



Mental Illness and Policing:

Police Officers are often the first responders to incidents involving people with mental illness.

1 in 4
**PEOPLE LIVE WITH
A MENTAL ILLNESS**

The resources provided at no cost by the government have been severely reduced or eliminated.

Reduced access to treatment and medication can lead to mental health conditions reaching crisis.

Misunderstanding of mental health crisis may lead to it being perceived as aggression. Officers may respond to aggression with force and/or arrest.

The City of Princeton Police Department's ultimate goals are to reduce violent conflicts arising from mental health crisis events and early intervention efforts aimed at keeping persons with mental health issues out of jail.

Education, Training and Partnerships

- 1 Reducing the stigma around mental health
- 2 Increased training for officers to better understand mental health
- 3 Implementing crisis intervention teams
- 4 Forming partnerships with the local mental health community

City of
PRINCETON
ILLINOIS



The Impact of Mental Health on Policing



It is often said that one in four people in America struggle with mental health issues. There are some experts who believe that number may be even larger. On a daily basis police officers and other first responders deal with people who are in crisis and must resolve these interactions in a safe manner. I will briefly discuss the efforts those of us in law enforcement are taking to create positive outcomes in often chaotic situations.

In order for officers to safely work through calls regarding persons in crisis they must first understand what is happening. Officers receive mental health training in the police academies now. They also receive ongoing training throughout their careers. This was not always the case in the past. As a society we have become more aware, and educated, about the complicated nature of mental health. This increased awareness has helped reduce the stigma long attached to those who suffered from mental health related issues. In the past, someone who was in crisis, would likely find themselves in jail or living on the streets because of the lack of understanding regarding their condition. Now, with attention focused on getting them the help they need, officers are better able to reach positive resolution to crisis situations.

We still have a long way to go. Many states, including Illinois, have reduced the funding for mental health treatment resources, leaving those in need with nowhere to turn for help. There are very few state operated facilities available for those who are indigent, or who don't have adequate health insurance, leaving them with nowhere to go when in need of medication or counseling. This lack of resources, coupled with their increasing need for help, often leads to contact with law enforcement. Unfortunately, this contact all too frequently occurs when they are in crisis. When someone is in crisis it is difficult, if not impossible, for them to explain to others why they are behaving in an erratic manner. Unfortunately their behavior may be viewed as aggressive or threatening, causing an escalated response by officers. Officers are now trained to deescalate these situations through various techniques in an effort to calm the person down so we can help them get the assistance they need.

Deescalation techniques are not effective 100% of the time. Much of the law enforcement effort now is focused on preventing people from reaching the crisis level. Crisis Intervention Teams, or CIT's, are utilized by police agencies across the country now. The CIT model was developed by the Memphis Police Department in response to tragic endings to incidents where citizens were in mental health crisis. By working with mental health clinical professionals, police were able to educate their officers and citizens about mental health. Out of that education campaign came the CIT program. Officers received training from mental health professionals which allowed them to better understand the early warning signals for mental health crises. These officers then met with folks who had been in crisis in the past, often including family members or loved ones in the meetings. They would establish protocols with the individuals and families to help identify if their family members behavior was escalating towards crisis. The end goal was to get the person to help before the crisis occurred. Officers also follow up with individuals, making sure they are visiting their doctor and staying compliant with their medications. These efforts are effective. Yes, CIT requires a commitment of manpower in order to follow up with "clients", but the payoff is a reduction in crisis events potentially leading to violent confrontations.

These efforts are occurring locally. The Princeton Police Department has several officers with CIT certification, myself included. While we don't have a formal CIT program, we utilize the techniques to reduce crisis on a daily basis. Recently, we partnered with Perry Hospital, Bureau County and several other organizations to apply for a grant that will allow us to bring more mental health resources to the community. We were awarded the grant a few weeks ago. Efforts are now underway to plan how we will use the funding to provide resources to those folks in our county who are in need of mental health services.

My goal as your chief is to try to help those with mental health issues avoid crisis. I believe the police have a role in working with those who are living with mental health challenges. I want our role to be non-enforcement and non-confrontational when it comes to mental health. There are several outstanding organizations in this community who provide resources to those in need. Together, we will connect those in need with the resources available to help them.

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