and Schedule**

352

353 Brief discussion ensued about the date and time of the next meeting. Co-Chair Morris
354 announced that the next meeting is October 15 at 5:30 PM.

355

356 There being no further business, Co-Chair Morris adjourned the meeting at 6:00 PM.

357

358 Respectfully submitted by,
359 Britta Reida, Minute Taker