

## Crisis Intervention Training

(This article originally appeared in the December 2011 *NAMI Mercer Messenger*.)

In the fall of 1987, during a period of strained race relations, Memphis police officers responded to a 911 call about a young Black male threatening to kill himself with a knife. When the officers ordered the young man to drop his weapon, he became more agitated and ran threateningly toward them. Unfortunately, but in accordance with standard procedure, the police used deadly force. The outraged community demanded a response from the city.

"Police officers are often the first responders to psychiatric and emotional crises...We owe it to them and the public they serve and protect to provide them with the highest quality of training and the collaboration of mental health service delivery systems. CIT has demonstrated an ability to make the streets of America safer for people with serious mental illnesses and to provide them with kindness and help instead of arrest and incarceration."

Joel A. Dvoskin, Ph.D  
Keynote Address  
CIT International Conference  
Virginia Beach, Sep. 2011

Out of this tragedy, the Crisis Intervention Team (CIT) program was born in Memphis in 1988. Since then, hundreds of teams in more than 35 states around the nation have formed and adopted the Memphis Model. These teams comprise mental health providers, law enforcement officers, criminal justice professionals, NAMI affiliate representatives, consumer advocates, and family members who work together to develop strategies for improving interactions between the police and persons with mental illness.

In 2007, largely through the efforts of Police Chief Thomas Garrity of Collingswood and John Monahan, founder and CEO of Greater Trenton Behavioral Healthcare, Camden County became the first to pilot CIT in New Jersey. Mercer County formed a CIT Steering Committee in 2009. Since its inception, NAMI Mercer Executive Director Sally Osmer and John Monahan, have been an integral part of the Steering Committee.

### Memphis Training Model

A key component of the Memphis Model is a 40-hour training program for law enforcement officers that includes basic information about mental illnesses and

how to recognize them; information about the local mental health system and local laws; first-hand accounts by consumers and family members, and de-escalation training. Sally and John attended training in Camden in late 2009.

After a year-long hiatus, due in large part to changes in the leadership of the Trenton Police Department, CIT in Mercer County is back on track. A training class is scheduled for Dec. 5-9 at the Police Department on North Clinton Street in Trenton.

“We are moving forward towards our ideal plan for training officers in Mercer County by conducting the first, of what we hope will be many, CIT training sessions right here in Mercer,” commented Hopewell Police Chief George Meyer, president of the Mercer County Chiefs of Police Association and a leader of the Steering Committee.

“Up until now, officers have had to go to Camden or Burlington Counties for their training. We expect to have mental health professionals and law enforcement personnel here in Mercer that will be able to take over and conduct local training on a regular basis.”

Chief Meyer also hopes to develop a training course for police dispatchers. Emergency communications personnel are crucial to the success of a CIT program enabling calls to be appropriately identified and routed.

### **Obstacles to CIT in Mercer County**

According to Chief Meyer, manpower is the most pressing obstacle to the success of the training program. “Due to cutbacks, it is hard for a chief to pull an officer from his/her duties to attend a week of discretionary training. We need to convince chiefs that CIT is a valuable program that will actually pay them dividends in the end by bringing about successful conclusions to mental health consumer encounters.”

A recent decision by NJ Attorney General Paula T. Dow approving police use of specified electronic control devices (tasers) may induce more chiefs to support CIT. Completion of a mental health training/recognition course is a prerequisite for carrying a taser. “If CIT is designated as the standard for [the mental health]

component, more chiefs will send officers for training if they want to deploy these devices,” predicts Meyer.

### **NAMI’s Role**

NAMI Mercer members will play an important part in the December training. Two families will share their personal stories of interactions with law enforcement. “Our goal is to enhance empathy between the police and families and their loved ones,” explains Sally Osmer.

During the session, NAMI also will play the video *Documenting Our Presence*, which was prepared by NAMI NJ as part of its cultural outreach initiative. This film is a compassionate, hopeful look at the experiences of people of diverse backgrounds affected by serious mental illness. The documentary traces their lives through a cultural lens, focusing on the onset of mental illness, the process of coping and acceptance, and finally, their journey to recovery.

The December training also includes the NAMI NJ video *The Community I Serve*, which won Best of Competition in the Educational/Instructional category at the Broadcast Education Association (BEA) Festival of Media Arts. By portraying the experiences of both law enforcement officers and mental health consumers, the film presents real-life scenarios to illustrate information and skills that officers need in a crisis.

At the conclusion of training week, a role-playing session will enable participants to see the techniques they learned in the classroom put into practice. The “cast” for these exercises include a professional actor, police officers, investigators and prosecutors from Burlington Township, Hunterdon County, the William Paterson, Linden and Trenton Police Departments, as well as mental health professionals.

### **Effectiveness of CIT Training**

From the perspective of students, the response has been very positive. In Hopewell, officers must volunteer for CIT training. “It is not something that you can force someone to do, and then expect them to do it well,” believes Chief

Meyer. “To my surprise, I had many officers volunteer, and to a man/woman, every one that has attended the training has come back with high praise for it.” From an empirical perspective, CIT has shown to be effective in perceived preparedness, quality of response to persons with mental illness, diversion from jail, officer time spent on these calls, and community safety. Studies report higher response rates and fewer arrests. (Tucker, Abigail, et. al., “Responding to Persons with Mental Illness,” **FBI Law Enforcement Bulletin**, Oct. 2011.)

Hopefully, CIT will lead to even more collaboration among law enforcement, the criminal justice, and mental health community. The Sequential Intercept Model identifies points of interception of these systems (e.g., emergency services, initial detention and hearings, jails, courts) that present opportunities to help persons with mental illness get appropriate medical care. Without intervention at these junctures, there are likely to be more crises, more calls to police, and more incarcerations.