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Bridging Connections between Police and the Mental Health Community: An Introduction to the Lexington Law Enforcement-Mental Health Taskforce

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Introduction

The purpose of this document is to share initial findings regarding Serve & Connect's work focused on enhancing relationships between law enforcement and people experiencing mental illness. Serve & Connect is a nonprofit in Columbia, South Carolina which focuses on igniting positive change through police and community partnerships. Serve & Connect works directly with law enforcement, community stakeholders, and citizen leaders to build trust, optimize collaboration, and foster a shared sense of pride to improve communities and outcomes for community members. This includes improving how communities engage in supporting those affected by mental illness. To address this need, Serve & Connect and the Lexington Medical Foundation have partnered to develop the Lexington Law Enforcement-Mental Health Taskforce, a collaboration with the aim to improve interactions and coordination among law enforcement, mental health service providers, and individuals impacted by mental illness in Lexington County.

Background

Mental illness affects nearly one in five adults in the United States, yet individuals with mental illness make up a disproportionate number of those who interact with law enforcement [1]. However, these interactions are often unrelated to criminal conduct [2]. Rather, police encounter people whose mental health needs are unmet due to a lack of service initiation and/or sustained engagement outside of crisis situations [3]. Moreover, studies have shown that more than three times as many individuals with severe mental illness can be found serving time in jails and prisons rather than receiving treatment in hospitals [4]. Improving police responses to mental health crisis has been an ongoing issue, with front-line officers acknowledging the need for more training and resources, despite some promising programs (e.g., Crisis Intervention Teams (CIT)) [5]. However, in some cases, adequate training is not enough and other challenges may emerge. For example, law enforcement may not be aware of all of the local resources to aid individuals with mental illness in their community, or if they are aware, barriers exist in terms of coordination and access. In some cases, needed resources may not be present within a particular community or families may need additional support that is also unavailable or uncoordinated.

1 American Psychiatric Association (n.d). What Is Mental Illness? Retrieved from https://www.psychiatry.org/patients-families/what-is-mental-illness
2 Brink, J., Livingston, J., Desmarais, S., Greaves, C., Maxwell, V., Michalak, E., Parent, R., Verdun-Jones, S., & Weaver, C. (2011). A Study of How People with Mental Illness Perceive and Interact with the Police. Retrieved from https://www.mentalhealthcommission.ca/sites/default/files/Law_How_People_with_Mental_Illness_Perceive_Interact_Police_Study_ENG_1_0_1.pdf
3 Wood, J. D., Watson, A. C., & Fulambarker, A. J. (2017). The "Gray Zone" of Police Work During Mental Health Encounters: Findings from an Observational Study in Chicago. Police quarterly, 20(1), 81–105. https://doi.org/10.1177/1098611116658875
4 Stettin, B., Frese, F. J., & Lamb, H. R. (2013). Mental health diversion practices: A survey of the states. Treatment Advocacy Center.
5 Reuland, M., Schwarzfeld, M., & Draper, L. (2009). Law enforcement responses to people with mental illnesses: A guide to research-informed policy and practice.

Methods

The Lexington Law Enforcement-Mental Health Taskforce is working to answer a set of guiding questions focusing on opportunities available and gaps that can be filled for promoting greater collaboration within Lexington County. The aim is to ensure that people experiencing mental illness are provided the treatment and support they need and that the mental health needs of police officers are also better understood and addressed. Through an evaluation process that includes reviewing the academic literature, interviews with national leaders, a survey and focus group with representatives from stakeholder groups (e.g., law enforcement, mental health practitioners, individuals with mental illness), the Taskforce will identify the greatest areas of need in Lexington County, local efforts that are already underway, existing relationships that can be leveraged, and explore needs and strategies nationally that might inform the Taskforce's work.

Initial Findings

To date, a literature review provided national statistics supporting the need to focus on improving engagement and collaboration among law enforcement, mental health services, and individuals with mental illness. The review identified programs like CIT, a co-responder program which has been shown to increase the likelihood of officers to transport individuals to mental health services in multiple states, and a successful pilot program where behavioral health professionals ride along with police officers during emergent and non-emergent calls for service alike[6]

Interviews with 22 national leaders, including individuals in law enforcement, law enforcement training, and mental health service practitioners have supported CIT as a promising program. Other successful programs include South Carolina's Community Crisis Response Intervention (CCRI), which involves coordination with mental health professionals to provide immediate crisis response for individuals police are called to respond to. Another promising national program is training by the Institute for Contemporary Psychotherapy (ICP) which gets law enforcement agencies to commit to identifying their local mental health agencies and to develop clear policies about how to respond to individuals with mental illness based on the resources available in their communities. In addition, ICP provides eight hours of training to officers on engaging with people with mental illness. Mental Health Court, which links offenders who would normally be prison-bound to long-term community-based treatment, has also been shown to be an effective strategy. In Georgia, for example, the state saw major declines in re-arrests rates, increased employment, and increases in child custody being reinstated through implementation of Mental Health Courts.

Despite these promising programs and strategies, the interviewed national leaders overwhelmingly identified a need for improved training of law enforcement both in how to engage with individuals with mental illness, and in how to recognize and receive support for their own mental health needs. Even when effective training or other programs are available, interviewees note that lack of awareness, insufficient support from leadership, and lack of funding are major barriers for successful implementation.

6 McGrath, M. K. (2019). The 4 Best Examples of Police and Mental Health Response. Retrieved from https://www.ravemobilesafety.com/blog/best-examples-of-police-and-mental-health-response

Moreover, a lack of standardization around reporting requirements, definitions and methods to produce consistent data, and the absence of a centralized oversight for police encounters with individuals with mental illness often exacerbate the challenges law enforcement agencies face when trying to implement a promising program or improve collaboration with mental health provider agencies[7].

While improved training for law enforcement and collaboration between law enforcement and mental health service providers were components included in the promising programs and strategies, little evidence about successful collaboration between law enforcement and individuals with lived experience of mental illness exists. However, it is well-established that when efforts include a collaborative approach to engage community members in designing and implementing solutions, efforts produce more buy-in and are more successful than those which take a top-down approach[8]. This indicates a need for more research focused on how additional collaboration that includes individuals with mental illness can support improved interactions and coordination to address mental health needs.

Next Steps

The Lexington Law Enforcement-Mental Health Taskforce is currently collecting and synthesizing local information. A virtual kick-off meeting was held on May 19th, allowing for discussion about opportunities to improve collaboration, what is working well, and how needs differ throughout Lexington County. A survey with those and additional questions was distributed to stakeholders. Once key needs within the county are identified, the Taskforce will begin identifying hotspots where those needs are greatest and conduct additional interview and focus groups and begin developing a toolkit to support collaboration around those needs.

The theme of Mental Health Awareness Month 2020 is "Tools to Thrive," and the hope of Serve & Connect is that the partnerships, work, and tools developed through this collaboration will indeed lead Lexington County to thrive.

7 Fuller, D. A., Lamb, H. R., Biasotti, M., & Snook, J. (2015). Overlooked in the undercounted: The role of mental illness in fatal law enforcement encounters. Treatment Advocacy Center.
8 Nkwake AM. Examining the Relationship between Community participation and Program Outcomes in a Meta evaluation. Journal of Multi Disciplinary Evaluation. 2013;9(20): 1- 17.