

# Fact Sheet: Law Enforcement and People with Mental Illness

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## Encounters Between Law Enforcement and People with Mental Illness

In the police departments of U.S. cities with a population greater than 100,000, approximately 7 percent of all police contacts, both investigations and complaints, involve a person believed to have a mental illness.<sup>i</sup>

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In one study of 331 people with severe mental disorders who were hospitalized, 20 percent reported being arrested or picked up by police for a crime some time in the four months prior to their hospital admission—most commonly for alcohol, drug, or public disorder crimes.<sup>ii</sup>

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An in-depth study of police departments in Memphis, Tennessee; Knoxville, Tennessee; and Birmingham, Alabama estimates that officers average six encounters with people with mental illnesses per month.<sup>iii</sup>

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A study of a special unit of a major metropolitan police department mandated to respond to incidents involving "emotionally disturbed persons" estimated that 5 percent of the dispatches per year involve a person with mental illness.<sup>iv</sup>

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The New York City Police Department responds to a call dispatched as involving a person with mental illness every six minutes.<sup>v</sup>

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During the year 2000, law enforcement officers in Florida transported more than 40,000 people with mental illness for involuntary 72 hour psychiatric examinations under the Baker Act. This exceeds the number of arrests in the state during 2000 for either aggravated assault (39,120) or burglary (26,087).<sup>vi</sup>

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## Law Enforcement Responses to People with Mental Illness

In a 1999 survey of police departments in 194 U.S. cities with a population of 100,000 or more, 96 of the 174 departments that responded (more than 50 percent) did not have a specialized response for responding to people with mental illness.<sup>vii</sup>

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## Law Enforcement Responses to People with Mental Illness

(continued)

The same 1999 survey classifies specialized police responses to people with mental illness into three categories:<sup>viii</sup>

\* Police-based specialized response—sworn officers who have special mental health training (3 percent of departments in survey)

\* Police-based specialized mental health response—non-sworn mental health consultants hired to work with police (12 percent)

\* Mental health-based specialized mental health response—rely solely on mobile crisis teams which have special relationships with the police (30 percent.)

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## Outcomes of Specialized Police Responses

Shortly after the Memphis CIT was implemented, injuries to individuals with mental illnesses caused by police decreased by nearly 40 percent.<sup>ix</sup>

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The rate of TACT (similar to SWAT) calls in Memphis has decreased by nearly 50 percent since the implementation of their CIT program.<sup>x</sup>

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In 1999, the Albuquerque Police Department, which also employs a CIT model, reported that officers arrested, transported to jail, or otherwise took into protective custody fewer than 10 percent of those people with mental illnesses they contacted. Injuries were also reduced to approximately 1 percent of calls after their CIT model was implemented. The decrease in use of SWAT was reported at 58 percent.<sup>xi</sup>

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<sup>i</sup> Deane, Martha, Steadman, Henry J., Borum, Randy, Veysey, Bonita, Morrissey, Joseph P. "Emerging Partnerships Between Mental Health and Law Enforcement." *Psychiatric Services* Vol. 50, No. 1. January 1999: pp. 99-101.

<sup>ii</sup> Swanson J, Borum , Swartz M, Hiday V. "Violent Behavior Preceding Hospitalization Among Persons with Severe Mental Illness." *Law and Human Behavior*, vol. 23, no. 2, April 1999:185-204.

<sup>iii</sup> Borum, Randy, Deane, Martha, Steadman, Henry J. and Joseph Morrissey. "Police Perspectives on Responding to Mentally Ill People in Crisis." *Behavioral Sciences and the Law*, vol. 16, 1998: pp. 393-405.

<sup>iv</sup> Panzarella, Robert , Alicea Justin O. "Police tactics in incidents with mentally disturbed persons," *Policing: An International Journal of Police Strategies & Management*, vol. 20, no. 2, 1997: pp. 326-338.

<sup>v</sup> Unpublished statistic courtesy of Dr. James Fyfe, Director of Training, New York City Police Department.

<sup>vi</sup> Annette C. McGaha, Paul G. Stiles, The Florida Mental Health Act (The Baker Act) 2000 Annual Report, Louis de la Parte Florida Mental Health Institute, July 2001.

<sup>vii</sup> Deane, et. al., "Emerging Partnerships."

<sup>viii</sup> Deane, et. al., "Emerging Partnerships."

<sup>ix</sup> B. Vickers. Memphis, Tennessee Police Department's Crisis Intervention Team, Bulletin from the Field, Practitioner Perspectives, U.S. Department of Justice, Bureau of Justice Assistance.

<sup>x</sup> Dupont, Randolph and Cochran, Sam. "Police Response to Mental Health Emergencies—Barriers to Change." *Journal of American Academy of Psychiatry and Law*, vol. 28, 2000: pp. 338-44.

<sup>xi</sup> D.L. Bower W. G. and Pettit, The Albuquerque Police Department's Crisis Intervention Team, *FBI Law Enforcement Bulletin*, February 2001.

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