



Police Response to People with Mental Illness: Specialized Approaches

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What is the nature of the problem?

- NYPD reports they respond to a call involving a person with mental illness once every 6.5 minutes (*2002*).
- LAPD reports spending approximately 28,000 hours a month on these calls (*DeCuir and Lamb, 1996*).
- In one year, law enforcement officers in Florida transported a person with mental illness for involuntary examination (Baker Acts) over 40,000 times, which exceeds the number of arrests in the state for aggravated assault or burglary (*2000*).
- The prevalence rate of severe mental disorder is 6.4% for male detainees entering jail (*Teplin, 1990*) and 12.2 % for female detainees (*GAINS, 2001*).



Why implement a specialized approach to people with mental illness?

- Police encounters with people with mental illness can be common, time consuming and unpredictable.
- These situations can result in injuries and even death.
- Patrol officers cannot easily access mental health services.
- People with mental illness who have not committed serious crimes do not belong in jail.



What are models of specialized police approaches?

Programs that are *police-based* include:

- **Crisis Intervention Teams**—A cadre of officers is trained to identify signs and symptoms of mental illness, de-escalate the situation and bring the person in crisis to an efficient, round-the clock treatment center.
- **Co-responder Teams**—An officer pairs with a mental health professional to respond to the scene of a crisis involving mental illness.



What are the essential elements of these models?

- Collaborative Planning and Implementation
 - ◆ Specialized Training
 - ◆ Call Taker and Dispatcher Protocols
 - ◆ On-Scene Stabilization and De-Escalation
 - ◆ On-Scene Assessment of Mental Illness Signs and Symptoms, and the Subsequent Disposition
- ◆ Confidentiality and Information Exchange
- ◆ Transportation and Custodial Transfer
- ◆ Treatment, Supports, Specialized Crisis Response Sites, and Services
- ◆ Organizational Support
- ◆ Program Evaluation and Sustainability



Publications on Improving the Police Response

- 1986, *Managing Persons with Mental Disabilities*, Gerard Murphy, PERF
- 1997, *Police Response to People with Mental Illnesses*, DOJ
- 2002, *Criminal Justice/Mental Health Consensus Project*, CSG
- 2003 and 2005, Guides to assist in *Implementing and Enhancing Police-Based Diversion Programs for People with Mental Illness*, TAPA Center



Law Enforcement / Mental Health Partnership Program

- Funded by the Bureau of Justice Assistance (BJA) in 2005
- Deliverables will include:
 - Training resource “Toolkit”
 - “Essential Elements” document
 - Interactive database of program information
 - Policy brief on statewide implementation efforts



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