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### Policing Mental Illness

In the last month two high-profile shootings of people with mental illness took place. One was in Seattle and involved the shooting of an African American woman reportedly armed with a knife. The other was on I-5 near Lacey and involved a white man reportedly armed with a knife. As I look at police use of force involving people with mental illness, I see a number of assumptions and issues which we need to address.

First, and sadly, not every one of these incidents is going to “come out right.” Police encounters with the mentally ill are unpredictable and sometimes bring a high potential for violence. Human behavior is complex and is made more complex by mental illness. There is no guarantee that there will be a peaceful, win-win solution every time. We should always strive to avoid injuries and fatalities. But such outcomes are neither easy nor assured.

Next, most people think violence in police-citizen encounters is choreographed. It is not. We see scripted, choreographed violence every day on television and in the movies. But, in the real world, violence brings fear, surprise, chaos and, too often, horrible real world consequences. If you have experienced combat, you know that it’s not like the movies.

Next, we sometimes assume that if a mental health worker becomes involved in a police encounter with a mentally ill citizen, everything will end peacefully. Sadly, this assumption, is also wrong. Mental health professionals, are a real advantage to police. But their presence does not guarantee de-escalation. In fact, mental health workers themselves call the police when they can't handle potentially violent or actively violent situations. De-escalation training is also an advantage. But the officers in the two incidents cited above had received such training.

While there is no universal means to bring a peaceful end to every incident, the remarkable fact is that most of these incidents actually do end peacefully.

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Police confront violent, mentally ill individuals dozens of times every day in this area and yet you don't hear about bad outcomes every day. Why? Because bad outcomes are the exception. Ordinarily no one is injured or killed. And, therefore, these incidents are not controversial or newsworthy.

Although having mental health professionals helping on these calls and having available treatment provides no guarantee, it can often help to achieve peaceful outcomes. Here is where we face a serious problem. Our state and our local jurisdictions have drastically reduced access to mental health services. We cut state and local budgets for mental health and then expect police to pick up all the pieces.

Over the last several years, homelessness, substance abuse, mental illness and other issues were dropped on law enforcement's door step. People avoid responsibility for these issues saying "just let the cops handle it" or "keep it out of my neighborhood" or "it's too expensive to fix." The result? More violent field encounters with the mentally ill and more use of jails as mental hospitals.

Shame on us when we refuse to provide crucial triage and treatment services and then act shocked when police do not solve all these problems to our satisfaction.

Let's get real. Let's recognize that policing mental illness is fraught with difficulty. Let's recognize that treating mental illness is also difficult. And it costs money. Let's recognize that bad outcomes in police encounters are the exception and not the rule. But, while things may not always end well, we can do a lot more to reduce the likelihood of bad outcomes.

Our failure to invest in mental health services has and will continue to set the stage for violence. It has and it will cost the lives of citizens and the lives of police officers. Do we want to accept that?

Do we really imagine that somehow the problem will go away if we just continue to "blame the cops?"