Transforming Learning: Police Officers' Perspectives on Social Justice Pedagogy in Mental Health Crisis Intervention Training

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This thesis results entirely from my own work and has not been offered previously for any other degree or diploma.

I confirm that this thesis conforms to the word limit including the footnotes, data and text incorporated into diagrams, tables and figures but excluding the references and appendices.

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Contents

Abstract

This thesis investigates the Mental Health crisis intervention curriculum at an urban police services organization, and its implications for persons experiencing mental health crises. The study advances a learner-focused exploration of police officers' perspectives on the collaborative education between police officers and mental-health practitioners. The research design utilizes narrative ethnography methodology involving nine participants, consisting of eight police officers, two of whom are dedicated members of the Mobile Crisis Intervention Teams (MCIT) and a Mental Health nurse. MCIT is a collaborative initiative between Toronto Police Service and hospitals and was established for the specific purpose of being first co-responders to persons experiencing mental health and addiction issues, referred to herein as "persons in crisis". Most participants in this study had taken a Crisis Intervention course, which has a bifurcated curriculum in Mental Health and Law Enforcement. The methodology utilized in this thesis included generating data from interviews with the participants, classroom observation, policy documents, and a ride-along observation in a densely populated section of Toronto. The participants are from diverse racial backgrounds, selected purposively to elicit unique perspectives from their own lived experiences. My post-structural approach to Law Enforcement education was to disrupt prevailing thoughts and views that may be reinforcing the hegemonic status quo of the police over marginalized groups, particularly Black people, who experience mental health challenges. Thematic Analysis was used to analyse the data and it revealed that police officers are generally accepting of Crisis Intervention Training (CIT).

Nested in Critical Race Theory lens, this study found a gap in established pedagogies which exclude issues of race, stigma, and other intersectionalities from the police curriculum. Data from the study highlight four major findings: CIT training is essential but is currently inadequate to meet the complex needs of a diverse society, 2. Stigma and racism are normative in police practice; and 3. Critical and social justice pedagogies are a welcome addition to CIT curriculum at the TPS but might face resistance by officers who do not share progressive views; and 4. Police officers admit some degree of responsibility for negative outcomes but blame the media for negative public perceptions. This thesis contributes to the existing knowledge around police education and the symbiotic relationship between Law Enforcement and Health Care sectors, and identifies areas where constructive changes can be made in police curricula.

Keywords: Collaboration, mental health, critical pedagogy, crisis intervention, critical race theory, education, police education, race, stigma, social justice, praxis, media

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Dedication

To my mother, Millicent A. Clarke Bateman (posthumously), a champion for the marginalized, a defender of what was right and just.

You raised me to believe that anything was possible. You instilled in me patience, diligence, tenacity and respect. I never gave up, inspired throughout the process by the fact that giving up simply wasn't your style. I would not be where I am today if not for the foundation you laid.

You were ambitious, bright, beautiful, gifted and giving. Your light and warmth will radiate forever.

As promised, mission accomplished.

List of Abbreviations

CIT: Crisis Intervention Training

CRT: Critical Race Theory

MCIT: Mobile Crisis Intervention Team

MHA: Mental Health and Addictions

TPS: Toronto Police Service

POP: Problem Oriented Policing

PRU: Primary Response Unit

TA: Thematic Analysis

*The terms "police officer" and "officer" have been used interchangeably and have the same meaning.

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Chapter 1:   Introduction

*A society which not only changes but which has the ideal of such change
as will improve it, will have different standards and methods of education
from one which aims simply at the perpetuation of its own customs* (Dewey,
1916: 94).

1.1   Aim and overview of the thesis

In this thesis I explored the perspectives of police officers on Crisis Intervention Training (CIT) as a strategy to reduce negative outcomes arising from interactions between police officers and people who experience mental health and addiction (MHA) crises. The extant literature suggests that emphasis has been growing nationally and internationally on changing police practices to better handle police encounters with those who are facing these challenges (Lorey & Fegert, 2021; Crisanti et al. 2019, Iacobucci, 2014; Livingston et al., 2014; Coleman & Cotton, 2014, 2010; Girard et al., 2014). In particular, I focused on the disproportionately higher negative outcomes for Black people in Canada's largest city, Toronto. A negative outcome, for the purpose of this study, means a mentally challenged or addicted individual being seriously injured or killed during police encounters. Given the complexity of issues, I drew upon Critical Race Theory (CRT), Stigma Theory and Intersectionality Theory for analysis, and suggest that, unless social justice pedagogy becomes integrated into CIT as standard practice, Black people will remain at high risk. I argued further that the success of CIT will require the commitment of police officers as change agents in a vocation where they are by and large seen by marginalized communities as agents of oppression (Greer et al., 2021; Card et al., 2021; David & Mitchell, 2021; Alberton et al., 2019; Craig & Richeson, 2016, Bradford & Jackson, 2010; Brunson & Miller, 2006). To achieve this goal, I applied narrative ethnography methodology to explore police officers'

perspectives on the collaborative training between the Toronto Police Service (TPS) and mental health nurses. In this thesis, a "person in crisis" is" [A] member of the public whose behaviour brings them into contact with police because of an apparent need for urgent care within the mental health system" (Iacobucci, 2014: 4).

Data from Statistics Canada (2016) demonstrates that Toronto has the largest Black population in the country, with 442,015 people – or 36.9% of Canada's total Black population (Statistics Canada, 2016) – and anti-Black racism is a social reality in this city (Wortley & Owusu-Bempah, 2011; Owusu-Bempah & Wortley, 2014). Racial discrimination is a recurring theme when policing persons in crisis, and people of colour are at higher risk of being killed by police (Lett et al., 2020; Edwards et al., 2019; Kim, 2019). Use-of-force data further revealed that Black people are disproportionately killed by law enforcement (Ellis, 2020). The literature has further established that there is a higher level of killing of Black men by police officers (Bor et al., 2018). Within mental health, the disproportionality in fatalities is palpable. For example, in Toronto between 2013 and 2017, 43.6% of White civilians were exhibiting mental health issues at the time of their encounter with police, compared to only 16.7% of Black civilians, and 20% of civilians from other racial minority backgrounds (Wortley et al., 2020). Therefore, although the incidents of mental health crisis were higher among White civilians, a Black person was more likely to be killed in an encounter. Several high-profile incidents (re)ignite the debate about police training and education (see Appendix A).

Policy documents suggest that there is a generally accepted view that structural racism significantly shapes the administration of criminal justice in Canada (OHRC, 2019) and

anti-Black racism is a phenomenon that is acknowledged as a real crisis in policing (Lett et al., 2020; Bor et al., 2018; Edwards et al., 2019). Further, there is a history of the TPS discriminating against Black people, especially young Black males (Ezeonu, 2008). In the aftermath of the murder of a Black man, George Floyd, by a White police officer in Minneapolis, Minnesota in 2020, there seems to be (re)awakening of conscience, that some communities are at an elevated risk of harm in societies with deeply embedded dystopian views of racialized persons. The disproportionate number of Black people killed during police interactions while experiencing mental health episodes has increased tension between the police and the Black communities over the decades (Nelly & OIRPD, 2017). With the increasing number of mental health calls for police assistance, this area of policing has garnered more attention than perhaps any other area of police training (Booth et al., 2017).

The TPS acknowledges the racial disparity in outcomes following the apprehension of people of colour. It adopts the Canadian Mental Health Association's (2014) findings about people who often experience mental health or addiction (MHA) issues and additional inequities such as poverty, racialization, or homophobia simultaneously. Its efforts at police reform, however, have been mainly reactive to media broadcasts, public pressure and community mobilization. For example, recommendations for a mental health-focused curriculum for Toronto police officers came out of a Commission of Inquiry led by Supreme Court Justice Iacobucci (as he then was) in 2014 ("the Iacobucci Inquiry") in response to fatalities that resulted from police interactions with persons in crisis in the City of Toronto. This inquiry highlighted the absence of sensitivity in the curriculum of the city's police department. It is perplexing that curriculum changes have

not been fully implemented to inform praxis despite the recommendations of researchers and Commissions of Inquiry, some of which seem to have fallen on deaf ears.

1.2   My positionality

My interest in this topic stemmed primarily from my own experience practicing mental health law and assisting persons in crisis navigate the justice system. To inform inquiry, I drew upon the theoretical knowledge I acquired about policing in my previous studies in Criminology. Over the years I have paid close attention to trends and social phenomena including discrimination against racialized persons with mental health challenges. Although I practiced in various areas of law throughout my career, I felt that I had unfinished business. I was driven by the desire to support victims of the associated, burdensome stigma of mental health suffering. I welcomed the opportunity to serve for three years on the board of a transitional home for men who, after being released from prison, are attempting to reintegrate into society. Here, I gained deeper understanding of the needs and struggles of these individuals. Most residents who struggled with mental health challenges were persons of colour. For some, the possibility or reincarceration is real and their daily challenges are not easily navigable. Like many persons in crisis, the residents experience multiple layers of stigmatized characteristics (Nazroo et al., 2020). Being a legal practitioner and a mental health advocate presented me with opportunities to seek solutions to facilitate better systemic practices that underlie adverse outcomes of police (mis)handling of crises. Further, as a participant in the justice system, I felt compelled as an advocate of fundamental human

rights to canvass opportunities for research that can facilitate better practices in law and law enforcement.

While doing advocacy work, I observed that tribunal members in the justice system were often unaware of their own biases which influenced their decision-making in mental health and capacity cases before them. In many cases where consent, capacity and guardianship decisions were being made, it appeared all too easy for physicians and tribunals to relegate persons in crisis to continued detention in a medical facility against their will. Advocacy was often met with strong opposition. Representing a person in crisis for the purpose of release from a facility often involved navigating conflict with family members who are torn between allowing the individual to have legal representation and making the state the automatic 'parent' of anyone it deemed incapable of caring for themselves. The state uses judicial intervention to prevent the release and appease these families (duPlessis et at., 2021). Although family members are viewed as the best persons to consult with regarding people struggling with mental illnesses (Reuland & Schwarzfield, 2008), in my experience as an advocate they can equally unduly encroach on the person's rights. Fear of self-inflicting harm is a burdensome consideration for the family members (Iseselo et al., 2016). These fears were often assuaged by the state's inherent *parens patriae* jurisdiction to be a protector of the   *vis-a-vis* the *Mental Health Act.* For family members, detention in a medical facility was a more palatable alternative to exposing the person in crisis to the possibility of deadly encounters with the police. As a proponent of integrating the basic tenets of social justice in institutions where taxpayers' money drives the operations, I argue for the inclusion of social justice pedagogy into police curricula as a matter of law.

1.3   Statement of the problem

Individuals dealing with various psychiatric issues, including addictions, depression, and schizophrenia, have an increased probability of encountering the police (Silverstone et al., 2013). This is attributed mainly to behavioural manifestations of psychiatric issues that prompts police involvement (Richmond & Gibbs, 2020). Several studies have identified the need for revised and improved policing training and pedagogy to meet the demands of constantly changing societal needs (Huey, 2017; Ryan, 2016; Coleman & Cotton, 2010, 2014; Brink et al., 2011; Reuland & Schwarzfield, 2008). However, the disproportionately negative outcomes for Black people have been largely ignored in the extant literature. This study is intended to contribute to the gap left by the paucity of research in police training curricula that addresses members of racialized communities with mental health challenges (Booth et at., 2017). Searching online sources to learn what police training at the recruitment level involves, returns little information. The media frequently covers negative outcomes of police officers' interactions with persons in crisis, and questionable police conduct (Gramlich & Parker, 2017). They seldom focus on police training or education. Unlike police (mis)conduct, or crimes in Black communities which are seemingly recurring topics of public interest, police education is hardly colourful or newsworthy.

At the start of this study, I was pleased to discover that CIT exists as a specially designed cross-disciplinary learning initiative between the police and mental health professionals. It is intended to address interactions between the police and persons in crisis by transferring and integrating knowledge from one field to the next (Coleman & Cotton, 2010; 2014). The rationale behind this type of collaboration is that it is supposed

to facilitate stronger cross-professional synergies through sharing problem-solving strategies. The unique skills and knowledge of all personnel trained in their respective areas can better address issues specific to the person in crisis (Dailey & Horschild-Mork, 2017). Given the needs of the vulnerable target population, it only makes sense that pertinent issues of race, racial profiling, and racial discrimination should be integrated into crisis intervention curricula. The integration of critical pedagogy would challenge us to critique structures of power and oppression and question the societal status quo (Lynch, 2019). It is "a way of thinking about, negotiating, and transforming the relationship among classroom teachings, the production of knowledge, the institutional structures of the school, and the social and material relation of the wider community and society" (McLaren, 1999: 454) Therefore, critical pedagogy is a fundamental framework within which police education should be designed. I will even venture to suggest that education at police training colleges, as in any publicly funded institution, should bring about a world that is more socially just (Freire, 1994; Gore, 1993; Shor, 1996) and critical pedagogies ought to be a standard component. With this ontological stance, my research identified gaps in the current curriculum at the TPS that might help explain why negative outcomes still occur.

1.4   Why police officers' perspectives?

There is a gap in the literature with respect to exploring and documenting officers' perspectives on the use of social justice pedagogy in the CIT curriculum. Police officers who have lived, practical, experiences are well positioned to fill this lacuna. The narratives of police officers have been relied upon to better understand their occupational experience in the context of police education in general (Rantatalo & Karp,

2018). The perspectives of rank-and-file officers are especially useful because they interface with the public daily and are subject to public scrutiny (Ezeonu, 2010). In my view, curriculum development would be best achieved by including the views of those on the receiving end. This would diminish inaccuracies and misconceptions that can arise from hearsay. The study included mainly police officers who have been first responders in mental health crisis situations at some point during their policing career. I explored the views of police officers and a mental health nurse of varying years of experience. This included three members of a Mobile Crisis Intervention Team (MCIT). Further, investigating the perspectives of individual police officers requires an open-minded view that policing itself cannot be viewed as monolithic. There are officers from diverse backgrounds with nuanced approaches in dealing with the public in a multicultural society.

1.5 Significance of the study

I chose to study the TPS because it serves the largest urban population in Canada. As the first documented research on the Toronto police officers' perspectives on CIT, this study closes a significant gap in knowledge by highlighting the perspectives of police officers in the city as "knowers located in [their] actual lived situation" (Smith, 1999: 5). This study presents an opportunity to hear police officers' views on their training in mental health. The TPS created mobile crisis teams to address the issue of negative interactions with persons in crisis. The first team was established in 2000, inspired by the killing of Lester Donaldson, a Black man shot by the police as he was experiencing a mental health episode (Iacobucci, 2014). Two decades later, there is no clear indication of the effectiveness of these initiatives. Police services organizations have

been criticized for providing training without proper outcome measures (Krameddine & Silverstone, 2015). Findings of this study are intended to inform pedagogy and to be used as a guide for other police jurisdictions of similar size and diversity. Police officers' perspectives on issues related to social justice-motivated initiatives and their opinions about their training in mental health, could be instructive. Furthermore, hearing the narrative of police officers was essential because successful curriculum changes could potentially be hindered without their support.

There are no public records that outline the police curriculum at the Ontario Police College (where initial training begins) or in-service training once becoming a full-fledged police officer. My approach was that police training and culture should not be so sacrosanct to the point where it cannot be subject to research inquiry. Essentially, I held the police to task to be transparent. At the empirical level, this thesis makes an original contribution to the analysis of CIT in mental health. It could inform police curriculum planning across jurisdictions as they continue to involve and integrate non-traditional approaches to educating and learning. By highlighting the epistemic deficiencies of police education, it proposes to add to the professional knowledge base of policing. This study calls for the reconstitution of police training by incorporating the type of critical pedagogies that will help officers to interrogate the oppressive structures of power which police departments often uphold, although possibly inadvertently. Such pedagogies include CRT, and other pedagogies on class, race, and disabilities.

1.6   Research questions

The goal of this study was to explore the prospect of critical pedagogy as a bridge to filling the gap between training and achieving positive outcomes from interactions between persons in crisis and police officers. To achieve this goal, I sought police officers' perspectives on the education and training involved in CIT collaboration between the police and the health institutions, and their views on the implementation of social justice pedagogy. The following research questions (RQs) guided the study design, data generation, and data analysis:

1. How does the curriculum at the TPS college address mental health and addiction needs of persons in crisis?
2. What are the perceived strengths and weaknesses of a collaborative crisis response between the police and health sector?
3. How is mental health stigma complicated by race, ethnicity, and minority status?
4. What are the grounds/appetite for making race-based pedagogy mandatory within police training?

1.7   Theoretical frameworks

Policing ethnic and racialized communities where mental health issues cut across race, class, and gender lines is complicated (Williams, 2018). Officers' receptivity to the CIT curriculum in addressing the troubling phenomenon of fatalities during police encounters was crucial to this study. Exploring the educational approach to facilitate the policing of persons in crisis could not be conceptualized through a single theoretical lens. Understanding each issue in this problematic phenomenon required unpacking each on its own. Applying multiple theoretical lenses gleaned a better understanding of the layered issues, as officers gave their accounts of their education and praxis in mental

health. Stigma Theory (Goffman, 1963: Tyler, 2018), CRT (Solorzano, 2001; DeCuir & Dixson, 2004) and Intersectionality Theory (Crenshaw, 1989) were applied as conceptual frameworks to help understand structural inequities in society with a view to informing curriculum development and reform. Where there are overlapping bases of oppression, Intersectionality Theory helped to frame the discourse and further shape inquiry (see Figure 1). The selected theoretical frameworks were intended to dissect each component of the complex issues of race, mental health and stigma, and the derivative impact on persons in crisis when these factors intersect. These theories were useful tools to help devise the RQs and inform my strategic approach to data collection (Kincheloe & McLaren, 2005), particularly on a topic that I expected to be sensitive, if not taboo, among police officers. The methods and methodology used to collect the data are outlined in the following segment. I will go into further detail in Chapter 4.

1.8   Methods and methodology

To generate the data, I used semi-structured interviews, questionnaires, and observation methods including a ride-along in a police car, and classroom attendance. A focus group would have been a welcome addition but as I embarked upon the data generation exercise, it proved impossible to gather a group of police officers together in one location due to their varying work schedules. Narrative ethnography was used to investigate the participants' experiences as first responders, and their views on policing education and praxis. By applying ethnography, I was able to explore the institutional narratives within which individuals' experiences are "constituted, shaped, expressed, and enacted" (Clandinin & Rosiek, 2007: 42-43). The primary aim of using this method

was to allow description and analysis of what was happening in this particular setting (Creswell, 2018; Ritchie & Spencer, 1994) of mental health crisis intervention within the police service organization. The ethnographic approach was applied to drill down into police culture as seen through the eyes of the participants. Hearing directly from police officers whose voices are often not heard due to protocol or policy, this research explored their lived experiences and generated feedback which might be crucial to education reform and curriculum development. Finally, Thematic Analysis (TA) was used to analyze the data and find hotspots that were generated to form themes. The empirical data generated was useful to assess the pedagogy and potential benefits that could be applied across police departments as a part of their training mandate. There were specific questions that needed to be asked to find out more about current practices, collaboration across disciplines, and the participants' views about stigma, race and race-based education. TA allowed me to identify common themes generated by the narratives.

1.9   Organization of the study

This thesis consists of nine chapters, including this introduction. In the next two chapters, I review the relevant literature that informs the study, and from which the RQs were conceptualized. In Chapter 2, I discuss the legislative framework within which policing and mental health operates, and the definitions of mental health. This is followed by examining the police training regime and the introduction of CIT as a non-traditional area of practice. Here, the models upon which CIT are based – namely the Memphis Model and the Training and Education about Mental illness for Police Organizations (TEMPO) framework – are discussed. I provide insight into police training

in general, and training in mental health as a specialist area. This is followed by a discussion on the role of MCITs and the operationalization of CIT.

In Chapter 3, I discuss the role of social justice in policing and examine the phenomena of anti-Black racism and disability stigma. The role these phenomena play in the mistreatment of persons in crisis ties into the discourse of the role that police culture plays in replicating and perpetuating the ill-treatment of marginalized persons. Critical pedagogy is proffered within the context of police education as a solution to address the problem. The role of social justice education in policing and its potential to influence police culture and operations is explored.

In Chapter 4, I introduce the theoretical frameworks that conceptualized the study, namely CRT, Stigma Theory, and Intersectionality Theory. Through an anti-oppression lens, I begin by using CRT to examine the normativity of racism in society, reflected in systemic racism within the police service. I then engage Stigma Theory and its application to disability and race. The discussion then segues into Intersectionality Theory which considers the combination of various bases of discrimination.

Chapter 5 explains the methods of data generation where narrative ethnography was used as I sought to acquire knowledge beyond the individual accounts by tapping into police culture as a whole. Here, I discuss the ontological and epistemological stances that shaped my interest in the topic, my approach to the topic, and the selected modes of inquiry employed in conducting the research. The ethical considerations that came into play before and during my exploration are contemplated. I conclude the chapter by

discussing Thematic Analysis which was selected to draw out certain recurring themes from the data based on assigned codes.

Chapter 6 begins the analysis and discussion by addressing the first RQ, which explores the existing curriculum. It aims to understand pedagogies and praxis within CIT by seeking answers to the question: How does the curriculum at the TPS college address mental health and addiction needs of persons in crisis? I explore the police officers' knowledge of the current curriculum and receptivity toward it. The aim was to find out whether the curriculum is applied with consistency throughout the police service, and if it was effectively addressing the problem of negative outcomes from their interactions with the public. Here, I discuss the training methods and requirements, comprising of basic training for recruits and in-service training for officers.

In Chapter 7, I aimed to answer the second RQ: What are the perceived strengths and weaknesses of a collaborative crisis response between the police and health sector? I was interested to hear the officers' perspectives to learn if the collaborative model praxis is achieving the intended goal of reducing negative outcomes. I anticipated that as a relatively new approach to policing, there would be pros and cons to this initiative as police departments engage in a process of learning and discovery to see what works best.

Chapter 8 addresses the third RQ: How is mental health stigma complicated by race, ethnicity, and minority status? Here, the issues of stigma, race, and anti-Black racism are discussed as officers relate their own experiences with racism within the police

organization, and the experience of being perceived by the public as racists. The potential uses of critical pedagogies to fill gaps in the existing curriculum are discussed.

Chapter 9 explores the final RQ: What are the grounds/appetite for making race-based pedagogy mandatory within police training? Through a CRT lens, I discuss findings on officers' views of pedagogical reform that incorporates CRT and a race-based approach in learning modules. Officers' views on culturally nuanced communication as a means to better connect with the diverse populations they serve are discussed and analysed. I close by proffering Transformational Learning at the TPS as a means to interweave social justice pedagogy in the curriculum. I conclude the study by discussing the key findings from that emerged from the RQs and offer recommendations.

Chapter 2:   Policing Mental Health Crises

2.1   Introduction

This chapter reviews the legal and scholarly literature on policing and mental health. First, I discuss the legislative framework within which policing as a profession operates, and from which the authority given to police officers derives when handling mental health crises. This is followed in the second segment by scholars' views on what constitutes a mental health crisis and definitions of "mental illness". The definitions provide a frame of reference for the study. The remainder of the chapter discusses the issues of race, the role of social justice education in policing, and the transformative potential of a revised curriculum couched in critical pedagogy. I explore views on the efficacy of CIT and the usefulness of critical pedagogy as a tool to reform police education with an aim toward reducing negative outcomes from police encounters.

2.2   The legislative framework

My approach in analysing this social justice issue was to first highlight the legal parameters within which police officers are required to discharge their duties. Three key pieces of legislation are applicable to police conduct in Ontario. The *Comprehensive Ontario Police Services Act,* S.O. 2019, c. 1 sets out the guiding principles of diversity, community needs, and human rights by which policer officers are supposed to comply. The *Human Rights Code*, RSO 1990, c H.19, sets out the prohibited grounds for discrimination – which includes, among other grounds, race and disability. The *Mental Health Act*, RSO 1990, c. M.7 (*MHA*) gives police the power to take into custody, an individual who is displaying signs of mental distress that could cause harm to self or to

the public. Police are allowed to detain persons in crisis and transport them to a public hospital to be put under observation for 72 hours in a psychiatric unit. This default practice is similar to the Australian approach (McKenna, 2015). If the person is still experiencing symptoms of mental unwellness, voluntary detention in the facility may be extended. Detention for observation in a public hospital, could be extended indefinitely beyond that timeframe if there is no improvement in signs and symptoms. The guiding principles of the legislation governing police conduct provide a reference point to assess police training and practice, as they illuminate the gap between principle or theory and practice. For example, the *Mental Health Act* brought more people into the health system. This could be an advantage to persons in crisis as those in need of help can receive it readily. Concurrently, increased interaction with the police which is sanctioned by the same legislation, has its own perils.

The single, basic criterion for detention is that a police officer must have "reasonable and probable grounds" that a person is acting disorderly or will cause harm to self or others. This gives police officers great discretion in handling crises because the notion of "reasonable and probable grounds" can be highly subjective. This discretionary power can be a double-edged sword. Discretion can preserve the life of a persons in crisis when police exercise the option of transporting the individual to a mental health facility (Crisanti et al., 2014; Steadman et al., 2000). It can also prompt a decision to take no further action if satisfied that no harm will occur (Lamb et al., 2014). Sadly, police officers have often resorted to lethal force.

Officers' discretion varies based on perceptions of, and assumptions about, persons with mental illness (Patch & Arrigo, 1999). It hinges on the officer's personal predisposition to certain persons, issues, or groups based on theories and stereotypes (Schulenberg, 2014). Officer bias due to stigmatization of people with mental illness can drive the option to use excessive force (Ruiz & Miller, 2004). To make matters worse, lack of adequate information about a person in crisis after arrival at a scene can lead to bad decisions (Gillig et al., 1990). Thoughtful analysis then gives way to heuristics, which can be deadly. In the next section, I examine definitions of 'mental health' and what could constitute a crisis that can warrant police intervention.

2.3   Defining a mental health crisis

Mental health crises make up the majority of cases that police handle (TPS, 2014), but determining what constitutes a 'mental health crisis' is a fluid concept. The standard approach to determining matters related to mental health is to look for biological guidance for explanations. The standard psychiatric reference for practitioners, the Diagnostic and Statistical Manual, fifth edition (DSM-V), defines and classifies mental disorders for the purposes of diagnoses, treatment, and research. It states that a mental disorder is "a syndrome characterized by clinically significant disturbance in an individual's cognition, emotion regulation, or behaviour that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning" (APA, 2013: 38). The DSM-V details over 20 different forms of psychiatric disorders. Some common types of disorders defined in the DSM (editions one to five) include Major Depressive Syndrome, Bipolar Affective Disorder, Schizophrenia and

Schizoaffective Disorder – all of which can manifest in behaviours that trigger the call for police intervention. Symptom recognition and understanding exhibited behaviours are all a part of CIT; they are fundamental to options exercised by police officers and ultimately determine outcomes (Canada et al., 2011; Hanafi et al., 2008; Teller et al., 2006). How the police deal with the person in crisis depends on a number of other factors including personal characteristics, education, and training (Bonfine, 2014; Cordner, 2016; Compton, 2006; Chappell, MacDonald, & Manz, 2006; Thompson & Borum, 2006; Wells & Schafer, 2006). No single factor is determinative, and all are equally important.

Individuals who are experiencing mental health crises likely exhibit behaviours that may be harmful to themselves or others. A mental health crisis invariably involves suffering, or risk of harm as a result of mental disorder and/or addictions. However, what constitutes a mental disorder can vary based on cultural perspectives (Richmond & Gibbs, 2020; Wakefield, 1992). Biological factors can adversely affect a person's mental functioning (Wakefield, 2005) which leads to violent behaviour (Torrey, 1994), thus attracting police intervention. The trouble with the biomedical approach is that cultural expression can be confused with mental illness (Wakefield, 1992). This adds to the stigmatization of people simply based on labels and perceived differences (Read, 2007). What is considered 'abnormal' behaviour is subjective and may have meanings unrelated to mental health.

Herein lies a real dilemma in the grand scheme of law enforcement. A reservation that some police officers have about their duties is that they do not feel they are adequately

trained to handle a mental health crisis (Lamb, 2014; Watson & Fulambarker, 2012). A common challenge is not being able to tell mental illness from an incident of substance abuse. The signs can look similar (Bohrman et al., 2018). The job becomes even more complex for officers who do not understand cultural nuances or are not given sufficient exposure to communities they serve that would enable them to recognize and distinguish between health symptoms and cultural behaviours. The literature suggests that cultural ignorance can lead to fatalities if the exhibited behaviour of the person in crisis is misunderstood (Serreni-Massinger & Wood, 2016). I do not propose to downplay the risk posed to police officers during interactions with persons in crisis who are suffering from severe mental health disorders. In fact, there is a body of evidence which suggests that persons with serious mental illness – particularly those who are psychotic, do not take their medications, or are substance abusers – can pose significant risks (Soares & Pinto da Costa, 2019; Lamb, 2014). However, in situations where behaviours that can be misunderstood, especially in the absence of cultural familiarity, there is the risk of misdiagnoses during the triage process due to stigma (Wakefield, 2007). Without question, first responders' safety must be contemplated alongside the safety of the persons in crisis (Herrington & Pope, 2014). Meanwhile, the possibility that misunderstanding behaviours or social cues embedded in cultural peculiarities could lead to a person becoming the victim of lethal force is a harsh reality. This places the issues of training and readiness in the centre of the discourse.

2.4   The training regime

Training is fundamental to how police conduct themselves during interactions with the public (Blumberg et al., 2019). If officers are not provided with the necessary training to

handle persons in crisis (Richmond & Gibbs, 2020) it can result in negative outcomes (Herrington & Pope, 2014; Dupont et al., 2007). In some countries, police officers can receive all their training and advanced degrees, including PhDs, at a police university (Kratcoski, 2004). Some aspiring police officers receive pre-career police education primarily provided by public universities, public colleges, and career colleges (Huey et al., 2017). Regardless of location and methods of instruction, a recruit's in-service training and intra-professional curriculum can be a mystery to the lay person. It takes 24 weeks to become a Toronto police officer. New recruits attend a three-week orientation at the Toronto police training college followed by a 12-week session at the Ontario Police College. Training is concluded by returning to the Toronto college for the remainder of the time (Huey, 2017). Upon completion, it is expected that recruits are fully trained to fulfill the role of a police officer. The traditional police training that I preconceived before embarking upon this research was a quasi-military model which is the style imparted at training academies (Blumberg et al., 2019; Chappell & Lanza-Kaduce, 2010; Birzer, 2003). It was developed both from English and French traditions, and later adopted structures, policies, and practices from American police forces (Ross, 1995). It is noteworthy that the phrase 'police force' had traditionally been included in the title of police organizations. In fact, use-of-force has been the *sine qua non* of policing. The language has been softened to "police service" or "police department" presumably to connote a more community-friendly approach.

Police abuses of power have been attributed to this "militaristic structure and tradition for violence and brutality" (Garmany, 2014). Police officers generally perform key activities such as apprehension, arrest/detention, and use of force (Coleman & Cotton, 2008). The problem is the unreasonable or excessive use of force which often causes

death. Excessive force was a key consideration in the jury's deliberations and ultimate guilty verdict in the case of the murder of George Floyd in Minnesota in 2020. The 'reasonableness' inquiry in an excessive force case is an objective one: the question is whether the officers' actions are "objectively reasonable" considering all the facts "without regard to their underlying intent or motivation" (Mears et al., 2017). While harm or even death is always a possible outcome during a police officer's endeavour to protect health and safety, the probability of subjection to negative outcomes is disproportionately distributed among populations along lines of race, class, gender, sexuality, mental status, and ability (Gaber & Wright, 2016). CIT is intended to fill some gaps in traditional training which did not initially contemplate mental health crises as existing outside the scope of criminality (Watson & Fulambarker, 2012; Thompson & Borum, 2006) and will be discussed in the next section.

2.5   Crisis Intervention Training

Crisis intervention, simply defined, is the "process that focuses on resolution of the immediate problem through the use of personal, social and environmental resources" (Hoff, 1995). CIT, a social justice-oriented intervention, (Felix-Ortiz et al., 2021; Carr et al., 2014) is a concept diametrically opposed to traditional law enforcement training (Ellis, 2014). Old training models are, quite frankly, antithetical to social justice principles (Wood et al. 2020; Wolfe et al., 2020; Kratcoski, 2004; Stelkia, 2020). Discovering CIT as a part of police training was data in and of itself, which suggested that policing as an institution has begun to recognize (albeit via social and political pressure) the right of persons in crisis to be protected equally as any other person with any type of disability. Police officers are now required to complete at least 40 hours of

CIT annually. CIT is based on the Memphis Model which has two main components within the law enforcement partnership: the operational crisis intervention team and general criminal justice system participants. CIT is designed to enhance capacity building while ensuring public safety, and the literature indicates that co-responder interventions have resulted in improved opportunities for persons in crisis to access community-based services while reducing pressure on the justice system (Shapiro et al., 2015; Steadman et al., 2000) which should be reserved for general criminal matters.

Nurses are fundamental to CIT. Psychiatric nurses who accompany police officers on patrol are trained to detect what type of psychosis or suffering certain behaviours indicate. Collaboration with mental health practitioners is essential for teaching police officers to identify signs and symptoms of mental illness (Pescosolido et at. 2010; Watson et al., 2014, Compton et al., 2008). According to Ellis (2014: 12), the difference between nurses and police officers is that the latter lack the "advanced skills that encompass assessment, planning, intervention, and evaluation of the individualized treatment implemented". On the other hand, nurses may lack the tactical training that is required to ensure the safety of the people who occupy the same space at any given time. The two professions complement each other and in the process of operationalizing the crisis team, they are continuously learning from each other. This is a strong indication that police organizations have begun to realize that they cannot be linear in their approach to training. Professions that inherently involve encounters with the public require emotional intelligence in order to connect with people and resolve conflicts without death or injury.

2.5.1 The role of empathy

The CIT initiative is intended to encourage empathy by allowing police officers to communicate and interact in effective ways and to predict the actions, intentions, and feelings of persons in crisis (Galderisi et al., 2015; Ellis, 2011). As such, empathy is one of the most important character traits that a police officer should have (Birzer, 2008). An overly cynical police officer cannot take other people's perspectives into account (Perez, 2010). Soft skills are applied easier if officers are empathetic. I adopt Inzunza's definition of empathy which is "the attempt of a self-aware person to comprehend without making judgements on both the positive and negative experiences of another" (2015: 60). Using a phenomenological approach, Birzer (2008) found that members of an African American community in the United States felt that empathy is one of the most important attributes of a police officer. There is potential for empathy to be learned if the CIT curriculum creates the opportunity to facilitate this type of human-centered approach to learning through strategic partnerships and, most importantly, the community (Chen et al., 2020; McNeilly, 2017). To this end, I argue that critical examination of the historical and social circumstances of the marginalized and how they arrived at their current situations should be taught at police colleges. Understanding the social determinants that increase the likelihood of developing a mental illness or substance use problem (McKenzie et al., 2016) is crucial to positive engagement.

Attitudes toward physical pain or distress have implications for how a police officer may show empathy towards a racialized person. Researchers have found that, even in pain treatment, Black people receive less treatment and less empathy than their White counterparts. Participants with a pro-White treatment bias had pro-White empathy

(Hoffman et al, 2016). Empathy in policing cannot be understated as it allows a person "to comprehend without making judgements on both the positive and negative experiences of another" (Galderisi et al., 2015: 60). Changing how a person thinks can change how they feel (Lietz et al., 2017). If a police officer can engage and empathize with marginalized peoples, it can develop their emotional intelligence. Education allows engagement with the compassion within by disrupting any prevailing mindset of police officers to use excessive or lethal force. Through a race critical lens, empathy involves recognizing and appreciating the challenges faced by people of colour in society. When one considers the role of policing in a multicultural society, the notion of ethnocultural empathy is fundamental in reducing prejudice. Individuals are prone to empathize with persons with whom they share these characteristics (Rasoal, 2009; Wang et al., 2003). On the contrary, some police officers might hold ethnocentric views that fuels discriminatory treatment of others from a different background. To counter the dilemma wherein ethnocultural empathy wrestles with ethnocentrism, strategic allocation of human resources in neighbourhoods where officers share the same ethnicities or have cultural competence (Tarver et al., 2020) is a worthwhile consideration.

Overall, effective policing has always required a unique combination of physical, cognitive, emotional, and interpersonal skills (Blumberg et al., 2019). Policing, especially in a diverse city, requires culturally nuanced communication skills. Police organizations should, as an imperative, review law enforcement and supporting social services collectively through a social justice lens. Mental health affects society as a whole, but policing marginalized communities require nuanced approaches to learning in order to protect against a mental health crisis being synonymous with life for some

and death for others. In 2019, a mental health strategy document released by the TPS stated: "The [TPS] acknowledges that social categorizations can create barriers due to prejudice and discrimination which can lead to conscious and unconscious bias within the service and in the delivery of police services" (TPS, 2019: 14). This is implied acknowledgement that the TPS needs to change its thinking toward training.

Traditional training places great emphasis on physical restraint which often times lead to death. There are alternatives. Equipment has been revolutionized and modernized, consisting of non-lethal tools to subdue an individual if the behaviour warrants it. Such equipment includes conductive energy devices (CEDs), tasers, and oleoresin capsicum (OC) – known more commonly as pepper spray (Haskins, 2019a; 2019b). These devices have been found to significantly lower injury both to officers and civilians (MacDonald et al., 2009). Rubber bullets are another form of projectile that can cause significant harm, but does not necessarily cause death if used carefully (Haar et al., 2017, Dhar et al., 2016). Even the decision to deploy non-lethal methods still requires reasonableness because if recklessly deployed or used excessively, these devices can still cause death (Haskins, 2019a). The difference rests within the ability to apply emotional intelligence. Didactic approaches to training and education have done little to move the needle toward a more social justice-focused police service. As society becomes more racially and culturally diverse, it is increasingly prudent that policing strategies become nuanced to effectively connect with civilians in their respective communities. Current crisis training attempts at doing so by modelling the Memphis Model in its course syllabus.

2.5.2 The Memphis Model

The Memphis Model, which is the framework for many crisis intervention programs, brings together two distinct, professional fields that complement each other to meet the needs of law enforcement and mental health crisis management. The Memphis Model is a good example of drawing upon best practices from other jurisdictions. Like the reaction to several incidents resulting in death, the Memphis Model was developed after police in Memphis, Tennessee in 1987 shot and killed Joseph Dewayne Robinson, a young Black man, after his mother called for police assistance during his mental health crisis (Rogers et al., 2019). A year later, the Memphis police created the model in collaboration with the National Alliance on Mental Illness.in (Coleman & Cotton, 2014). The Memphis Model takes into consideration a multiple-stakeholder approach to crisis intervention. Criminal justice and health professionals such as mental health court team members, jail administrators, and emergency room administrators can present relevant legal issues, their interactions with law enforcement, and the adverse impact of the high volume of mental health cases on their systems (Reuland & Schwarzfield, 2008). The multiple-stakeholder approach demonstrates that caring for the most vulnerable "takes a village". Families can assist the police with information which can relieve some of the burden and uncertainty at the scene (Reuland & Schwarzfield, 2008). The rationale is that such persons are uniquely qualified to promote a compassionate response from officers who often see people with mental illnesses only when these individuals are in crisis. An overview of the areas covered in CIT models show that the notion of 'community' is integral to its success. Aside from the mandatory 40-hour training and

the extended and advanced training, all other elements of the model are support and resource oriented.

ONGOING	Partnerships: law enforcement, advocacy, mental health	A. Law enforcement community B. Advocacy community C. Mental health community
	Community ownership: planning, implementation and networking	D. Planning groups E. Implementation F. Networking
OPERATIONAL	CIT: officer, dispatcher, coordinator	A. CIT officer B. Dispatch C. CIT law enforcement coordinator D. Mental health coordinator E. Advocacy coordinator F. Program coordinator (multi-jurisdictional)
	CIT	A. Patrol officer: 40-hour comprehensive training B. Dispatch training
	Mental health receiving facility: emergency services	A. Specialized mental health emergency care
SUSTAINING	Evaluation and research	A. Program evaluation issues B. Development research issues
	In-service training	A. Extended and advanced training
	Recognition and honours Outreach: developing CIT in other communities	A. Outreach efforts

(Dupont et al., 2007)

Table 1: The Memphis Model

Resources are crucial to the effectiveness of the entire model. The capacity to support trained officers is often the biggest challenge (Koziarski et al., 2020) to crisis intervention. Training incorporates elements of the ongoing, operational and sustaining protocols of the Memphis Model. It supplements course materials by using online modules, which are a feature of the TEMPO approach. These training models are designed to build the confidence of first responders, including police officers, as well as

those from other disciplines such as emergency medical services, when dealing with persons in crisis (Coleman & Cotton, 2010).

TORONTO POLICE SERVICE					
CRISIS INTERVENTION TRAINING (CIT) LEVEL 1 COURSE					
Introduction to MCIT and mental health	Vulnerable persons, communications, and partnerships	Mental health legalities & police procedures	Complex situations	Mental health disorders	Scenarios and tactics
• Pre-test • MCIT overview • Call triage chart • Data collection • The role of the nurse and officer • Understanding mental illness and debrief • Strategies	• Trauma informed crisis • Care • Seniors and mental health • Autism and mental health • Communications • Critical incident response team	• Interview techniques • Office of the independent • Review police directorate • Special investigations unit	• Mental health court not criminally responsible	• What are they? • What do they look like? • How to respond • De-escalation • Suicide by cop • ETF responding to mental health calls	• Use-of-force safety Training • Scenario training/ roleplay • Intercultural communications (added in 2020)

Table 2: The Toronto Police Service: Level 1 CIT course syllabus

According to Ellis (2011: 14), "the CIT concept is easily integrated into the construct of psychiatric mental health nursing model which involves incorporating the caring principles of empathy, active listening, and a nonjudgmental attitude". Elements of the Memphis Model are reflected in the CIT curriculum which is taught over the course of 5 days in Toronto. Some core areas include symptom recognition, assessment of suicidal intent, behavioural management strategies, applications of mental health legislation, and access to services appropriate to the circumstance of the persons in crisis.

The language under the 'Ongoing' rubric of the Memphis Model (Table 2) suggests the necessity of a *Gemeinschaft* praxis (van Deventer et al, 2015) involving collaboration between the law enforcement community, advocacy community and mental health community. Canadian police have carved out their own nuanced model which is similar in many aspects to the Memphis Model by combining existing training materials including lectures, role plays, audio and visual aids, written sources and online materials in course delivery (Coleman and Cotton (2010). Some police jurisdictions provide little to no training for their officers, whereas others may provide lengthy and comprehensive training (Cotton & Coleman, 2010; Coleman & Cotton, 2008). Overall, CIT varies in length and content across jurisdictions (Table 3).

BRITISH COLUMBIA (Provincial)	VANCOUVER (Municipal)	PEEL (Municipal)	TORONTO (Municipal)
Duration: 4 days	Duration: 3 days	Duration: 4 days	Duration: 5 Days
• Mental Health Disorders & Common Medications • Developmental Delay & Fetal Alcohol Spectrum Disorder • Posttraumatic Stress Disorder • Early Psychosis Intervention • B.C. Mental Health Act - Role of Police, Physicians & Paramedics • Criminal Prosecution of the Mentally Ill • Risk Assessment for First Responders • B.C. Schizophrenia Society (BCSS) Interactive Client & Family Panel • Adult Guardianship Act & Community Resources • Victim Precipitated Homicide "Suicide by Cop" • Health Authorities and the Police • Disclosure Issues • Crisis Communications Skills • EDP Simulations/ Role Play with Ralston Studio Actors • Stand Up for Mental Health – an anti-stigma through client comedy troop; • Cultural Awareness and Implications	• Mood Disorders • Depression, suicide • Early psychosis intervention and schizophrenia • Geriatric mental health • Developmental disabilities • Drugs and psychosis • Critical incidents, post-traumatic stress disorder (PTSD) and self-care of the officer • Police tactical considerations • Victim-initiated homicide/ "Suicide by Cop" • Crisis intervention with a psychologist -focus on communication theory and strategies for first responders • Practical application through role-play(s)	• Pre-test • Introduction to mental health by a psychiatrist. • Presentation on/simulation of de-escalation and suicide intervention • Autism and vulnerable people • Dual diagnosis • Youth and mental health issues • A presentation by/engagement with a "survivor family" • Presentation of the justice system • Mental Health Court	**Introduction to MCIT & Mental Health** • Pre-Test • MCIT Overview • Call Triage Chart • Data Collection • The Role of the Nurse & Officer • Understanding Mental Illness & Debrief • Strategies **Vulnerable Persons, Communications, & Partnerships** • Trauma Informed Crisis • Care • Seniors & Mental Health • Autism & Mental Health Communications • Critical Incident Response Team **Mental Health Legalities & Police Procedures** • Interview Techniques • Office of the Independent • Review Police Directorate • Special Investigations Unit **Complex Situations** • Mental Health Court, Not Criminally Responsible **Mental Health Disorders:** • What are they? • What do they look like? • How to Respond • De-Escalation • Suicide by Cop • ETF Responding to • Mental Health Calls **Scenarios & Tactics** • Use of Force Safety Training • Scenario Training/ Role Play • **Inter-Cultural Communications** (added in 2020)

Table 3: Multi-jurisdictional CIT

Assessing the Memphis Model and derivative frameworks through a critical race lens, the constituent courses are developed and organized from a White normative perspective which maintains the training-as-usual format. Core areas such as symptom recognition and stigma are addressed, but silent on the issue of race. It is important to keep in mind that the training frameworks were borne out of incidents of racial discrimination leading to death. It is thus peculiar that the topic of race is avoided. The curriculum displayed in Table 2 contains the addition of a course entitled Intercultural Communications. On its face, without providing a definition or attending this class, the subject title suggests an effort to understand forms of expressions peculiar to the different ethnic groups in a diverse city.

Learning how to communicate across cultures is prudent to effective policing; no one can argue with that. It would be particularly helpful to first responders who have direct interactions with persons in crisis daily. Wakefield's (1992) critique of mental health definitions is that it ignores the issue of cultural expression which can be misconstrued as mental illness. Communication is just one factor in complex issues affecting Black communities, such as race, gender and mental health stigma. Adding Intercultural Communications to the syllabus seems to be as close as it comes to addressing an issue that might eventually bring race into the discussion. The avoidance of direct, race-related pedagogy indicates a reluctance to addressing racism in earnest. Rather than deploying ambiguous titles and questionable substantive content, I suggest that the issue of race needs to be addressed forthrightly.

CIT initiatives are not unique to Canada; they are becoming more widespread throughout the world (Silverstone et al., 2013). Other jurisdictions have directly addressed the issue by admitting that systemic racism exists in policing (McKay, 2021; Souhani, 2014). Barriers are also being broken by way of extensive engagement between professions by academics, police management, and co-designed curricula, research, and evaluations (Bartkowiak-Théron, 2019) which are strong indicators of the ability to develop a more comprehensive training curriculum that addresses the plight of our most vulnerable citizens. Livingston et al. (2013) found that various police departments were doing a "reasonable job" of training officers for basic situations, but there was much room for improvement when it came to dealing with persons in crisis. So far, specialized training in CIT has had positive effects on police officers' capacity to handle mental health crises (Koziarski et al., 2020; Compton et al., 2015; Bonfine et al., 2014; Ellis, 2014; Hansson & Markström, 2014; Skubby et al., 2013; Wells & Schafer, 2006), and has been credited for improving attitudes toward people with mental illness while improving mental health literacy (Ellis, 2014). CIT boosts officer confidence and preparedness in handling crises (Bonfine et al., 2014). These are all positive indicators of reform on which police organizations ought to capitalize and continue to build. Applying a race critical lens shows that systemic racism in policing is a gap that still needs to be addressed (DeAngelis, 2021; Gaber & Wright, 2016; Chiasson, 2004), failing which, the disparity in outcomes for persons in crisis will persist. Police organizations need to own their own faults and correct them. In the next segment, I discuss the transition from pedagogy to praxis in the form of MCITs deployed as first responders to mental health crises.

2.5   Mobile Crisis Intervention Teams

Police officers are usually first responders to mental health and addictions crises, and MCITs were established as specialist teams to provide crisis intervention and to prevent deadly outcomes when attending to calls (Lamanna et al., 2015). MCITs are generally comprised of police officers who have mental health training (Booth et al., 2017) or a co-response model such as Toronto's where mental health professionals, usually nurses, assist the police during incidents by triaging cases on the spot (Puntis, et al., 2018). The general aim of the street triage is to introduce mental health expertise during the encounter to reduce the likelihood of detention of the person in crisis and reduce the distress caused to the apprehended (Puntis et al., 2018). In some jurisdictions, after CIT an officer may be dispatched to the mobile team. The rationale behind co-response models is that de-escalation attempts are made upon contact and interaction as the nurse's presence increases the persons in crisis's level of trust and anticipation of care. Within this arrangement, the function of the police officer is mainly one of security and protection, and de-escalation is the preferred method of interaction rather than use-of-force (Blaise & Brisboise, 2021). A police officer would likely lack the requisite skill and judgment to properly triage a case. Therefore, the nurse's role has significant implications for the allocation of sometimes scarce hospital resources, which is a challenge for the police (Compton et al., 2015). Nurses are best prepared, through mental health training, to make an assessment without defaulting to detention and hospitalization, thus freeing up resources in these facilities. The co-response team can also improve the management of people showing suicide-related behaviours (Blaise & Brisbois, 2021). Like other interdisciplinary initiatives, mobile crisis intervention can be

fraught with problems notwithstanding successful implementation in some sectors (Brooks & Thistletwaite, 2012).

2.5.1 Challenges face by Mobile Crisis Intervention Teams

The MCIT serves as the main resource strategy toward achieving positive outcomes from crisis intervention, but the lack of adequately trained human resources is highly problematic (Koziarski et al., 2020; Compton et al., 2015; Borum, 2000). Other operational complexities identified within the cross-sectoral partnership are hospital or emergency room wait times (Steadman et al., 2000), increasing calls for service, and lack of funding (TPS, 2018). Compounding the problem are insufficient warnings about specific situations; inadequate information systems, lack of on-the-scene consultation, and lack of support from the acute care mental health system (Adelman, 2003). The MCIT operates seven days a week. Depending on the team, some start as early as 11 a.m. and work until 9 p.m. The hours are based on the times when the police receive the highest number of calls related to mental health. The 14-hour gap is filled by PRU officers who are generally available 24/7 (TPS, 2020). During this gap, the risk is that there might not be sufficient specialized training to handle mental health crisis calls (Koziarski et al., 2020; Compton et al., 2015; Canada et.al., 2012). Officers who do not feel that they are adequately trained tend to experience stronger feelings of anxiety and fear (Borum, 2000) which can lead to negative outcomes. My discontent with a two-tiered level of training lies within these realities.

Although basic training is the same for all police officers, untrained officers have fewer opportunities for real, practical experience and exposure to persons in crisis (Wood et al., 2017). Crisis intervention becomes an even more amorphous task for the untrained. The reaction to uncertainties includes resistance to the co-response model includes being unclear about their roles as law enforcers (Meehan, 1995) in this "gray zone" of service (Wood et al., 2017:1). Confusion often results from a failure to provide clarity on the expectations of the co-response model (Kirst et al., 2016). It is therefore incumbent upon leadership personnel to clearly articulate the purpose of CIT across a profession where officers are conditioned to using force.

I contend that how an officer responds to mental health training should be a litmus test to signal whether they are fit for policing as a career, but it should be detected early at the recruitment stage. Ellis (2014) argues that the psychiatric mental health nursing model which involves incorporating the caring principles of empathy and being non-judgmental are universal concepts, and police as a matter of social responsibility should adapt. I agree. Individual officers have a responsibility to accept assigned duties in a wider context by cooperating with other societal organizations such as mental health facilities (Inzunza, 2015) as a matter of policy. If they cannot make the effort or are resistant to change, I further contend that they are not suitable for the profession as whole. If the majority of calls that police respond to are mental health related (TPS, 2014), it follows that they should either accept the realities of the job or seek alternative employment.

Until the recruitment and training deficiencies are addressed, for the time being, it makes sense that mental health crisis intervention remains a specialist role reserved for experienced officers who voluntarily apply for a position on MCIT and meet specific criteria. Currently, the requirements include having at least three years' experience as a police officer (Bonomo et al., 2019). The rationale is that an experienced Mobile Crisis Intervention police officer would be less prone to react with force when a crisis can be resolved through communication and de-escalation techniques (Richmond & Gibbs, 2021). In the meantime, there should be a sustained effort to recruit, train and bring more officers into the role until crisis intervention becomes a part of standard practice.

Summary

In this chapter, I discussed the legislative frameworks within which police services are administered. The intent was to situate policing within a legal and compliance theoretical framework, then transition the discussion to the actual application of law enforcement. This was followed by framing the discourse within definitions of mental health that take on varying perspectives from the biological to the cultural. The biological approach considers psychiatric diagnoses under the DSM V, while the cultural considers the risk of misinterpretation of cultural cues or misguided notions of what constitutes (ab)normal behaviours. Next, the evolution of training methods was discussed with the move away from a use-of-force and paramilitary-style to a more service-oriented approach (Blumberg et al., 2019; Chappell & Lanza-Kaduce, 2010) suitable for mental health crisis intervention. Now, CIT modules are based on the Memphis Model framework which stresses de-escalation training, stigma, and symptom recognition. This involves a multiple-stakeholder approach to problem solving as a

means to integrate support systems including criminal justice, health professionals, family, and community services to facilitate crisis intervention. The paradigm shift suggests a tacit recognition that police education should not only instruct on how to keep a community safe, orderly, and crime-free; it should assist the vulnerable among us in getting the help they need. Police interactions and interventions now engender a compassionate, humanistic approach (EUAFR, 2019; Police Scotland, 2017) and the operationalization of CIT through the dispatch of mobile teams has had positive outcomes. Challenges abound, however, as specialized teams lack necessary resources such as funding, overburdened emergency rooms and inadequately trained officers. Another major obstacle is that some police officers do not buy into initiatives that deviate from traditional modes of training and education, and their resistance could militate against change. In the next chapter, I delve deeper into the tensions between the police and the public that are exacerbated by each news report of a deadly outcome between persons in crisis and the police.

Chapter 3:   Social (in)justice and Policing

3.1   Introduction

There is a global consensus that police training does not align with social justice (Wood et al. 2020; Wolfe et al., 2020; Kratcoski, 2004; Stelkia, 2020). Training has traditionally failed to recognize the diversity of realities and cultural differences that make up society. Fraser (2009) argued that social justice is a recognition and acknowledgement of differences such as race, gender and ethnicity. The replication of unjust, oppressive education is a failure to embrace the differences that are weaved into the fabric of our social existence. Repeating archaic modes of police training yet expecting different outcomes, signifies institutional naivety. As a deliberate strategy to maintain the hegemonic ruse that benefits the powerful (Neocleous, 2000), it is equally naïve to expect that marginalized peoples will perpetually tolerate social injustice.

3.2   The role of the media

I argue that the media play a powerful role in shaping our interest in, and our response to social justice issues. Much of what we know about police conduct is by way of news reports. The information they disseminate influences the attitudes, opinions, and our beliefs (Lovell, 2001). The combination of print, broadcast, and social media – especially the latter more recently, where information is shared at lightning speed – have kept us apprised of cases involving police killings. Regardless of the geographic occurrence, social media platforms, in particular, have proven how a police incident in one community can influence attitudes toward police across the world (Oglesby-Neal, et al., 2019). The evidence suggests that efforts to address the policing of persons in crisis

have been reactionary (Watson et al., 2021) and usually occurs following incidents involving fatalities which become widely publicized in the media. For example, the TPS established the first MCIT in 2000 based on a recommendation from the 1994 coroner's inquest into the death of Lester Donaldson, a Black male shot by a TPS officer in 1988. Likewise, the Memphis Model was as a result of the police killing of a Black teen in Memphis, Tennessee. Programs such as the Memphis Model and CIT in Toronto were designed in response to media exposure, community mobilization and political pressures after controversial incidents involving police killings (Wolfe et al., 2019).

Incidences of excessive or unreasonable force which are broadcast across media platforms can weaken police-citizen relations and overall social cohesion (Carmichael & Kent, 2014). There is a wealth of evidence that marginalized peoples resent and distrust the police (Greer et al., 2021; Card et al., 2021; David & Mitchell, 2021; Alberton et al., 2019; Craig & Richeson, 2016, Owusu-Bempah, 2014, Bradford & Jackson, 2010; Brunson & Miller, 2006). The distrust of the police can negatively affect public interactions (Kouyoumdjian et al., 2019; Brink et al., 2011) and negative public perception of the police delegitimizes them. The historical treatment of Black people by the Toronto police, for example, has created a hostile relationship between those communities (Ezeonu, 2008). Without the support of the public, they cannot be effective (Franklin et al., 2019). The lack of trust is directed toward both White and non-White officers criticized for using unnecessary force on community members (Trinkner, et al., 2019). The effect of hegemony is that all police officers are lumped together as one unit of oppression regardless of their race.

To counter negative publicity, police have the choice and opportunity to use the media to communicate positive initiatives to gain trust. They simply have not done this well (Mehta, 2013). This includes promoting public awareness about CIT and the existence of mobile teams. The police use the media to disseminate information about crime and to influence the discourse on crime (Ezeonu, 2008; Wortley, 2002; Sacco, 1995). It is arguable, therefore, that they are not doing a good job of communicating positive messages such as education reform initiatives. They have only themselves to blame for influencing bad press, especially in their treatment of Blacks (Ezeonu, 2008; Wortley, 2002; Sacco, 1995) and should not cry foul when stories about killing persons in crisis surface and present them in a bad light. In the next segment, I discuss the phenomenon of anti-Black racism in policing – a continuous and frustrating reality.

3.3   Anti-Black Racism

Anti-Black racism is a persistent and seemingly perpetual problem. Public pressure and organizations such as Black Lives Matter have become gadflies for provoking change and re-opening conversations about systemic, anti-Black racism and the need to reconsider institutional practices (Gaber & Wright, 2016). It is crucial that Anti-Black racism is not seen as merely a binary phenomenon of Black versus White (Alcoff, 2013); it is racism wherein other races also discriminate against Black people (Yi &Todd, 2021; de Lima et al., 2019; Sautman, 1994). Rooted in slavery and being associated with dark skin, anti-Black racism is prejudice, stereotyping, and discrimination directly targeted toward persons of African descent by people of all other races.

At a macro level, racism has been a prominent feature of Canada's social fabric (Giwa et al., 2020) and policing as an institution is a microcosm of this broader fabric that frequently exhibits evidence of racism. Gilmore (2007: 18) calls racism within policing "the state-sanctioned or extra-legal production and exploitation of group-differentiated vulnerability to premature death". Given the many high-profile cases of persons in crisis dying during police interactions (see Appendix A), premature death is a harsh reality that highlights the imbalance between institutions of power and the subaltern. The most recent, notorious case of anti-Black police racism was that of George Floyd, a Black man who was murdered by a Minneapolis police officer. The convicted murderer was married to an Asian woman at the time of the incident. The inference that can be drawn from his family status is that while he might not hold prejudice against another race, how he treated a Black person demonstrates the raw, riveting reality of anti-Black racism as a distinct phenomenon. The entire incident was recorded on video and broadcast across the world. Floyd who was apprehended by the police for allegedly tendering a counterfeit $20 bill in a convenience store, was accused of being under the influence of drugs during the interaction, though not proven to be true. I reference the George Floyd case because the defence lawyers for the convicted murderer attempted to characterize the victim as a drug addict. In my view, George Floyd's demise falls squarely within the disability discourse. If the defence team premised their case on conjecture about George Floyd's mental health and addiction problems, then the inference is that addicts deserve to die. Such is the stigma associated with mental health and addiction. This is exacerbated by the stigma of being Black. George Floyd's murder may have been a tipping point in police organizations' practices concerning use-of-force across the globe. The ready use of cameras and the wider dissemination of video evidence across media

platforms are now forcing the hand of the police to finally do something about its abuse of power.

Racism in policing has received judicial acknowledgement even in the Province of Ontario's Superior Court of Justice. One of the most riveting denunciations was made by the court in the case of *Peart v. Peel Regional Police Service Board*.[1] The court took judicial notice that racism is prevalent in the criminal justice system, and that racial profiling is tantamount to criminal profiling based on race. Likewise, Canada's highest court, the Supreme Court of Canada, made a similar pronouncement in the case of *R. v. Le* citing from Fitzgerald & Carrington (2011): "members of racial minorities have disproportionate levels of contact with the police."[2] With this acknowledgement of racism in the nation's highest court, it was apropos that Toronto's police chief requested Justice Iacobucci to lead an inquiry into police interactions with persons in crisis. One of the deficiencies in policing discovered by the Iacobucci Inquiry was the lack of education and training in mental health issues. He concluded that a collaborative approach to learning between law enforcement, the justice system, social work, health practitioners, and the community was missing from police training (Iacobucci, 2014). The high-profile cases cited in this study demonstrate a history of inquiries and reactionary policies only after catastrophic incident occurs.

Not only have programs such as CIT been given more attention by researchers and scholars, the admission of racialized persons into policing has increased (Perot, 2021). Arguably, initiatives to increase minority hiring in policing were borne out of political

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[1] Peart v. Peel Regional Police Services, 2006 CanLII 37566 (ON CA).

expediency and not due to a progressive shift in organizational culture (Conti & Doreian, 2014). Nonetheless, there is a benefit to be derived from this attempt at reform that goes beyond mere tokenism (Stroshine & Brandl, 2001). As Wolfe (et al., 2019: 4) posit: "The political nature of policing often forces police managers to pursue new training programs in response to controversial officer-citizen encounters in an attempt to 'do something' about a problem." Addressing dangerous police interactions requires recruiting officers who can connect to diverse communities by possessing the fundamental cultural competence to do so (Tarver et al., 2020; Serreni-Massinger & Wood, 2016). Although studies on policing and mental health in Canada are few, there are even fewer on topics of diversity and education. The Iacobucci Inquiry prudently recommended that training incorporate lectures, visits to mental health treatment facilities, community outreach by interaction with people with mental illnesses who are not currently in crisis, and practical scenario-based training (Iacobucci, 2014). Remarkably, it did not bluntly call out institutional racism as an issue to be addressed in police education.

From a policy standpoint I contend that the 2014 inquiry although impactful in some areas of reform, missed an opportunity to include 'institutionalized racism' or 'systemic racism' as conceptual language (Souhani, 2014) to facilitate change and address a persistent problem with greater urgency. This silence on the issue of race was glaring in the CIT course syllabus. It was likely subsumed within the topic Intercultural Communications (TPS, 2020) and not presented as a stand-alone topic, as it should be. I can only speculate about the omission because the TPS did not divulge the course

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[2] R. v. Le 2019 SCC 34 at para. 90.

content for the Year 2020. It could be the case that at the time I inquired, the course designers were unsure what the course content should entail. This is an issue that is worth revisiting in future research.

One theory of the exclusion of race is in some circles is that, for some, it is an uncomfortable issue to discuss (Acosta et al., 2017) and can create unease depending on one's views on race, society, and social justice. It is unlikely that a judge of the Supreme Court would be uncomfortable especially when there is case precedent acknowledging racism in the criminal justice system. I suspect that the Iacobucci Inquiry sought to skilfully find a delicate balance between addressing the phenomenon of racial disparity and not alienating some police officers. After all, public discussions about race often unnerve the racially privileged or those unwilling to challenge the White normativity which has been oppressive to people of colour especially if they are poor (Orelus, 2013). However, within institutions of power that have been criticized for racial abuses, subverting discourse on race can perpetuate oppression even further at both the individual and systemic level (Chiasson, 2004). The issue of race is inextricable from the issue of mental illness stigma, and will be discussed next.

3.4   Disability stigma

It is a generally accepted view that society attaches stereotypes to Black people. Society also stigmatizes persons who experience mental health challenges (Rao et al., 2019; Link et al., 2018; Corrigan & Penn, 1999). There is a reasonable expectation of the public that the police will not stigmatize anyone, regardless of disability and police in performance of their civic duties, and ought to be held to a higher standard than the general public. The basic principle of policing is to serve and protect all members of the

community it serves. It has a *parens patriae* duty, through its legislated mandate to protect the best interests of disabled citizens, including persons experiencing mental health crises (Kara, 2014).

Stigma-informed training is fundamental to countering the destructive force of prejudice. The literature indicates that the training component of the CIT model may have a "positive effect on officers' attitudes, beliefs, and knowledge relevant to interactions" (Booth et al., 2017: 7) with persons in crisis. CIT has had measurable impact mainly in the area of officer-level outcomes (Rogers et al., 2019). There is insufficient evidence, however, of its effectiveness in terms of reducing lethal force during police encounters with persons in crisis. Aside from anti-stigma education, none of the abovementioned studies have indicated whether anti-oppressive pedagogy was included in the curriculum. Notwithstanding the positive research findings on mental health initiatives that have enhanced police work, there is a dearth of research on the role of other forms of anti-oppressive education. This leads me to conclude that they have not fully grasped the urgency of addressing racial discrimination. With more attention being drawn to the issue due to highly publicized cases, I anticipate that in the years ahead, there will be more evidence-based findings on the effect of education on police conduct.

Police killings are subject to oversight by independent authorities, yet controversial killings of persons in crisis over the last two decades have occurred with relative impunity. In 2017, a Commission of Inquiry led by Court of Appeal Justice Michael Tulloch, who is Black, was appointed to investigate police and oversight procedures. Justice Tulloch provided the government with recommendations on ways to enhance

the transparency and accountability of the Province of Ontario's three police oversight bodies: the Special Investigations Unit, the Office of the Independent Police Review Director, and the Ontario Civilian Police Commission. Justice Tulloch's inquiry was prudently conducted through a race-focused lens. Like the Iacobucci Inquiry in 2014, it resulted in recommendations for change to police training. Tulloch (2017) recommended a total overhaul of the training curriculum with greater emphasis on anti-racism pedagogy and mental health. Three key recommendations were: mandatory social and cultural competency programs, ongoing training in partnership with the communities, and collection of race-based data in apprehensions to provide evidence-based public policy and decision-making.

Evidence-based policing supports the view that pedagogy needs to be updated to keep pace with the realities of policing persons in crisis (Lorey & Fegert, 2021) as training concepts become outdated over time. As society becomes more racially and culturally diverse, it is increasingly prudent that policing strategies are nuanced to effectively connect with civilians in their respective communities. Since the Tulloch Inquiry, the TPS has made efforts to incorporate a more socially-just approach in its curriculum though CIT by including symptom recognition, communication techniques, and de-escalation. Yet again, its education reform remained silent on critical race pedagogy. This would be a radical shift in a deeply embedded police culture. The repeated oversight signals that this is a subject the police is not fully ready to embrace. The following section looks at the powerful influence of police culture on praxis.

3.5 Police culture

Police culture plays a significant role in shaping policies with respect to the choice of training methods used by the police. Birzer (2003) argues that past methods of training need to be critically examined, and that the authorities involved in police training need to have specific knowledge of the most effective methods of learning. It is "the matrix within which all strategies originate and develop" and one which "wields a powerful and almost irresistible influence" (Koch, 2010: 92). Although positive gains have been made in addressing injustices particularly pertaining to persons in crisis, a police culture which replicates practices from one generation of police officers to the next, is counterproductive. Police culture may be defined as a comprehensive set of beliefs and behaviours shared by all police officers, which is built through socialization and professional solidarity (Crank, 2004). Unfortunately, it is often based on the friendships formed within the police organization rather than the rule of law (Cerrah, 2008). Ideally, for citizens, the state should be unbiased. Social justice advocates are forever striving to achieve this Utopia. There is already a negative and pervasive mentality that the public is against the police (McCartney & Parent, 2015) and that they are under siege (Gaines et. al., 2003). Filling the gap with policy and procedures that challenge what has become the norm, could be construed by the police as an attack on law and order. As Ezeonu (2010:149) states, the police have a "perennial discomfort with, and suspicion of, social changes, especially those that they believe threaten the social order". The broad discretionary powers bestowed upon police officers allows them to maintain the power that the state desires. Resistance to change is a hurdle that is not easily overcome as it is supported by a hegemonic tradition and officers are arguably

just carrying out the mandate of the state (Neocleous, 2000). In other words, police culture can make or break the implementation of any program designed at reform. If we go back to the issue of basic training, traditional methods – many of which are ingrained in police culture – are problematic. The punitive, and authoritarian environment (Birzer, 2003) favours excessive force. The training produces a quasi-military archetype that people are accustomed to seeing on television and in the news. After all, police culture is a product of the environment that feeds it (Skogan & Frydl, 2004). This is inflamed by the strong sense of fraternity that is grounded mainly in the shared dangers associated with the job (Skolnick, 1975) and a duty of loyalty to each other (Skolnick & Fyfe, 1993).

If we dissect the culture into two distinct segments the occupational and the organizational, there is a clearer pathway to addressing the issues. Occupational culture within policing is developed throughout diverse situations and problems which all members confront and to which they all equally respond (Crank, 2004; Paoline, 2003). It mainly involves the police interfacing with the communities they serve, while the organizational aspect of the culture relates to the behind-the-scenes interactions between peers and superiors (Paoline, 2004). Organizational culture, on the other hand, is sustained through camaraderie and shared, private experiences that the public does not see. New recruits are socialized and inducted into the police subculture, enabling it to continue as it is passed on to the next set of recruits (Newburn & Reiner, 2007; Volti, 2008) and the cycle of behaviours – good or bad – regenerates with each new cohort. In addition, the traditional association of masculinity and police work which is perpetuated as early as the police college has great, lasting impact (Ness, 1991).

I maintain that the infusion of police education that aligns with social justice principles has the potential to change culture. Perhaps I am being overly optimistic in my outlook, as culture is reproduced through the education imparted within the profession and deviant activity, bad attitudes, values, and beliefs can be transmitted in the process (Kappeler et al., 1998). Changing culture would require an organizational overhaul by being deliberate in new approaches to teaching and learning starting behind the scenes at the police college. It comes down to a matter of who among the police will be so bold as to implement radical changes at the risk of being seen as anti-establishment (Chawla & Rodriguez, 2001; Hooks, 2003; Shor, 1996). Given the potency of police ethos, a teacher in a police college who seeks to disrupt traditional curriculum could be faced with institutional constraints that are deliberately maintained to support the power imbalance between law enforcement and the public by use of force. Challenging dogma often comes with a price, and the teacher could be labelled as a troublemaker (Chawla & Rodriguez, 2001; Hooks, 2003; Shor, 1996). For instance, Peter Sloly, a Black police chief in Ottawa, Canada created a schism within the police organization for admitting that systemic racism exists in policing. The majority of rank-and-file officers saw it as an attack on the profession. Perhaps the most certain way to achieve substantial change is to codify critical pedagogy into law.

3.6   Critical pedagogy in police education

Critical pedagogy is that which aims to counter various forms of discrimination and prejudices in society. It aims to liberate learners by allowing them to be more introspective in thinking. It is a more learner-centred approach, as opposed to the lecture-style method (Birzer, 1999). Critical pedagogy is "a way of thinking about,

negotiating, and transforming the relationship among classroom teachings, the production of knowledge, the institutional structures of the school, and the social and material relation of the wider community and society" (Breunig, 2016: 1). Certainly, there are practical subject areas in law enforcement that require prescribed methods of teaching and learning where deviation could be hazardous to officer safety. For example, tactical and firearms trainees must observe specific safety training and protocols. In areas that require restraint or emotional intelligence, however, such as communicating with the public, investigations, or negotiating volatile situations, police officers now need to place more emphasis on critical thinking.

The majority of students graduating from basic [police] training have been taught using teacher-centred and behaviouralist approaches (Kratcoski, 2004). The danger of this example of 'banking' education (Freire, 1972) is that it is an impediment to independent thinking. Applying the lens of Freire puts the problem of police education into perspective. Freire dismissed as archaic and ineffective, the unidirectional teacher-centred method which he termed 'banking' education. His main concern was the process wherein students simply store the information relayed to them by the teacher. The banking approach is a metaphor to describe a pedagogical approach where students are seen as empty banks accounts, just waiting to receive deposits from the teacher (Freire, 1972: 56). Banked information is then passed on to others (new recruits) without critically challenging its contents. Freire himself was the son of a police officer (Featherstone, 2020). His writings suggest that he was acutely aware of the banking education that influenced the hegemonic power differential in society. This type of pedagogy might work for children who have to learn certain basic, fundamental

concepts in school, but for adults who have real, lived experiences and interact in changing and dynamic spaces daily, rote learning is practically useless. Adult receptivity and response toward learning is markedly different from children's (Knowles, 1980). In the scheme of banking theory, police officers are prone to passive receipt of education in order to meet the job requirements while unconscious of the impact it has when interfacing with the public and remaining unconsciously locked into their roles and mindsets. Reflexivity is compromised and discretion becomes clouded. This bolsters the case for adult education methodologies that are vital in the recruitment and in-service curriculum in police academies (Birzer, 2003) because, for adults, learning must be transformative for it to be effective (Mezirow, 2000).

I consider Mezirow's stance on the importance of being transformational to be particularly germane to the deployment of police officers to address mental health crises. The challenge is that the hegemonic order of society depends on the police to sustain it (Neocleous, 2000). Traditional training has been criticized for stifling independent thinking and innovative practice among police managers (Cowper, 2000; Panzarella, 2003). The same holds true for police instructors. They are primarily police officers who pass on the training and instruction handed down to them (McCoy, 2006). Similar critique has been ascribed to society in general where racism, for example, is so entrenched to the point of being invisible (Morgan & Bullen, 2015), which is the basic premise of CRT. I argue that carefully targeted and designed education is an effective vehicle toward change. The evolving nature of police work in the 21st century should influence police education and training, and "the theoretical or technical aspects of the instruction depends on the philosophy of those in charge of designing the curriculum

and the immediate needs of the police organizations" (Kratcoski, 2004: 104). As a remedy to the type of repetitive learning that has hampered progress, Freire proposed a problem-posing approach to education. Adding mental health training is a dimension that could potentially make inroads into addressing a pressing social concern: the protection of persons in crisis. The difficulty is curriculum design and implementation. In the next section, I discuss the problem-posing approach.

3.7   Problem-posing Pedagogy

Freire (1970) espoused problem-posing pedagogy as an alternative to banking education. This method of experiential learning complements problem-oriented policing (POP) which involves raising consciousness through dialogue that empowers individuals to transform society. Developed by Heman Goldstein (1979), the purpose of POP is to focus police on more proactively addressing chronic problems, rather than using forceful, reactive efforts (Hinkle et al., 2020). Problem-posing engenders an adaptable and dynamic analytic framework for uncovering complex problems and for developing and customizing solutions to address the underlying conditions that cause crime (Goldstein, 1979). It applies an iterative approach to a particular problem rather than applying the one-size-fits-all style adopted from banking education (Freire, 1972). This type of praxis enables both the teacher and the student to learn simultaneously. It fits well within the framework of crisis training, where police and nurses in the process of training can, through reflexive exercises, learn from each other through practical experiences. A combination of pedagogy and andragogy, POP is a more realistic approach to police training because their life and career experiences can be brought to the table to inform best practices in handling complex areas of policing. In addition,

once a specific problem is targeted, police instructors can incorporate elements from situations as they have experienced it on the job. Officers become more adept at "identifying, understanding, and solving the array of troubles that prompt citizens repeatedly to call on the police for service and assistance" (Riesig, 2010:7: 7) if training is grounded in the problem that they are trying to address. Such is the essence of POP which is now one of the most widely accepted methods of policing in North America (Scott, 2000; Weisburd & Majumdar, 2018). It is transformational as it revolutionizes approaches to law enforcement that have been ineffective in addressing mental health crisis situations. In the following segment, I argue for a deliberative approach to education that seeks to challenge and transform.

3.8   The transformative potential of critical pedagogy

Mezirow's theory of transformative learning (1978, 1991a, 2000) shows promise for a revised curriculum for in-service police training. Transformational learning is a methodology that has the potential to deconstruct and reform learning approaches within police education. Grounded in constructivist ideology, Transformative Learning Theory (TLT) provides a practical framework for curriculum planning and program delivery. TLT demonstrates that the application of theoretical concepts learned in the classroom can be successful if those receiving the education buy into the notion of systemic change through their own experiences and self-reflection. The implication for crisis intervention training is that it has the potential to bring police and mental health nurses together as adults to share knowledge during in-service training which is subsumed within problem-oriented policing. This knowledge is shared based on personal and job experience through an iterative process in a deliberate attempt to

enhance education in both fields. As it stands, CIT is by design both revolutionary and transformative in some areas (Ellis, 2014). Education that addresses areas such as stigma and racism is a radical departure from the old regime to a more problem-solving approach in police serving the public.

Critical thinking is a prerequisite for transformational learning, but curricula must be designed to incorporate material which questions traditional approaches to policing society. Critical thinking and transformative learning are not independent concepts. They are interrelated and co-dependent (Şahin & Dagontay, 2018). I am cognizant that I have to be pragmatic in my assertions, recognizing that organizational change is not a linear process. In fact, it can be quite complex (Richer et al., 2010). Efforts to implement changes in police curricula requires police leaders to exercise their agency to transform education by first recognizing that critical thinking is fundamental to pedagogy. Transformative learning then requires the learner to assess current perspectives and approaches to life and, through education, to provide an opportunity to change these perspectives and approaches (Mezirow, 1991; McBrien, 2007). Reflection facilitates continuous learning (Schön, 1983) and while changing hearts and minds might be a lofty goal of education and training, through reflection and reflexive activities officers can challenge their own belief systems (McBrien, 2007).

Summary

I used this chapter to examine the main driving factors behind the phenomenon of negative interactions between persons in crisis and the police – race and stigma. What becomes more evident is that the lack of emphasis on social justice pedagogy underlies the gap between police pedagogy and praxis. There are institutional challenges that can

impede service such as personal biases, a lack of monetary resources and the lack of adequately trained human resources (Koziarski et al., 2020). Although it is not with absolute certainty that crisis intervention training is a panacea for negative outcomes in all circumstances (Peterson & Densley, 2018), it is worth implementing in jurisdictions where there is a high concentration of marginalized groups. Though it may not be entirely possible to avoid negative outcomes on a case-by-case basis, minimizing tragic incidents is an attainable goal. More rigorous research is required (Felix-Ortiz et al., 2021) and adding race as a factor to the curriculum (Solorzano, 1997) is fundamental to addressing the disparities citied in this study. Further research incorporating the role of race in curricula across jurisdictions would provide direction to law enforcement agencies who anticipate reforming their training. Reform requires pedagogical leadership to make new forms of learning an institutional norm. Although my research is nested in CRT, there were other significant conceptual frameworks that evolved from my ontological stance on issues of social justice. Given the complexity of issues involved in police handling of mental health crises, the conceptual frameworks stigma and intersectionality are inextricably linked and cannot be divorced when analysing layers of oppression that impact persons in crisis. I engage in further explication and analysis of these frameworks in the next chapter.

Chapter 4 - Theoretical Frameworks

4.1   Introduction

Through a social constructivist lens, I deliberately targeted police officers for their perspectives as they are ultimately the recipients of education or training designed to address interactions with vulnerable persons. As a fellow participant in the justice system, my aim was to both interrupt and interrogate the implicit police bias against

CONCEPTUALISING A THEORETICAL FRAMEWORK FOR CRISIS INTERVENTION

STIGMA THEORY

INTERSECTIONALITY THEORY

CRITICAL RACE THEORY
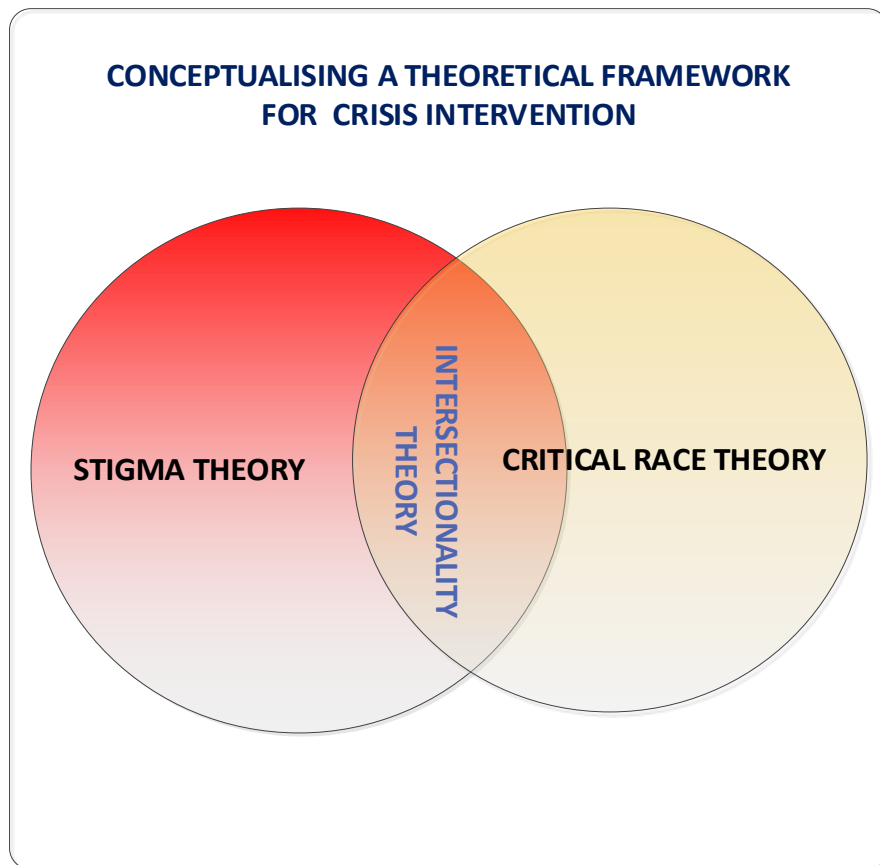
Figure 1: Conceptual Theoretical Framework

Black persons in crisis which often lead to their death. I locate my research within CRT, Stigma Theory, and Intersectionality Theory as anti-oppression theories to dissect discriminatory practices and subject them to critical analysis.

4.2   Critical Race Theory

I begin with the discussion of race adhering to my aim to unearth what lies beneath the phenomenon of Black persons in crisis dying in police encounters more than any other race. I chose to apply CRT as a lens as it embodies the notion that racism is endemic in society (Solorzano, 1997). It was introduced in the mid-1970s by a group of legal scholars, lawyers, and activists (Crenshaw, Gotanda, Peller, & Thomas, 1995; Delgado et al., 2001; Matsuda, et al., 1993) who were discontent with the value-free pretensions of American hegemonic jurisprudence. This was my discovery as I analyzed the CIT course offerings and participated in classroom observations. Historically, the experiences of people of colour were often omitted from legal discourse (Tate, 1997). The issues affecting Black communities in urban areas and the tensions with the justice system has been treated with similar disregard. Highlighting the role of law in the racial constitution of society, CRT scholars point to the pivotal role of laws in the calibration and sustenance of racial inequality. They further demonstrate how racism influences the politics of criminalization and, concomitantly, law enforcement. My intended purpose for utilizing CRT is to interrogate the centrality of race and racism in the expanding vortex of Western jurisprudence (George, 2021).

In my view, CRT is the most appropriate tool for comprehensive analysis of policing in a diverse society. Viewing policing through a CRT lens presents police organizations with

the opportunity to examine the role race plays in perpetuating social disparities between dominant and marginalized groups (DeCuir & Dixson, 2004; Ladson-Billings; Ladson-Billings & Tate, 1995). Accordingly, it serves to illuminate the dominance of law enforcement agencies over the populations they serve and brings into cognition their unconscious biases. The overall goal of CRT is to "develop a pedagogy, curriculum, and research agenda that accounts for the role of race" (Solorzano, 1997: 7), and is in keeping with the objectives of this research. Implementation, however, requires pedagogical leadership. CRT directly challenges the issue of hegemony and helps us to understand how racism operates within society on a structural and institutional level and would mark a radical change to police pedagogy. As demonstrated by Althusser (1971), however, policing is part of the Repressive State Apparatus characterized by a profession consisting of mainly White, male participants, and is synonymous with oppression (Neocleous, 2000). They are in no hurry to change.

Gramsci (1971) conceptualized hegemony as a strategy used by the ruling class to dominate the rest of society through the manipulation of ideology in the social and political realms. Through this process, the political, economic, and cultural beliefs of the ruling class are both normalized and legitimized. Police organizations have paradoxically disrupted lives while maintaining social order (Garmany, 2014). To counter the oppressive purpose which policing has served, CRT-based curricula would provide a learning environment that has the potential to disrupt prevailing thoughts and ideas that have fuelled the oppression. It can stimulate new ways of thinking for law enforcement officers who, regardless of their race, were never exposed to opportunities to receiving instruction within a social justice framework. Incorporating critical race

perspectives in daily practices within education brings awareness about the role of race in producing racial inequities (Patton et al., 2007). This will not resonate well with those who have an interest in concealing the social realities of racism. The hegemonic structures upon which law enforcement is built (Neocleous, 2000) could pose an uphill battle toward successful implementation of critical pedagogies. CRT has received strong opposition in the United States (Sawchuk, 2021) by those who have an interest in maintaining social inequity. Dominant groups refuse to recognize or admit how a history of oppression informs how people are treated today (Solarzano,1997). For example, Republican politicians in the US espouse what is in my view, a false rhetoric that CRT is divisive and prohibits unity in a country that is already divided. This resistance seems to be gaining traction with no empirical evidence to substantiate their claims. The net effect is their ignorance or willful antagonism is creating moral panic and divisiveness. This is not surprising where the dominant powers have a social and economic interest in preserving the oppression, and racism is a "divide-and-conquer" ploy to achieve this end (Walsh, 2014: 1). This protectionist approach has hampered reform. For decades, the TPS vehemently denied that racism even exists in its organization, which explains why it had a policy of not releasing race-based data (Wortley & Owusu-Bempah, 2011). In fact, it placed what Wortley (1999) called an "informal ban" on collecting race-based data. Lack of transparency has been a major problem for researchers and social justice advocates as they seek the truth. It was not until 2019 that the policy of concealing race-based data was repealed. As a researcher, my mission is to contribute to social justice initiatives and effect social change. Without data it is difficult to conduct a comprehensive assessment of the issues affecting

policing as it relates to mental health. This limitation has been alleviated by using qualitative and narrative approaches to data generation.

4.2.1 Counter-narratives

The counter-narrative approach was invaluable in this study. The public's views of the police are quite different from how the police view themselves. On the issue of deadly encounters, White police officers see incidents as being isolated rather than a problem between the police and the Black community (Morin et al., 2017). More broadly, in predominantly White societies, the dominant narrative is that police treat people of all races equally (Elkins, 2016). A key component of CRT is the use of counter-narratives to challenge dominant ideologies (Denzin & Lincoln, 2018). Counter-stories allow for the challenging of privileged discourses of the (White) majority, whilst serving as a means for giving voice to marginalized groups (DeCuir & Dixson, 2004). I go even further. I situate Black police officers as a marginalized group within the TPS as they too have experienced systemic racism among their own professional peers (Wortley & Owusu-Bempah, 2011). Although racial diversity has increased in police departments over time, this did not automatically eliminate systemic racial disparity (Bornstein et al., 2012). Accounting for the role of race should be informed by the experience of persons in crisis and racialized police officers who are marginalized within their own organizations.

Owusu-Bempah's (2014) study of the perspectives of Black males in Toronto on policing found that Black male police officers hold similar views to other groups of Black males. They too believe that the police are biased against Black men and Black communities. The study found that 41% of Black people feel that they are more likely to

be unfairly shot by the police than White people, while only 2% of White people felt this way. Given the significant disparity on how the police are viewed by the general public, the views of police officers selected from a diverse pool in this current study are crucial to the discourse on policing persons in crisis. Canadians are generally uncomfortable discussing race and racial differences, preferring instead to use the language of 'ethnicity' and 'culture' (Owusu-Bempah & Wortley, 2014). In the United States, Tatum (1992) found that race is a taboo subject in settings where students were of mixed races. North of the border, Canadians take comfort in romanticizing living in a diverse Utopia by comparing their experiences to those found in the United States as being better or less racist. It is a "narcissistic discourse" (Mullings et al., 2016: 21), as Canadians adopt a self-righteous stance on comparative human rights. The danger of this myopic view is that Canadians may have developed a false sense of human rights superiority by viewing police brutality as an American phenomenon. Historically, the police profession has been White, and male dominated (Connell, 1995; Rabe-Hemp 2008). This has hardly changed. Therefore, in this study, another reason I was curious to hear the narratives of officers of different races was to see how much exposure and experience they had with mental health crisis intervention training, or even opportunities to be included in this specialized, maybe even elite team of MCIT officers. According to Compton et al. (2015), an MCIT officer was less likely to be a person of colour. In addition, they were slightly older than officers who had no specialized training in mental health.

4.2.2. Race-neutrality and colour-blind policing

Sustained denial that racism is normative has hindered social progress. Colour-blindness is not only an absurdity (Taslitz, 2007); it is a dangerous phenomenon. Colour-blindness is otherwise referred to as 'race-neutrality', which is an oversimplification of reality. It suggests that all races are seen and treated as equal in society. In fact, colour-blind ideology leads to more racism, not less (Richeson & Nussbaum, 2004). Espousing an ideology wherein one refuses to admit racism or even to recognize that there is a prevalent race differential in society despite the overwhelming evidence of race inspired atrocities, is foolhardy. It is a reckless fantasy which causes people to ignore racist policies, which only further perpetuates social inequity (DeCuir & Dixson, 1999). Race-neutrality assumes that race does not matter (Annamma et al., 2017) and should be disregarded (Gotonda, 1991). But as Bowman et al., (2009) point out, "CRT scholars argue that race not only matters, but it will always matter".

In a recent ruling in the Province of Ontario's highest court, the Ontario Court of Appeal, in the case of *R. v. Sitladeen*[3], the court found that it is not necessary to prove that two White police officers lied about their reasons for a stop-and-arrest, or have the police admit to racist motivations, for it to make a finding that racial profiling was at the heart of the issue. It would be imprudent for a police officer to admit differential treatment of people on the basis of race. A police officer will unlikely admit to having stereotypical opinions about a particular race. This would not only be politically incorrect to admit; it

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[3] R. v. Sitladeen, 2021 ONCA 303 (CanLII).

could have legal implications and become the basis of human rights complaints against the entire police organization based on the doctrine of vicarious liability. Police officers are quick to deny that they engage in racial profiling (Giwa, 2020), but Black police officers have voiced that they felt racial profiling existed. They too have been victimized by the practice. They have witnessed their peers engage in racial profiling (Mascoll & Rankin, 2005). Concurrently, Black police officers have been criticized for "violating racial loyalty norms" (Starkey, 2013: 40) or even being a part of the "mass machinery of incarceration" of Black people (Forman, 2017: 14). Recently, Black officers found themselves in the middle of the firestorm of criticism being called "sell-outs" after the murder of George Floyd (Quan, 2020). Due to the discriminatory treatment of Black people by the police, stigmatized persons feel a sense of solidarity with other marginalized groups (Craig & Richeson, 2016). They believe that Black people should not be part of an institution that is viewed as oppressors of their own people. In the following segment, I discuss stigma theory as a tool to better understand what lies at the root of discriminatory treatment of persons in crisis, and how the police are now attempting to address the troubling phenomenon.

4.3   Stigma Theory

Stigma education is included in the crisis intervention curriculum at the TPS. It is a problem-posing approach to learning with the flexibility to adapt to the changing nature of the social environments in which police officers have to attend to crisis calls. Stigma is a "complex social process of labelling, othering, devaluation, and discrimination" (Knaak et al., 2017: 111) of people who are considered different, to the majority of society. The stigmatization of mental illness has caused unequal treatment of disabled

persons when mental illness is seen as less important than other disabilities (Rao, 2019; Link et al., 2018; Corrigan & Penn, 1999). Goffman (1963) defines stigma as the "spoiled identity" wherein a person's reputation is tarnished in society's eye by possessing attributes that do not fit within a social norm or acceptable social standards. The etymology of 'stigma' is the Greek word 'stizein', which means 'to tattoo'. Historically, tattoos or stigmata were ruthlessly carved into the flesh of enslaved peoples to identify their position in the social structure, and the practice was designed to devalue people (Arboleda-Florez, 2002). For example, branding was used in the African slave trade to mark people as property, thus dehumanizing them and removing them from their culture (Keefer, 2019). Goffman (1963: 3) describes stigma as "an attribute that is deeply discrediting" that reduces someone "from a whole and usual person to a tainted, discounted one". Stigma can be ascribed to groups of people based on the social 'stizein' attributed to them by others who view themselves as being of higher social or moral standing (Goffman, 1963) and is central to classifying one race as better than another. Stigmatization is evident in the ways that society negatively views individual or group characteristics or identities (Turan et al., 2019; Logie et al., 2011).

Stigma education takes into account both the clinical and social approaches to mental health. Persons who are diagnosed with or display symptoms of a mental health 'abnormality' are automatically viewed by many as being social misfits or of lesser value to society. I place the term 'abnormality' in quotation marks because the notion of 'normal' is of itself a social construct and varies from one society or situation to another (McCann, 2016). A social norm is simply a shared expectation (Elster, 2009). If one's behaviour goes against that expectation, it provokes differential treatment. Mental

illness and addictions can elicit negative assumptions and judgments about those affected. Granted, there are certain mental health pathologies that have biological implications which can only result in harmful conduct to self or to others when the brain fails to perform a function for which it was biologically designed (Wakefield, 1992, 2007; APA, 2013). However, it is the natural propensity for people to cast moral judgments or decide what is normal. This feeds the stigmatization phenomenon. Therefore, stigma ought to be understood not just as a public reaction to that which is considered (ab)normal but as a result of institutional practices of stigmatization within the criminal justice system (Megret, 2013).

People with mental illness are doubly challenged (Corrigan & Watson, 2002). On one hand, they struggle with the symptoms and disabilities that result from the disease. On the other, they are challenged by the stereotypes and prejudice that result from misconceptions about mental illness. Stigma is grounded in negative stereotypes and preconceived ideas about a person or group of persons. Therefore, as Link et al. (2018) point out, stigmatized persons need not believe the stereotype about their groups for negative consequences to emerge. A person ignorant of the meaning of a particular cultural behaviour could feel threatened based on their own perception.

Oxburgh et al. (2016) suggest that police officers' perceptions are directly related to experience in dealing with suspects. It has been suggested that there is a correlation between the police officers' age, their level of education, and their perception of danger in relation to mental disorder (Psarra, 2008). I argue that police officers may develop opinions based on the stereotypes they harbour even prior to those dealings.

Community-level factors, subject characteristics, officer characteristics, education, training and dynamics on the scene, and information received on the scene (Godfredson et al., 2011) can also impact how a situation is resolved (Bonfine, 2014; Cordner, 2016; Compton, 2006; Chappell, MacDonald, & Manz, 2006; Thompson & Borum, 2006; Wells & Schafer, 2006; Bittner, 1967) and define that experience and perception going forward. A combination of factors can influence officers' reactions. Therefore, helping police officers recognize and understand their own stigmatization of persons in crisis is a fundamental step in addressing past mistakes.

Stereotypes or preconceptions are due in large measure to ignorance (Mueller, 2017). What people do not know they will guess, contrive or assume based on stereotypes of a certain group. An assumption can be deadly or life changing, which is the problem with policing persons in crisis (Jilani & Smith, 2020). Persons are dehumanized (Fontesse et al., 2021) and discredited (Goffman, 1963) being viewed with scorn due to the stigma attached to mental illness. They are compared to what society considers normal, and any deviation is deemed an abnormal identity thus creating a negative perception. However, mental health is not static. It fluctuates based on medical, biological, social, or environmental factors (Wakefield, 2014). Accordingly, as a person's disabilities are overcome, prejudice against him or her based on mental illness also disappears (Corrigan et al., 2005). Stigma robs the person in crisis of the chance of living and having their health restored. For example, there is implicit bias among police officers toward Blacks, and they may not even be consciously aware of this bias at the time of decision-making (James, 2018). Anti-stigma training encourages self-awareness of the subtle and unintended ways certain beliefs and behaviours people may have toward

others who have a disability (Knaak et al., 2017). Hansson and Markström (2014) found that anti-stigma education was effective in changing attitudes, mental health literacy and intentional behaviour, and the residual effect of training lasted up to six months. This is promising for law enforcement agencies. Individuals in any profession will rely more, consciously, (or unconsciously) on prejudice and stereotypes when attempting to resolve uncertain circumstances (Spencer et al., 2016). Enhancing the capacity of police officers in dealing with persons experiencing mental health and addiction issues requires recognition and appreciation on the part of police officers, of the impact that their own unconscious biases can have on the way they perform. Critical pedagogies have the potential to break down the boundaries between institutions of learning and society and create opportunities for deep and transformative learning (Rapp, 2011). Learning without change is pointless. Frankly, it is a colossal waste of time and resources that burn through public funds with no tangible reward. If learning is to make real impact it must not only inform; it must transform (Reuland & Schwarzfeld, 2008). The following section explores how the intersection of race, gender, age and social class further complicates the experience of mental health stigma.

4.4   Intersectionality Theory

Goffman's seminal work on stigma in his earlier writings was from a race-neutral perspective, as seen through the lens of a White male in a society where other forms of oppression were not the focus of his analysis. Tyler (2018) justifiably criticizes Goffman for these reasons. Like Goffman, CIT uses the race-neutral approach to analysing stigma. Many persons with mental disorders are members of multiple stigmatized social groups. Focusing on mental illness stigma alone might not only fail to reflect their

experiences; it may limit the effectiveness of interventions (Rao, 2019; Oexle & Corrigan, 2018). Therefore, stigma should be analysed through the lens of multiple forms of oppression. Stigma is inextricably intertwined with mental health challenges (Pescosolido, 2013; Link et al., 1999) and race-associated stigma is embedded in this reality. Black Canadians in particular carry the burden of the intersectionality of several forms of discrimination compounded by mental health challenges that some have to navigate daily (Nazroo et al., 2020; Mental Health Commission of Canada, 2016).

Although racism is at the centre of a critical race analysis, it intersects with other forms of oppression such as classism and misogyny (Anthias, 1998; Crenshaw, 1989, 1995). This is not to suggest that these are the only factors at play during police encounters with persons in crisis. Other factors external to race and mental illness manifestations can influence how a police officer handles a crisis situation, such as the officer's educational background and training (Bonfine, 2014; Cordner, 2016; Compton, 2006; Chappell, MacDonald, & Manz, 2006; Thompson & Borum, 2006; Wells & Schafer, 2006). The intention of a comprehensive, multi-pronged approach to problem-solving through a critical race lens is to eliminate racism and other forms of discrimination concomitantly (Solorzano, 1997).
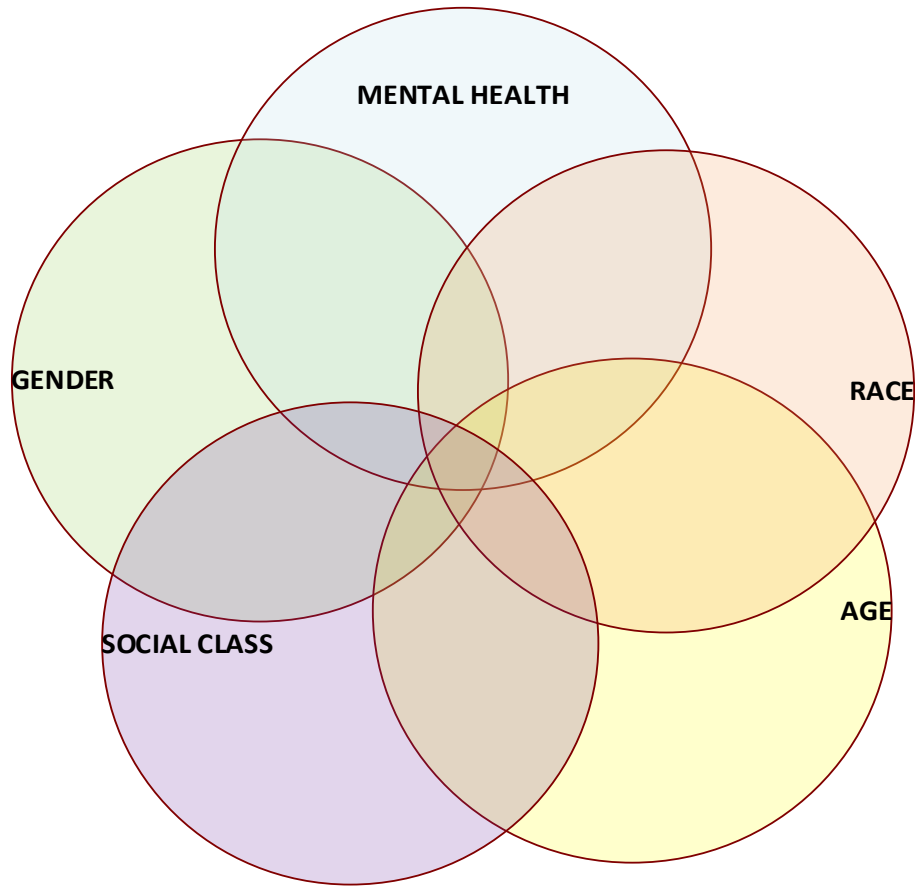
Figure 2: Intersectionality of stigmatized characteristics

Tyler (2018) highlights the fact that Black people, who are already stigmatized by virtue of race, are tasked with navigating daily interactions and reducing tensions with White people simply to stay alive. This is the reality of a Black person in a predominantly White society and a likewise interacting with a predominantly White police force. Applying Goffman's notion of the "spoiled identity", the Black person has an 'abnormal' identity by virtue of being Black in a mainly White society. In the case of a Black person, the mental health stigma might vanish, but race cannot. The colour of the Black person's skin is his 'stizein'. As Frantz Fanon (1952) in his seminal work *Black Skins White Masks* reminds us, White people can hide their religion or nationality to their

advantage, as situations require. Black people cannot hide from prejudice because the very characteristic that puts them in danger, skin colour, is ever present and visible.

As we unpack the complex intersections between race, law, and social status, the deficiencies in the CIT curricula are glaringly evident. There has been much discussion about mental health crises grounded mainly in the biomedical and cultural discourse. The reality of addiction crises disproportionately affecting marginalized communities is another layer that needs urgent attention. Addiction stigma intersects with other forms of bias, such as racism and sexism (Kulesza et al., 2016). Adapting an intersectionality framework has the potential to achieve better public health-related outcomes, such as increased access to healthcare among underserved populations (Rosenthal, 2016; Earnshaw et al., 2013). Deconstructing prejudice in its various forms in a society deeply entrenched in a history of marginalization of people of colour and those who experience mental health challenges is no easy task. Lack of awareness and unconscious biases which acknowledge the power of hidden beliefs and attitudes, feed stigma-related behaviour (Knaak et. al., 2017). Historically, both disability and race are personal characteristics that have "operated to define, segregate, and oppress" (Gilborn, 2015: 280). For people of colour facing policing encounters, the intersection of race and mental disability exacerbates the stigma – thus increasing the likelihood of a negative outcome (Rao, 2019). Studies reveal that CIT reduces stigma (Pescosolido et at. 2010; Watson et al., 2014, Compton et al., 2008) but there are gaps to be filled to make it more comprehensive in addressing oppression.

Summary

In this chapter, I examined the theoretical frameworks that are grounded in oppression theories to dissect the role of race and stigma, namely Stigma Theory, CRT, and Intersectionality Theory. I prefaced the discussion by drawing upon Goffman's and Tyler's works on Stigma Theory, which are central to the disability discourse. Goffman examined the role stigma plays in the police treatment of mentally challenged persons from a White, normative perspective, highlighting the gap in police curricula which fails to contemplate the perspective of marginalized groups (Tyler, 2018). Next, I examined how CRT has been applied to the discourse to examine the normative role that racism plays in society and reflected in oppressive police conduct. Because the issue of race has been downplayed in police training, I examined the use of the counter-narratives to explore the views of Black police officers within a White, male dominated profession. Finally, I looked at the intersectionality of race stigma and mental health stigma, which pose an automatic double jeopardy for racialized persons in crisis. These are further complicated by ethnicity, gender, and age.

Chapter 5:   Methodology

5.1   Introduction

In this chapter, I discuss the modes of enquiry which I deployed in the conduct of this research. Qualitative methods were chosen to formulate the RQs and conceptualize the theoretical approaches (Creswell, 1998; Sofaer, 1999). To generate the data, I used semi-structured interviews, questionnaires, classroom observation including role play exercises, and a ride-along in a police car with a mobile crisis intervention team which specializes in mental health. Secondary sources of information included police policy manuals, scholarly journals, online publications, and newspaper articles.

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                          ┌─────────────────────┐
                          │   DATA GENERATION   │
                          └─────────────────────┘

         ┌──────────────────┐          ┌────────────────────┐
         │   PRIMARY DATA   │          │   SECONDARY DATA   │
         └──────────────────┘          └────────────────────┘

  ┌──────────────┐                          ┌─────────────────────┐
  │  RIDE-ALONG  │                          │  POLICY DOCUMENTS   │
  └──────────────┘                          └─────────────────────┘

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  │ QUESTIONNAIRE│                          │  JOURNAL ARTICLES   │
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  │SEMI-STRUCTURED│                         │ ONLINE PUBLICATIONS │
  │  INTERVIEWS  │                          └─────────────────────┘
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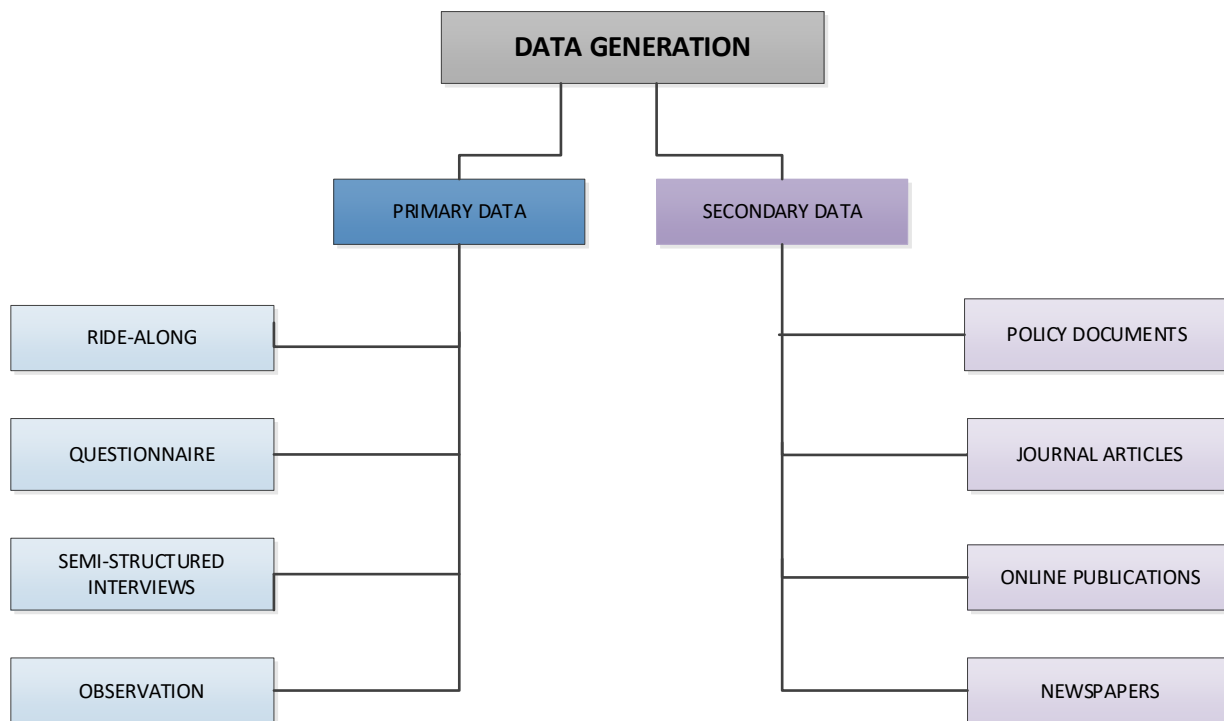
Conducting this study with a multi-pronged approach to data generation was crucial to gaining a more thorough understanding in an area of social research, Policing, that is usually guarded in the information it shares outside of the institution. As a researcher, I

have a responsibility to demonstrate to my audience that I used appropriate data generation methods and analysis that result in reliable conclusions (Silverman, 2006). I devised four RQs, centred around police learning and potential gaps to be filled. These questions will be used as the rubrics for discussion and analysis:

1. How does the curriculum at the TPS college address mental health and addiction needs of persons in crisis?

2. What are the perceived strengths and weaknesses of a collaborative crisis response between the police and health sector?

3. How is mental health stigma complicated by race, ethnicity, and minority status?

4. What are the grounds/appetite for making race-based pedagogy mandatory within police training?

Sequentially, the first RQ laid the foundation by providing insight into the existing state of mental health education and training at the TPS. Once this was established, it set the stage for dialectical engagement with the other RQs. Participants' perspectives were expected to generate instructive data based on personal and ideological philosophies, thus resulting in a fulsome account of policing training. In other words, the first RQ was fact-driven, providing the basis upon which the remaining questions were formulated to elicit the subjective views of the participants.

Thematic analysis was used to analyse the data and capture certain themes from the narratives. Because I approached this study through a CRT lens, certain themes were brought out based on the questions posed. As Denzin and Lincoln (2018: 200) note,

"CRT scholars take observations (of classrooms, of interactions, of communities, etc.) and close readings (of journals, of letters, of official documents, etc.) and provide muted and missing voices that ask questions and propose alternative explanations." In investigating education reform that integrates a social justice approach to program delivery, it was essential for me to remain true to my own ontological and epistemological positions on the issues; they were pivotal to the research and how I would approach it. It was also essential to establish this up front so "no one is confused concerning the epistemological and political baggage" brought to the study (Kincheloe & McLaren, 2005: 305-306). As Grix (2004: 59) posits, "Ontology and epistemology are to research what 'footings' are to a house: they form the foundations of the whole edifice". I embrace the constructivist view that social phenomena are accomplished by social actors (Bryman, 2004). The simple reality is that society and meanings ascribed to how we act and express ourselves have been constructed through our interactions with others. This research, therefore, was undertaken within a broadly social constructionist framework.

Epistemologically, I appreciate the differences between people and keep an open mind by taking an interpretivist approach. I had to remain cognizant as I went through each interview that police officers too, are from varied backgrounds which may influence their approaches to crisis resolution. Early upbringing, community, exposure to other groups or cultures, and education are some factors that will influence their perspectives. Framing my approach to the semi-structured interviews squarely within an interpretivist paradigm which holds that reality is socially constructed (Mertens, 2009) allowed me to synthesize the data generated based on the participant's own experiences and beliefs.

Each officer's background may nuance their approaches to problem-solving and conflict resolution. The only certain, proven commonality that the officers have is being trained at the same police college. Even so, what is imparted in a lesson or lecture may be received differently based on preconceived views of people based on individual backgrounds and influences.

5.2   Research setting

The TPS is the largest urban municipal police services agency in Canada and the fourth largest in North America, comprising over 5,500 officers and more than 2,200 civilian staff. It is responsible for policing a city of almost 2.6 million and receives over 1.7 million calls for service per year (TPS, 2020). I visited the Toronto police training college which is situated in an industrial area of the city, for classroom and role play observations. The college shares facilities with the Toronto Sottish Regiment, a Primary Reserve infantry regiment of the Canadian Army. The quasi-military environment was not lost on me. The facility houses 23 classrooms, associated break-out rooms, computer labs, ranges for firearms training, an auditorium, and a gymnasium. It is a well-appointed facility that physically ranks with top-level institutions of higher learning I have visited. There is a high level of security clearance. Outsiders and civilians can only attend by invitation and appointment. While I was at the college, there were no other classes in session. On a brief tour, I observed officers entering the shooting range facility for the use-of-force aspect of their training. Overall, it was a quiet atmosphere, with an air of secrecy and exclusivity.

5.2.1 The jurisdiction

The city of Toronto is divided into 16 distinct geographical police divisional boundaries. The neighbourhoods within the most populated boundaries, such as the downtown core, generate the most mental health crisis calls and are the most racially diverse. Geographically, this study focused on a densely populated area of the city with a high saturation of public hospitals, shelters, and mental health facilities, serving as a resource to the TPS for handling mental health cases.
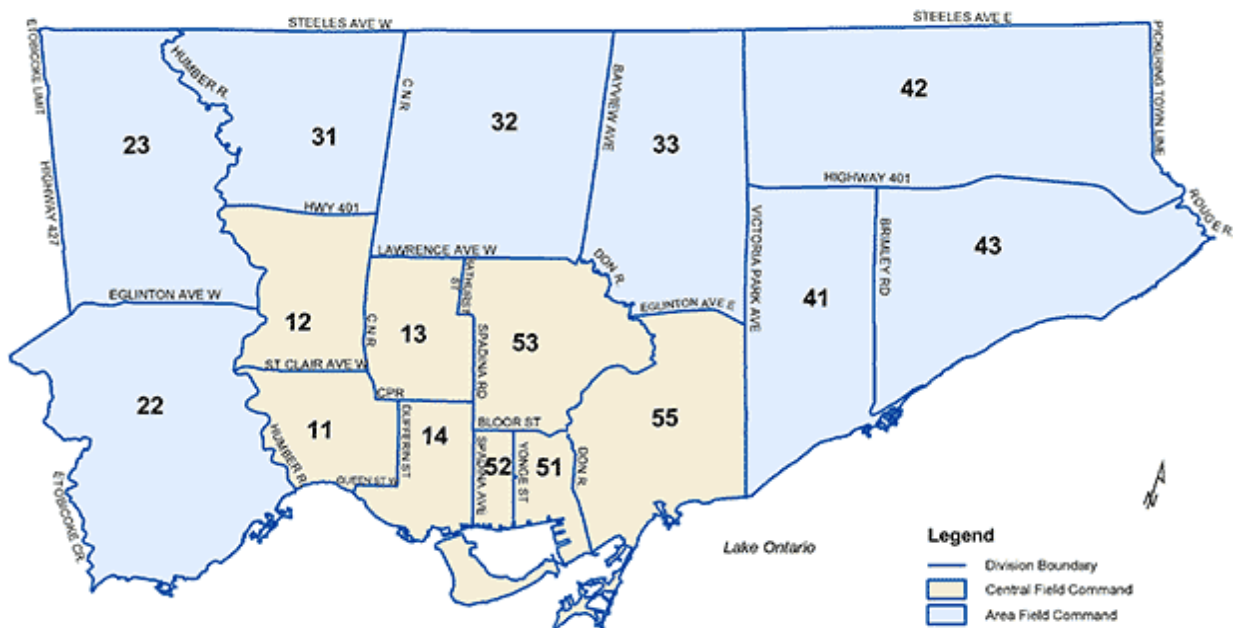
Figure 3: A Map of the Toronto Police Service Divisional Boundaries

5.3   Research ethics

Ethics clearance was obtained from the university following approval by the TPS to conduct the study. Both Lancaster University Research Ethics Committee and the TPS Chief of Police approved this research. Full details of the nature of the study were provided to the TPS as a part of their internal clearance procedures. The research topic was well received by both entities. I entered into a contractual agreement with the TPS once approval was granted. The research topic was considered important by the university because police education as it pertains to mental health was lacking in research, and timely in light of recent incidents and public inquiries in this area. Given the inherent safety risks in police work, the university shared their concerns. Being committed to getting a real 'feel' of what police officers experience while on 'the beat', I offered to sign a waiver to indemnify the university against any and all liability in the event my safety was compromised while in the field. I perceived no imminent danger. I was confident in the capability of the TPS to ensure my safety. Nonetheless, the university had to be satisfied that I understood the risks and that I would not become a liability for the institution. In addition, I had access to counselling professionals in the event that I encountered situations that are distressing in nature. It helped that I already had experience in the field, having practised mental health law for a number of years. I was aware of some of the inherent challenges in handling situations involving persons in crisis which could be volatile. I was advised and had agreed with the police service that participation in ride-alongs may be limited due to operational demands and subject to approval by the Community Partnerships and Engagement Unit. Fortunately, I was accommodated, and, in the process, I was well protected by an exceptionally courteous

and professional team who invited me to join them at any time, subject to adequate notice.

The participants had the support of the police research department to address any concerns they might have. I have learned throughout my career that I have to be able to secure the trust of police officers to gain their cooperation. As a lawyer, I had to be strategic in my approach in gaining cooperation, as there might be natural distrust embedded in the culture (Balch, 1972; Skolnick, 1975) especially based on the perception that my career is in direct opposition to policing. Based on my own professional experience, distrust can have a chilling effect on the police-lawyer dialogue whenever I was defending an accused. I addressed this air of suspicion by assuring the police officers that I am not doing this research in my capacity as a lawyer, but strictly as a PhD student with an interest in education, research, and policy development. Declaring that I no longer practice criminal law seemed to provide some comfort. I (re)emphasized that the intention was to examine police education in the area of mental health. I explained that there is limited behind-the-scenes knowledge of police work. In negotiating research with the police, I had to emphasize that I genuinely wanted to "help and not judge the agency" (Alpert et al., 2013: iv), that I valued the knowledge of police officers, and was doing the research for the purpose of finding solutions to learning that would assist both the police service and the public.

I reassured the officers that their anonymity would be guaranteed and that they were likewise not required to reveal the names of anyone with whom they have had an encounter or arrested. One crucial ethical consideration was the right to privacy of any

person who is apprehended by the police during the course of a ride-along observation. I addressed this issue by not doing audio recordings. In my handwritten notes, I used descriptive language of the scenario that did not compromise the privacy and anonymity of any citizen during the course of interactions with the team. In conducting this qualitative research, I had a responsibility to clearly describe the procedures followed to ensure that data were recorded accurately, and that data obtained are representative of the whole picture (Mutepa, 2016). I made handwritten notes during each phase of the project to avoid reducing events to memory.

5.4   Fieldwork preparation

Before embarking upon the fieldwork, I perused the Iacobucci Inquiry report (2014) to have a better understanding of the phenomenon of high incidents of fatalities resulting from persons in crisis interactions with the police. This provided the foundation for further probing to see if the recommended transformation was being realized at the TPS after five years and two public inquiries. To become familiar with police work from a practical perspective, I watched YouTube videos of mobile crisis teams in action from various police jurisdictions across North America. Audio-visuals provided a better understanding and appreciation of CIT officers and their daily work as secondary responders. Before this study, my interaction with the police was limited to courthouse settings, as officers occasionally appeared to testify on behalf of the Crown in Criminal proceedings. Therefore, it was vital for me to have a more realistic expectation of what I would experience alongside police officers during usual work mode as I prepared to immerse myself in the ride-along segment of the study. Ignorance about police can hinder appreciation of the actual work that police officers do and the challenges they

face (Qureshi et al., 2019). It was important for me to understand the risks involved in researching a profession which can be dangerous at times. While I appreciated the risks from afar, now that I would become exposed to the actual environment, I mentally prepared myself for that reality. Reviewing documentaries was helpful. As a civilian, the documentary format provided useful insight into actual police work. The final part of my preparation for fieldwork was conducting literature searches to explore other police researchers' findings on the broader topic of police education, and the narrower focus on mental health education.

5.5   Selection criteria

The nine participants in this study were identified by pseudonyms to protect anonymity, given the sensitive nature and inherent risks involved in law enforcement. The participants included members of the MCIT. I classified some participants as PRU although two were in higher ranks or in divisions where they no longer interfaced with the public daily. Initially, I had no prior knowledge of the officers' work experience or their mental health crisis intervention training. I learned more about officers who specialized in mental health later in the study. To get a richer representation and diverse perspectives, I selected officers from different racial backgrounds. This was critical. CRT transcends a Black/White racial binary and recognizes that racism has impacted the experiences of multiple people of colour, including Latina, Native Americans, and Asian Americans (George, 2021). The officers' length of work experience was a consideration. Work experience is material because, typically, an officer with less than three years of experience would not be eligible to join MCIT. The 'rookie' perspective is however equally critical, and new recruits can provide productive

insight into their early career impressions and expectations. I was also interested in hearing the views of seasoned officers who joined the service before the MCIT initiative, which commenced a little over two decades ago.

By using pseudonyms, I was also mindful that sensitivities are inherent in the topics being discussed that could give rise to organizational reprisal against a participant. This relates in part to the notion of police culture and protectionism. As a researcher, it was essential for me to respect and appreciate the privacy of participants. It was not easy to gain the trust and confidence of police officers that my collected data would not be used for exploitative reasons. Individual privacy was paramount. To eliminate or reduce the risk of identifying the participant to the reader, peculiar phrases used by a person that could make them more easily identifiable were not transcribed or reprinted, neither were lengthy descriptions of events or personal stories that could reveal an officer's identity, unless first receiving consent to do so.

5.6   Participant profiles

Name	Years of service	Race	Gender	Interested in MCIT (Yes/No)
Peter	>5	White	M	Y
Jon	>5	White	M	Y
Chris	>5	Black	M	Y
Warren	>5	Asian	M	Y
Matthew	>5	Black	M	N
Debbie	>5	Black	F	N
Rick	<5	Black	M	Y
Daniel	>5	White	M	N
Betty	>5	White	F	N/A

5.7   Selection process

I interviewed nine participants, eight of whom were police officers. Two officers were members of the MCIT. The lone non-police participant was a mental health nurse who is a member of the MCIT. A combination of purposive sampling, snowball approach, and expert sampling was used to select participants. Because this was a study about mental health, an entire class of CIT Level 1 training participants were asked to complete the written questionnaire and participate in the study. To this end, purposive sampling was applied. This entailed sampling based on participants I presumed would be best able to provide insight into mental health education. Subsumed within purposive sampling, I used the expert sampling approach, whereby I deliberately targeted participants or respondents who were presumed to be knowledgeable in this particular area based on length of experience and subject matter, and who will likely give the required information (Frey, 2018). First responders in a dense and diverse area of Toronto were the obvious choice. Names of officers were provided by the first officer I met on the MCIT. Therefore, participants were selected based on who I, as the researcher, believed would provide the kind of information being sought. The downside to purposive sampling or even expert sampling is that it may not be representative of the entire police population engaged in mental health crisis intervention. The small sample size of this study weakened the probability of representativeness, but it was neither the purpose nor intent of this study to paint the TPS with a broad brush. Rather, it was designed to explore the perspectives specific to CIT from a small subset of officers. There is always the risk that the referral of other police officers by their peers to participate in the study could result in certain like-mindedness in the participants interviewed. Research will always have the risk of some degree of inaccuracy, but qualitative sampling is more

geared toward a theoretical rather than a statistical approach (Bryman, 2004), therefore it satisfied the purpose of this study. Furthermore, I expected the individual narrative experiences of each participant as they occurred on the job to drive the data, thus making it more amenable to interpretation and theory.

To obtain a gender-balanced perspective, referrals were made of female officers who might have been willing to participate. Studies on female police officers are inconclusive as to whether there is a correlation between gender and the treatment of civilians. Brooks et al. (1993) found that female officers were less oriented to using force. Other studies found no significant gender differences in carrying out police duties overall (Paoline et al., 2000; Worden, 1990). Despite the lack of conclusive empirical evidence, I was curious to hear the perspectives of female officers to see if there were differences in their approach to apprehending persons in crisis compared to their male counterparts. I was interested in their views on factors such as stigma, gender and race and the intersection with mental health. One senior female veteran in the advanced stage of her career, agreed to participate in the study.

As the TPS is comprised of predominantly White officers, I had to be particularly mindful of the anonymity of non-White participants who, within the organization itself, would understandably be concerned about backlash after giving their idiographic accounts of their experiences as minority members of the service. I also had to be mindful of protecting White police officers who may have progressive views that are not reflective of a traditionally conservative profession. All had unique stories based on their own lived experiences with racism inside and outside the police organization. Knowing that this

study could be published, I was particularly sensitive to representing each participant's accounts while ensuring that the data was constructive rather than inflammatory.

5.8   Data Generation

5.8.1 Ride-along in a squad car

Both the university and the TPS granted ethical clearance, Therefore I started my fieldwork and soon found myself being fitted with a bulletproof vest and hopping into the back of a police car. This is rarely good under different circumstances, but for research it does not get more 'real' than this. I found great humour in the stares I got from the public as we pulled up to speak with homeless people or others who appeared to be in crisis. I surmised that onlookers thought that I, a Black woman, was a criminal suspect under arrest. It reminded me of a scene from the movie *Lethal Weapon 4*, where Joe Pesci's character, Leo Getz, automatically thought that Chris Rock's character, Lee Butters – dressed in a suit and tie – was the 'perp' simply for riding in the back of his team's police car. Insulted by the racial profiling, Butters brandishes his police badge and commanded Getz to, "Look at this badge, bitch!" Here, I was as a character in my own research scene, observing the utter shock on people's faces each time as I was casually let out of the backseat of the squad car to join the MCIT team. It was priceless. I had no badge to brandish, but the bulletproof vest clued onlookers in that I was not a 'perp' after all. Their relief was palpable. Alas, order was restored.

Starting with the ride-along mode of data generation was strategic. I made an initial judgment call that this was the most logical starting point where I could actually meet police officers in person, establish a rapport, and have a fast immersion in the field –

especially after the delay caused by the lengthy approval phase. This worked out as planned. The TPS arranged for the MCIT team that I would join. The individuals in the MCIT had not yet been provided with the letter and consent forms. The ride-along did not require the officers' consent because it was the police headquarters who picked the team to which I would be assigned. This was tacit consent. The intent was to give me insight into a dedicated MCIT team rather than a Primary Response team. I was offered to ride-along with both types of teams but because of the focus of my study and time constraints, MCIT gave me a greater possibility of observing situations involving persons in crisis in the event that an unforeseen obstacle would prevent another opportunity. And indeed, it did. COVID-19 arrived and all ride-alongs were placed on hold.

Seizing the first opportunity, the mental health unit coordinator assigned me to an MCIT team consisting of a nurse and a police officer for the ride-along portion of the study. These participants were considered experts. These experts recommended other participants who had knowledge of MCIT practices and who had years of experience as first responders. On the ride-along I observed firsthand the practical application of police training. To be immersed in police spaces was invaluable as I could witness deeds and not just rely on words (Herbert, 2001). I was acutely aware of the inherent dangers in this part of my fieldwork. Police work is one in which situations vary and are unpredictable (Crank, 2004) but I was not deterred. I knew that I was in the company of trained, competent and experienced professionals. Free-form notes were used to record my observations. Notes were taken immediately after each situation was resolved as it was neither practical nor safe to be writing while an apprehension was in progress. I

observed the interactions between the MCIT and persons with whom they interacted which included homeless people, persons in crisis who were visited as a result of 911 dispatch, and random persons who were engaging in behaviour that could be deemed risky or unlawful. I made notes once I was back inside the police car, for safety reasons. Overall, I was well received by the MCIT in the ride-along phase of the fieldwork.

5.8.2 Classroom Observation

It was important to me as a researcher to be sensitive to the research context and immerse myself in the setting (Bernard, 1994) and situations as much as was permissible by the police department and the university. Observation is well suited for the "experiential nature" of police service, and for developing "richer knowledge of the service phenomena" (Grove & Fisk, 1992: 218). It requires observing the sample and listening to their conversations (Faryadi, 2019). The intent was to "develop a holistic understanding of the phenomena under study that is as objective and accurate as possible given the limitations of the method" (DeWalt & DeWalt, 2002: 92). The context of how police officers learn and how they put theory into practice was essential. Researchers must consider the full context of people's lives. As Dewey (1966: 144) notes, "An ounce of experience is better than a ton of theory simply because it is only in experience that any theory has vital and verifiable significance". If researchers understand the context, they can locate the actions and perceptions of individuals and grasp the meanings that they communicate (Holloway & Wheeler, 2002). Observation allows researchers to see events first hand that informants may otherwise be unable or unwilling to share (Marshall & Rossman, 1989). Again, I used free-form notes to record classroom observations as I paid attention to reaction to topics, discussion language

and questions asked of the course instructor, rather than risk relying on memory for both observation exercises. Reducing events to memory could increase any susceptibility to "human frailties" (Bryman, 2004). In my discussion of the RQs, I incorporated my own learning experience from observing the classroom activities.

The classroom experience was one in which, as a non-police researcher, I could be described in the words of Ryan (2008: 1) as the "token insider" who was "not fully accepted, different, yet tolerated". I was introduced to the class and my role was explained. Consent of the police headquarters ethics department legitimized my presence but may have had little effect on dispelling suspicion and unease with some officers who I approached to request their participation. I had to reflect on my own presence as a Black female lawyer in a classroom of mostly White male police officers who may be uneasy with my presence. In an institution built on deeply entrenched hegemonic practices, these multiple identities could be inimical to the trust-building process with the intended participants. I remained aware of my multiple identities throughout the fieldwork phase, but especially so in the classroom setting. I sat unobtrusively at the back of the classroom close to the exit where I could observe 'students' as they received instruction in a lecture style format. I then followed the class as they moved to a specially designed classroom for role-playing exercises where a subject matter expert from the University of Toronto used 'Scenario Training' to enact common symptoms of certain mental illnesses. Role playing exercises involved simulating encounters between police officers and persons in crisis played by actors. It is noteworthy that none of the actors were Black. I noticed that the only visible minority actor was a biracial woman. Given that a most pressing issue in policing at the time was

the disparate treatment of Black persons in crisis, it might have been prudent to include actors that reflect this reality. Role play is a pedagogical tool used to facilitate experiential learning and should be as realistic as possible in order for it to be effective. Doing so allows the police, as learners, to become emotionally connected (Karve, 2011). Including Black actors could trigger different emotional responses or nuanced interactions. This is a suggestion worth canvassing by the police course administrators.

In one scenario, the police officers and I watched role playing from an observation deck approximately 15 feet above the classroom floor. I observed a scenario involving someone displaying signs of intoxication and violence. In another scenario, re-enacting the behaviour of a paranoid female, everyone was situated on the same level in the classroom for a more up-close demonstration. The aim was to give each officer an opportunity to takes turns in an exercise using their own dialogue and approach to attempt de-escalation, and to demonstrate what they were taught in the previous lecture. The body language and facial expressions of the actors were easily observed due to the strategic layout. Verbal and non-verbal communications were observed, including de-escalation techniques and officer empathy. The three scenarios represented common situations in which police officers are likely to be involved. Although it was a simulation exercise, role playing may be a predictor of how officers will likely respond in real scenarios in relation to their personal philosophies and training. Silverstone et al. (2013) conducted a study on police emotional responses while watching role play situations with actors displaying various types of mental psychoses and found that police culture influenced the attitudes and opinions of each police officer toward persons in crisis even in re-enactments.

5.8.3 Using Narrative Ethnography

Narrative ethnography was appropriate for the purposes of this study. My intent was to understand policing better as a subculture as opposed to simply finding out about individual officers (van Hulst, 2020). The methods of data generation used are the pillars of narrative ethnography and produce written, spoken and narrative data (Gubrium & Holstein, 2009) as I explore the officers' stories within the context of police culture. Ethnography situates the participants within the culture being studied (Creswell, 2018). Police officers have rich ethnographies and there is a growing interest in hearing them (van Hulst 2020, Rantatalo and Karp 2018). Based on the nature of police work, which is rife with risk, danger, uncertainties and variety (Crank, 2004; Shearing & Ericson, 1991), I too was curious and presumed that there must be 'war stories' to tell. Police experiences are many and varied but a review of the academic literature suggests to me that their voices are seldom represented in texts. By using narrative ethnography, I anticipated that the participants would provide thick descriptions of their individual experiences as police officers from their nuanced standpoints.

5.8.4 The Questionnaire

Two participants asked for the questionnaire ahead of the interview. I provided it along with the Participation Information Sheet (Appendix B) and the Consent form (Appendix C). This gave me the impression that participants were somewhat guarded and apprehensive, protecting against being caught off guard. What was common across all participants was an understated concern that I might end up publishing something unflattering about them or the police organization in general. Building trust is crucial to obtaining valid data in ethnographic research (Herbert, 2001). The data runs the risk of

lacking authenticity if there is no trust (Lincoln & Guba, 1985). There is the possibility that participants might 'play it safe' and suppress their genuine opinions, resulting in unreliable data. When people are aware that they are participating in a study, a component of their replies or behaviour is likely to be influenced by their knowledge that they are being investigated (Bryman, 2004). Given these risks, it was important for the participants to feel comfortable to speak freely without fear of reprisal. Each was consequently reassured that participation will not affect their job performance reviews or be published in a way that could identify them. The intent was that there would be no adverse impact on their careers.

The questionnaire contained fundamental issues that were grounded in the RQs (see Appendix D). I included questions that could generate more granular information based on each officer's unique experience and personal philosophy. For example, one RQ stated: What are the grounds/appetite for making race-based pedagogy mandatory within police training? This question was designed to elicit views toward applying CRT to the curriculum. On the questionnaire, I posed it slightly differently, using less esoteric language. It stated: How do you feel about making race-based education a part of the police training curriculum? While the study was in progress, the TPS added Intercultural Communications as a subject to the curriculum. The questionnaire was revised to explore officers' views on the new addition: "The TPS has added a new component to the course Intercultural Communication lecture/presentation. Are you familiar with that?" I asked further: What are your thoughts on the addition of Intercultural Communications to the curriculum? Given the infancy of the new addition, some officers were unaware of this development. They nonetheless gave their opinions on the subject and the issues

they anticipated would be included in the course content. Two of the returned questionnaires contained brief, type-written answers, expressing overly broad, generalized views. This rang of being extremely cautious. The questionnaire became the basis for the semi-structured interviews, where the answers were more expansive.

5.8.5 Semi-structured interviews

The primary method of data generation was in the form of semi-structured interviews with the same questions asked of each participant to allow for fairness and reduction of biases or impartialities. The semi-structured interviews conducted by phone commenced once the consents were established electronically. I used the interview exercise to probe further into the written answers from the participants who previously completed the questionnaire. At the beginning of the interviews, a quick overview of the study was again provided, which explained its significance to the field of education and social justice. I used this opportunity to again reassure anonymity and to restate that there was no desire to exploit or malign. Next, I asked if they had any questions or concerns about the consent form or the interview process itself, especially being recorded as a backup to my handwritten notes.

Once the preliminary matters were accomplished, the interviews commenced. All interviews were conducted by telephone. Each interview lasted between approximately 90 minutes and 2 hours. All except one participant chose to be interviewed during their days off work. Their shifts were usually five days on, four days off. I had to seize the windows of opportunity that best accommodated each officer. Open-ended questions allowed participants to express their opinions, concerns, and feelings unreservedly,

thereby allowing the conversation to flow and enabling them to speak freely and elaborate on answers in their own narrative. People tell their own stories best (Darlington & Scott, 2002). The interviews were intended to be relaxed and informal to allow participants to provide their narratives freely without feeling pressured to fit into a time frame. Creating a relaxed atmosphere in itself can itself influence the data. As Muylaert et al. (2014: 186) note, the narrative method can highlight characteristics for language including "tone of voice, pauses, changes in intonation, silence that can be transformed into narratives not heard, expressions, etc., fundamental to understanding the unspoken, because in the narrative analysis process explores not only what is said, but also how it is said". It was anticipated that the use of personal narratives would provide a better understanding of real life – police experiences on patrol. Stories and storytelling play a role in police ethnography and fieldwork, and their stories are helpful in describing the subculture (van Hulst, 2020).

I maintained my ontological view throughout the process that a comprehensive police curriculum should be enshrined in social justice. All participants were asked the same questions and were allowed to relate their personal experiences and perspectives on aspects of policing pertaining to mental health. The interview questions were derived from the RQs and posed to avoid generalizations, but rather to provide more granular descriptions of the police experience by eliciting views on crisis training, race, challenges faced, culture and media representations. As I interviewed the police officers, I had to strike a delicate balance between not alienating participants in an institution with a firmly established ethos with my compulsion to impose my ontological stance on the issue of racial disparity in policing outcomes. Reflexivity being a natural

part of ethnographic research (Herbert, 2001) enabled the conversations to flow tension-free. It allowed me to remain true to myself and the process by posing alternative viewpoints on issues such as race, stigma, and marginalization. I sought the participant's perspectives but wound up, at points during the dialogue, presenting a different perspective or provoking thought without being argumentative. Critical methodology is both "dialogic and dialectical" (Guba & Lincoln, 1994) and I entered the field with an open mind, knowing that there is no single, right way to decide issues. The answers will depend on personal interests, views, and value assumptions (Ulrich, 2001).

Opinions and perspectives can support processes of reflection and debate about alternative hypotheses (Brookfield, 2009), which is vital to the data. My position on the issues affecting persons in crisis obliged me to dig deeper into their opinions and question narratives as I recorded the data – without being judgmental of participants' points of view. Further, my research interest lends itself to the transformative approach and requires acceptance and participation of the people involved (Mezirow, 1997). Essentially, the objective is to effect change or transformation in an area that has been largely dormant, despite several public inquiries and research findings.

During the interview, I asked participants to expand on their answers for clarity where necessary. This was a catalyst for thick descriptions of their experiences, thus enriching the data. The concept of 'thick descriptions', coined by philosopher Gilbert Ryle (1968), allows the person being interviewed to give detailed accounts of their answers. 'Thick description' is a pedagogic technique of posing questions to provoke incorrect or correct answers, then critically examining the answers. It allowed me as a researcher to resist

generalizing across situations, narrowing each person's experience within the context of their personal and professional lives and moving the discussions beyond abstractions (Geertz, 1973). It allows for contextualization of experiences based on the individual's cultural and social relationships (Holloway, 1997) which, in the case of the police officer interacting with the public, may dictate how they handle a crisis situation.

Providing the questionnaire in advance was helpful, as it gave the participants an opportunity to think about the issues. Their answers ultimately included stories of personal experiences and a wealth of examples of incidents that occurred on the job. In some responses, their thick descriptions helped to unveil "agendas that may be hidden deep within bureaucratic structures" (Thompson, 2001; 70) to which the lay person reading the findings of this study would not otherwise be privy. The richness in narrative has positive implications for findings, as it provides "adequate voice" (Ponterotto, 2006) of the participants by use of long quotes. This will be demonstrated in the following chapter. Audio recordings were used as a backup to free-form notes, with the permission of the participant. In addition to the audio recordings, transcription software was used to supplement the free-form notes.
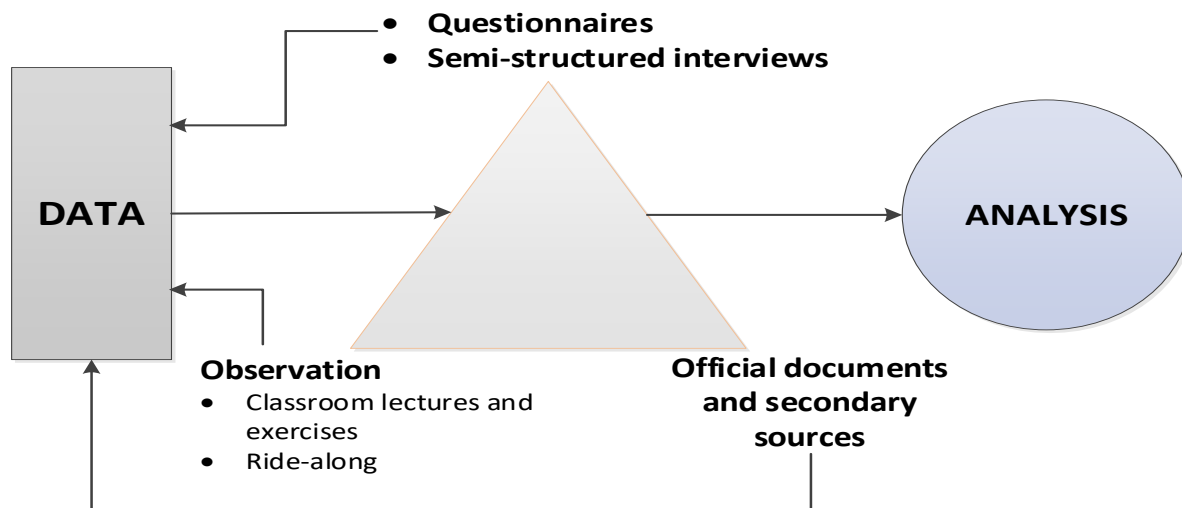
Figure 4: Modes of Data Generation

By applying various modes of data generation, I was able throughout the research to cross-check for validity, which is essential to qualitative research (Lincoln & Guba, 1985). In the next section, I discuss how the generated data was synthesized into themes.

5.9   Thematic Analysis

I started the data analysis process by transcribing the notes gathered from the classroom observations and the ride-along exercise. Each interview was transcribed as soon as possible after completion. Thematic analysis was used to extrapolate certain themes from the data that were common across the modes of data generation, thus formulating theory. It is flexible and applicable to many forms of qualitative research (Braun & Clarke, 2006) and reports patterns (themes) within the data. I sought to discover relationships in the raw data, relate them to themes (Strauss & Corbin, 1998) and develop explanations of the social phenomena (Hancock, 2002) of negative outcomes of police interactions with persons in crisis. Prior to embarking upon the

research, I had already conceptualized certain themes based on my understanding of the subject area. My ontological and epistemological positions going into the research drove the RQs and formed the basis of pre-designed codes to analyse the data. Although I kept an open mind during the data collection process, my own positioning and background preparation shaped the codes I would apply to the data, and the form of themed analysis in which I would engage. Braun and Clarke (2006: 12) note, "researchers cannot free themselves of their theoretical and epistemological commitments, and data are not coded in an epistemological vacuum". I had already examined prior research in the area of policing and mental health. I was familiar with the public inquiries having been factors that drove my interest in researching this topic. There is a body of evidence which suggests that race and stigma greatly influenced how police officers treated persons in crisis (Skeem et al., 2011; Markowitz, 2006; Cotton, 2004; Teplin, 2000; Lamb & Weinberger, 1998). Therefore, I could not blot out from my consciousness these sources of pre-existing information as though I was going into the research with no prior knowledge or with a 'blank slate'.

In essence, my continuous analysis encompassed the entire project, from start to finish, which is a reality of qualitative research (Basit, 2003). Once the anticipated themes became more apparent, I was able to determine words that would be good codes within the context of the police and mental health training. Coding involved assigning meaningful tags or labels to the generated, which can be either descriptive or inferential (Miles & Huberman, 1994). Boyatzis (1998: 1) suggested that a "good code" is one that captures the qualitative richness of the phenomenon. As I went through the analytical

process there were discrete passages of texts that represented the same theoretical idea. For example, some excerpts from the transcripts state:

Matthew (a Black officer):   "[a]nyone who thinks race in not an issue in policing is in the wrong profession. In fact, the TPS needs to weed out troublemakers."

Debbie, (a Black officer):   "Anti-Black racism is a big problem. Let no one fool you… I have worked with a lot of racist cops."

Daniel (a White officer):   "Some officers do discriminate. I don't."

CODE: Racism in prevalent in Policing

During the interviewing stage, I increasingly noticed patterns, and certain themes became pronounced as I transcribed the data. As the process continued, the analysis was guided by questions, issues, and a search for patterns rather than by hypotheses (Patton, 1987).

Figure 5: Codes applied to the data

The answers provided by each police officer were cross checked with data from various sources and narratives in the study. Cross-checking enhances credibility, transferability, dependability and confirmability which are crucial factors to consider in qualitative studies (Lincoln & Guba, 1985). The ability to compare notes across all sources I employed in the study, enhanced the reliability and validity of the data. Given the volume of data generated, I used the Delve computer application to assist me in the process and to provide more rigorous data analysis. A manual process was attempted but was soon abandoned as frustration mounted. Once I decided on which software to use, I applied a theoretical or 'top-down' data deductive analysis (Boyatzis, 1998; Hayes, 1997) to identify themes within the data rather than an inductive, 'bottom-up' method (Frith & Gleeson, 2004). In the latter, the data drives the theme, and the data is coded without fitting it into a pre-existing coding frame. In the deductive approach, coding is influenced by the researcher's interest and is analyst driven (Braun & Clarke, 2006) – which relates back to my pre-research approach wherein I had conceptualized codes for how I could best explain the phenomenon of negative outcomes from interactions between persons in crisis and the police. My conceptualization was based on prior knowledge, experience in the justice system, and secondary data sources that covered the pressing issues in policing and mental health.

CODES

- Stigma is a part of police culture
- Some officers are racist
- Heightened sense of alertness
- Most officers keep stigma in mind
- Person could be violent

- Don't trust the police
- Accused of being a racist
- Accused of being a sell- out

- Stop talking about race
- No racism
- I'm not a racist
- Treat everyone equally
- Race-based education is unnecessary

- We are not doctors
- MCIT is not for everyone
- We learn basic stuff about MH

- Lack Emotional intelligence
- Need to use Soft skills
- De-escalation
- Empathy

- Increase training on stigma
- Officers lack experience
- Train more officers in CIT
- PRU officers not fully trained in CIT

- Ignorance about communities
- Communication is important
- Cultural misunderstanding

- Need to control the message
- Little internal support
- Negative stories
- Raise awareness

BASIC THEMES

- Stigma is still prevalent in Mental Health
- Racism is prevalent in policing

- Unconscious bias and
- Colour-blind ideology is prevalent in policing

- Police culture is pervasive
- Emphasis is on traditional, use-of-force training
- Role confusion in co-response model

- Police training is deficient in some key areas
- There are inadequate human resources

- Police are affected by internal and external factors including negative media reports

ORGANIZING THEME

Discrimination is normative Policing

Police training lacks critical pedagogies

Police are performing under pressure

GLOBAL THEME

NEGATIVE OUTCOMES

Figure 6: Emergent themes generated from codes

Summary

In this chapter, I discussed the methodological approach to this study used to investigate the crisis intervention curriculum at the TPS. A ride-along provided immersion in the field where I witnessed actual interactions between the police and persons in crisis in the streets of Toronto. Observations in the classroom provided further insight into the curriculum. By providing a questionnaire, the participants had an opportunity to think about the issues being and provide written responses which were later expanded upon during the semi-structured interviews. Here, I discussed how I engaged police officers and a mental health nurse to elicit their views on training. I explain how my ontological and epistemological stances influenced my approach to the topic and the selected modes of inquiry employed in conducting the research. By using narrative methodology, I probed deep into the participants insights to explore whether, in their view, the training was accomplishing the goal of achieving positive outcomes arising from interactions with the police and persons experiencing mental health and addiction crises. Finally, thematic analysis was selected as the method of analyzing the data based on common themes across the responses. The following four chapters present the findings from the research and considers them in relation to the RQs.

Chapter 6: How does the TPS curriculum address mental health and addiction needs of persons in crisis?

6.1   Introduction

To begin the discussion and analysis, this chapter addresses the first RQ. First, I examined the current curriculum by going beyond the syllabus to hear directly from police officers. The purpose was to uncover the finer details involved in training which I would only be able to acquire by personally participating in the program. I was curious to find out whether the training curriculum is being applied equally across the police organization. Next, I sought opinions on the strengths and weakness of the bifurcated curriculum between police and mental health. Participants are referred to by pseudonyms to protect their identities. Their narratives from which certain themes were derived, are presented in this and the following chapter. The findings were analyzed and are organized around the RQ. There are many aspects of the CIT Level 1 in-service training, which are common across Canadian jurisdictions. The course titles may differ slightly, but all jurisdictions cover areas such as mental health symptoms, the role of the justice system, de-escalation, role play/simulation and communications. These are broad-based subject areas across CIT. Each officer related their experience or familiarity with the curriculum and the mental health training provided.

6.2   The CIT Curriculum

There were some inconsistencies across responses. Some officers were vague in their recollections as to course content and frequency. All officers related that they were required to do a minimum number of hours of in-service mental health training annually.

For example, Matthew, a veteran of over 10 years and who served in the PRU explained:

> I know we are supposed to have ongoing training at the [police] college then you just, like, check a box to say you attended a few days and met the standard. Each year there is regular use-of-force training that we all have to attend. This is supposedly enough to allow us to respond to [persons in crisis] but I am not certain that it is adequate. We are taught basic stuff such as de-escalation techniques and how to recognize certain symptoms which should make us alert to certain things or certain behaviours but it's not as in depth as a nurse of doctor would know.

What I found interesting in Matthew's tone was that he only engaged in the annual training as a matter of satisfying a refresher requirement, but he was somewhat detached and unimpressed by this mandatory training exercise. I sensed a profound lack of interest in mental health crisis intervention. Likewise, Daniel, a 22-year veteran, recalled having to attend CIT throughout his tenure at the TPS. He related an *ad hoc* approach to in-service training as opposed to a set standardized syllabus or schedule. He recalls:

> I know that we all have to do an annual refresher that we all have to attend. Basically, the CIT courses prepares us to de-escalate situations, give assistance and provide safety and we have to do a certain minimum number of hours each year to keep us up to speed. The basic requirements could change because the [TPS] continues to evaluate as we go along and watch trends to see what needs to be adjusted.

The vagueness in Matthew's and Daniel's recollection while sharing their knowledge of CIT was interesting data in itself. Because they were unable to provide concrete information about course length or content, I researched the information by perusing the CIT policy documents. The police training handbook confirmed that 40 hours was, in fact, the minimum requirement. Their responses signified that the mandatory training was not being enforced consistently on an annual basis. Depending on the area of

policing to which an officer was assigned and the level of seniority within the TPS, the inference was that the 40-hour requirement might not be strictly enforced through all stages of an officer's career. The vagueness in describing the curriculum could be indicative of unclear guidelines or documentation to support professional development requirements. This was a weakness identified by Coleman and Cotton in their 2014 study. Based on the officers' responses, not much seems to have changed since then. I fully appreciate that the loose description of CIT could be symptomatic of a program that is under constant review to see what works best (Bartkowiak-Théron, 2019), which is a pragmatic approach to incorporating best practices. Daniel expressed this. However, the nebulous details provided were further indicative of a lack of keen interest in CIT by these two officers. Continuous CIT is irrelevant to certain departments, such as fraud investigations or senior administrative roles which could result in vague or inaccurate answers. These were areas that needed to be hashed out by further inquiry.

I turned to the data provided by MCIT-trained officers' accounts for more clarity. Jon, who was trained as an MCIT officer, offered a more granular description of the curriculum, which went beyond with the written material obtained from the TPS. He explained:

> We have to do 40 hours of training. This is made up of in-person training at the college and some can be done by e-learning online modules. All PRU officers have to attend classes for at least three days each year. The balance can be by e-learning. MCIT officers however attend Level 1 training for 5 days in addition to the 40 hours of in-service training. Later in the year, they attend the Level 2 training for two days. Essentially, Level 2 is a recap or refresher of the Level 1 training.

There was no indication that Jon was merely interested in checking off a box to satisfy a mandatory requirement. As a specialist MCIT member, he was attuned to the mandate

and could readily provide the information without trying to rely on memory to describe what transpires over the course of the year. The level of detail was demonstrative of an officer who was certain of the curriculum requirements. His responses were aligned with the CIT syllabus (Table 2). Jon's narrative indicated that he was passionate about mental health. He shared that he was deliberate in his choice to join MCIT. It was not a task that was imposed upon him. An officer becomes eligible for consideration in this unit after completing three years of police service in primary response units (CIT International, 2017) to ensure they have reasonable experience interfacing with the public. I was advised that there is a wait list to join MCIT which is a positive indication that more officers are genuinely interested in being of service to persons in crisis. The information given by Peter, another MCIT officer, corroborated Jon's narrative. Overall, the MCIT members tended to be more precise in their responses regarding the training requirements in terms of length and content. This was a reflection of the years of service in this specialized area. Considering the fact that MCIT officers are those who agreed to voluntarily join this specialized team, it is not surprising that they would appear to be more dedicated to their role.

6.2.1 Role play exercises

To gain a better understanding of the basic CIT requirements, I observed role playing exercises at the training college on the final day of the 1-week course. Although role play is incorporated in the in-service CIT course, through a race-based lens I immediately noticed that the cast of actors did not represent the racial diversity of the city. I noted that – with the exception of a biracial woman actor – all other actors were White. Although these were role play scenarios, given the racial disparity in outcomes

where Black people are at greater risk, this was a missed opportunity to use Black actors in training scenarios and look for the emotional responses (Karve, 2011). It is important to note that the scenarios were not scripted, which allowed for creativity and reflexivity. Since police culture has a great influence on interactions with persons they apprehend. It would have been interesting to gather data from an interaction involving a Black person showing signs of mental health distress or addiction and the reactions to it (Silverstone et al., 2013). Body language, facial expressions and signs of empathy are indicators that would make for a good comparison with the interactions with White actors. It would be vital data to see the reaction of the officers watching the role play exercises. There may have been differences in approach or (unconscious) biases displayed. Overall, the data indicates that CIT has incorporated a multi-modal approach to curriculum delivery. CIT is a relatively new initiative and as it moves along a continuum away from traditional policing to more humanistic concepts there is observable progress being made. The curriculum tells us what the subject areas are and how it is delivered, but the critical issue is the operationalization of the acquired knowledge. This elicits an exploration of its adequacy.

6.3   Determining the adequacy of Crisis Intervention Training

Peterson and Densley (2018) found that it was inconclusive as to whether CIT is effective as measured by the varying outcomes. The adequacy of training is undeterminable even within the TPS. Officers who were new to CIT generally had positive comments. Warren, a veteran with over 10 years of experience explained that the MCIT training is "very good". He did "not see any downsides to the program" and felt it was "enough for front line officers". The training in CIT models is designed with cross-

functionality in mind to enhance police officer training simultaneously with other disciplines such as emergency medical services (Coleman & Cotton, 2010). Depending on the assigned units and the level of interest in crisis intervention, determining what constitutes "enough" is subjective. I argue that the sufficiency of the program can only be determined after weighing if negative outcomes have declined after having undergone CIT. Similar training has been found to have a positive impact on officers' attitudes toward mental health crises (Koziarski et al., 2020; Compton et al., 2015; Bonfine et al., 2014; Ellis, 2014; Hansson & Markström, 2014; Skubby et al., 2013; Wells & Schafer, 2006), but to assert that the training was "enough" seemed premature. Warren provided no benchmarks against which he measured adequacy. Furthermore, he had not yet the opportunity to test his own capacity and knowledge acquired from the CIT course.

Chris, who spent a number of years in the PRU, likewise had a favourable view about the CIT course and is interested in joining a MCIT whenever the opportunity presents itself. He provided a more objective measure of what he gained from the training. He found the CIT course to be "very effective" because he viewed it "as a constant reminder of changes in legislation and de-escalation techniques when dealing with people with mental health problems". Although he too did not have the opportunity yet to put into practice what he learnt from the course, he was able to pinpoint at least one area that was useful from an informational standpoint. Police officers rely on the legislation that authorizes them to detain persons in crisis for observation at a hospital or simply leave them alone if they are not a danger to themselves or to others. Chris's

answers indicated that – in conjunction with his duty as a police officer to maintain law and order – legal compliance was vital for participants in the justice system.

Matthew expressed concerns about the adequacy of training, although he could not conceive a frame of reference or metrics by which he could make an informed opinion: He commented: "I'm not even really sure what proper training should look like. My role [many years ago] was to de-escalate but now, as officers we are slower to react." Slower reactions mean hesitancy in applying lethal or injurious force, which is one of the main objectives of CIT. Officers are trained to use soft skills, which allows them to use tactical communications and exercise empathy (Galderisi et al., 2015; Ellis, 2011) rather than resort to force. Matthew perhaps unwittingly conceded that CIT may be in fact adequate and effective.

Jon is of the view that more training is needed at the TPS. He explained that a variety of techniques are covered, such as stigma, symptom recognition, de-escalation techniques, safety, and triaging the persons in crisis to make a decision as to who should be taken to the hospital. He concludes, "[We] need to do more [training] though. The courses are good but there should be more frequency in the training… it should be at least every three months to keep everyone sharp and prepared to deal with these [MHA] types of situations." Identifying and classifying a mental health condition requires specialized skill. This suggests that problem may not be adequacy but frequency of course delivery in order to sufficiently grasp the required skills.

Rick, who was the newest member of the group of participants, was critical of the training. He pointed out what he felt in his limited experiences, were deficiencies in the

mental health curriculum. In fairness, he made a disclaimer that his perception of the curriculum may be skewed by not having proper metrics against which to evaluate the training he received or to do a comparative analysis. He commented:

> [The training] is not very much [for new recruits]. However, it may have been attributed to COVID. But I still don't think sufficient resources were allocated. [W]e have lectures that deal with a subject or dealing with calls for mental health, but I didn't even understand at the time from a police perspective, mental health in this context meant or what a [person in crisis] is…

Based on Rick's assessment, some modes of instruction for in-service training were valuable to new recruits. He recommended: "[H]ave more time and resources dedicated e.g. via videos. Break down a scenario of a person going to mental health calls. I don't think a lot of time was placed. Because of COVID we were pushed out [of training college] a little bit earlier." Role playing exercises are reserved for in-service training such as Level 1 CIT, and not for new recruits. Rick's feedback could be instructive to curriculum designers. It is impractical for new recruits to have interactions in real-life scenarios dealing with persons in crisis. It would make sense to simulate situations through role play to prepare them for the moment when they will actually interface with the public. Role play exercises have been found to be useful in studying police interactions (Silverstone et al., 2013) and new recruits could be better off engaging in a simulated exercise to prepare for chance that they will have to interact with persons in crisis after graduation from police college.

Summary

In this chapter, I sought to explore officers' insights into CIT. First, I sought clarity about the CIT course through officers' understanding of the curriculum, and their experiential

learning. I compared limited course syllabus material that was provided by the police service with officers' explanations of what they learned in training, and how CIT was operationalized. Although there were slight variations in their responses, what became clear was that there is a mandatory 40-hour annual training in mental health for all police officers. The data suggested that new recruits receive very little CIT. Further, officers do not attend the CIT course every year. The 40 hours are distributed across a mixture of online modules and in-class lectures. On paper, the course content included topics such as mental health symptoms, the role of the justice system, de-escalation, role play/simulation exercises and communications. The officers' descriptions of what they learned in CIT mirror the text of the syllabus. Some key areas of training stood out from the interviews and observing role play exercises. Working iteratively between the data, some common topics that emerged were 'stigma', 'symptom recognition', 'de-escalation', and 'officer safety'. Most police education programs included these core areas using the TEMPO framework (Coleman & Cotton, 2010). Primary Response officers did not mention stigma as a part of their training while this was a topic on which MCIT officers spoke with passion and knowledge. The distinction between MCIT officers and the others was an indication of the progressive shift from traditional training to more a more social justice-informed practice – a difference that can be attributed to CIT (Hansson & Markström, 2014; Pescosolido et at., 2010; Watson et al., 2014, Compton et al., 2008; Pinfold et al., 2003). All participants agreed that CIT is a step in the right direction as it was designed address the specific needs of persons in crisis. There were mixed opinions as to whether the training was adequately preparing officers to handle crisis situations involving persons in crisis. Because CIT is relatively new to policing, my enquiry revealed that there were no established metrics to measure adequacy. Given

the marked difference in tone and the level of detail provided by the regular officers versus the MCIT officers' responses, a deeper probe into the perspectives on the strengths and weaknesses in the CIT collaborative strategy between policing and nurses is needed. In the next chapter, I explore the officers' opinions on whether CIT is meeting its goals.

Chapter 7: What are the perceived strengths and challenges of a collaborative curriculum?

7.1   Introduction

In this chapter I examine some of the strengths and weaknesses of the crisis intervention collaboration. Within this strategically designed arrangement, trained nurses in mental health, triage each case based on symptoms displayed by persons in crisis. The nurse's role is to advise the police about the possible behaviours to expect (Blaise & Brisbois, 2021) so they can be prepared to handle situations. The evidence suggests that CIT builds capacity in police officers to resolve mental health crises through this partnership. Like any new initiative that is still trying to figure out what works best, there are strengths and challenges. I will first discuss the positive aspects.

7.2   Improving communication skills

A strength in the curriculum that all participants emphasized was the teaching of de-escalation techniques. It is a core component of the CIT Level 1 course and a common theme that came out during the interviews. MCITs tend to have more experience and are adept in deploying de-escalation techniques. They have participated in the advanced Level 2 CIT program, which is generally a refresher which repeats Level 1 training. Officers are trained to apply soft skills rather than force to gain compliance from persons in crisis (Richmond & Gibbs, 2021). Tactical communications prevent situations from spiralling out of control and lead to lethal force. Jon explained that, while engaging

the persons in crisis, they would try to figure out the psychosis of each client. He commented:

> The nurse is more familiar with symptoms, but she does not exactly make a formal diagnosis. It's not possible to do that on the spot but she does the assessment based on the behaviours [of persons in crisis] presented. As a team we complement each other.

As an MCIT officer, he understands his role and sees the value in collaborating with someone who has more expertise, which only makes his job more manageable as he learns what symptoms to look for. Likewise, Peter distinguished the roles in the MCIT co-response model which highlighted a key strength of the program. He confirmed that his role as the law enforcement officer is foremost to ensure safety and de-escalation to "make sure things don't get out of hand". He too, credits the partnership with an MCIT nurse who is familiar with symptoms of persons in crisis for making his job easier. The knowledge imparted by the nurses informs the reaction of officers, and allows them to engage their emotional intelligence as needed (Ellis, 2014). It informs the decision as to whether to refer the individual to a hospital, take no further action or to detain and transport to a hospital. CIT trains officers to exercise more options to assist persons in crisis, and to encourage them to seek help.

Although Matthew, was not entirely supportive of the notion of a co-response model of policing, he admitted that "MCIT has its place". He advised that his view of MCIT was mostly informed by other officers from his division that are on the MCIT. He explained that those officers get exposed to a wide range – or varying degrees – of mental illnesses and respond accordingly. He sees the value in the collaboration and explained:

> [MCIT] take the brunt of those calls as much as possible. They try to intervene a lot quicker than a frontline responder would. If a person gets there without a nurse, they would standby and request one, in the hope that they can get there if they're not tied up. If not, then they resort to whatever tools that they have, the tactical communication or de-escalation techniques to try to control the situation as much as possible to make sure that no one gets hurt and they get the help that they need. So those are pluses.

Using soft skills allows officers to de-escalate situations by using tactical communications and exercising empathy (Galderisi et al., 2015; Ellis, 2011) which allows them to make rational decisions. Engaging empathy is a core purpose of collaboration. It facilitates alternative ways of thinking (Lietz et al., 2017; Birzer, 2008).

7.3   Exercising Empathy

Fatalities during police-citizen interactions have occurred due to a lack of empathy. Jon, in explaining the role of an MCIT officer, highlighted the importance of empathy and officer conduct. His view is: "Empathy is a big part of being a police officer. Most officers keep stigma in mind. [T]hey are mindful of their own body language and spoken language." Empathy is one of the most important character traits of a police officer (Birzer, 2008). During my fieldwork I had an opportunity to witness empathy in action. We were first responders to a particular scene. Two Primary Response officers arrived afterwards, whom I recognized to be the same officers we had passed at a busy street intersection on foot patrol, kneeling down to have a conversation with a homeless person who was laying down on the sidewalk in the -10 degrees temperature. This relates back to Jon's statement. I asked the officers what they were doing at that scene.

They replied that they were just ensuring that the homeless person was "OK". What I witnessed in person, is not what I would normally see reported in the media.

Debbie was laudatory in her view of MCIT, and supports this specialization. She believes that MCIT-trained officers are better suited to handle mental health crises and take the pressure off other officers. She recognizes a difference in police personalities and finds that MCIT officers "are more patient". One of the problems she identified when she was working in Primary Response was that some persons in crisis do not trust the police because they would often break promises. She explained: [O]nce you start trying to do things and don't follow through on our promise...[D]on't break that promise or don't promise at all. So, some don't trust the police." Debbie's account is supported by research that found that marginalized people tend to distrust the police (Greer et al., 2021; Card et al., 2021; David & Mitchell, 2021; Alberton et al., 2019; Brink et al., 2019; Craig & Richeson, 2016, Lamb, 2014; Owusu-Bempah, 2014, Bradford & Jackson, 2010; Brunson & Miller, 2006). Lack of trust does not bode well for interactions and breaches, which arouse invidious responses from those who feel deceived. Education and training is crucial to building and maintaining trust (Iacobucci, 2014; Tulloch, 2017; Cotton & Coleman, 2010, 2014; Brink et al., 2011; Reuland & Schwarzfield, 2008) and Debbie calls for introspection from each of her colleagues, especially in an area that is still under assessment, to see what strategies works best. She further emphasized that it is important to have soft skills. Her suggestions for police officers were:

> Understand [their] own triggers, how you interact with your colleagues. All of these things go into effective policing. The folks with the old mindset are slowly retiring. New recruits are getting community and mental health training. I believe officers who want to be in MCIT should have the interest in mental health. It should not be just for anyone.

I support the view that only officers who have a genuine in interest in mental health should join the MCIT. Based on my field observation during the ride-along, where I witnessed interactions with persons in crisis, I identified four elements of CIT in Debbie's responses which are mission critical to effective crisis intervention: role confidence, de-escalation, empathy, and trust. For example, upon arrival at a scene there was a distraught woman who thought that someone had poured acid on her skin. There were no obvious signs of burns and the nurse had to reassure her that her skin was normal. The woman was noticeably more comfortable when the nurse stepped forward to speak with her while the officer stayed a few metres back. Although not verbalized, the officer presenting himself first then stepping back, was to ensure that she was unarmed, and that the scene was safe. He accomplished his task in a non-threating fashion. The individual roles in the MCIT were well understood and demarcated. The woman turned her attention toward me on a few occasions as though looking for reassurance that the nurse was telling her the truth. I nodded and she smiled at me. The nurse went through the triaging process and discovered that the woman had a history of schizophrenia and had previous interactions with the police. She was asked about her medication, at which point she disclosed that she had stopped taking it because she wanted to see her doctor first. She shared that she had a medical appointment coming up in the week. After the MCIT ascertained that she was not a present danger to herself or anyone else, the nurse advised her to ensure a follow-up with her physician and to take her medication. Here, I witnessed empathy in action and the possibility that the officer's own behaviour could be a trigger. It suggested that self-awareness is important, and that officers need to be conscious of how their own actions could be construed by a person in distress.

Shortly after this observation, the most jarring and unexpected experience was being first responders at a suicide scene. For privacy reasons, I will not elaborate. I was offered counselling support by the TPS but declined it. Having witnessed a suicide at an early age, when a neighbour hanged himself from another neighbour's farm shed, and having examined graphic photographs of murder victims and autopsies while practising Criminal Law, I could mentally handle this occurrence. However, I did not anticipate this type of extreme experience early in the fieldwork. Although I was capable of dealing with the situation, in the moment, it was as jarring for me as it was for the team. I observed the facial expressions and body language of the team and took descriptive notes of each event, all of which formed a part of the data. The team was in a sombre mood for the rest of the afternoon. There was not much dialogue between us. The law enforcement *verstehen* in which I chose to engage provided deeper understanding of the unpredictability of the job and the emotional side of policing. Within three hours of the ride-along, I gathered data that would probably have taken a number of weeks to generate in other jurisdictions that do not typically handle the volume of interactions with persons in crisis. The richness of the data generated in such a short time was unanticipated. It confirmed to me that police work is neither easy nor glamorous. It refined my perspective in some areas as I saw the real, human connection displayed by MCIT members.

7.4   Unpredictability

Unpredictability about persons in crisis was a theme that emerged from the questions about challenges faced in responding to crisis calls. The main challenge cited was the lack of certainty and not knowing what to expect when called to a scene. I experienced

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this first-hand at the suicide scene. Unpredictability in crisis calls can be attributed mainly to a lack of information or inaccurate information from dispatchers. Daniel explained that there are times when the information received on the radio did not correspond with what was occurring upon arrival at the scene. The nurse, Betty, confirmed this statement by what she called a case of a "broken telephone". She continued, "there is always more information once you get there". One of the main challenges, as related by all the officers, is not knowing about the psychosis of the persons in crisis. Peter explained that, for example, it could be schizophrenia or substance abuse. No diagnosis is typically formed, but an assessment is made on the spot based on presented behaviours. Officers all shared the same concern that they had to respond and adapt to situations that could change quickly. This had implications for training. Chris concurred that calls are unpredictable and require quick thinking and action. He related:

> Calls are unpredictable, and situations can change in seconds. There is a lot of pressure on us to be perfect…to be like a robot. If things are getting out of hand, we have to do our best to de-escalate the situation.

Chris explained that radio dispatchers can only communicate to the officers the information that is provided by the person who called 911. The information received on the scene is critical to decision-making (Godfredson et al., 2011). All participants in the study related that sometimes, when they arrive at a scene, the scenario is different from the information received through dispatch. Debbie related:

> [We] arrive on scene and dispatcher giving info on the call that came in. Sometime there is not enough info or sometimes the info is totally different from what you see on arrival. The issue is not that the dispatcher relayed incorrect information. Rather, sometimes the person who calls 911 does not provide complete or accurate information.

In 2018, the TPS received 29,076 calls regarding persons in crisis (TPS, 2019), and the number of mental health calls has been growing steadily over the past decade, meaning that soon, resources will quite likely be stretched. The lack of information and the obvious anxiety associated with the uncertainty are factors over which officers have no control. Information from family members and friends of persons in crisis can close the information gaps (Reuland & Schwarzfield, 2008). At the same time interference from the same people who are in the best position to give the information, can be counter productive (Iseselo et al., 2016). These challenges can make some officers uncomfortable with the idea of performing non-traditional police work. For instance, although Matthew praises the CIT, he is not receptive to the idea of police officers assuming the responsibilities of mental health practitioners. His opposition to CIT was the lack of clarity in the division of responsibility between police officers and nurses and criticizes the joint effort for putting an unreasonable demand on police officers. He protests: "[We] are not Doctors or psychiatrists or nurses. We are police officers." His issue with crisis intervention was the lack of role clarity or role confusion, which will be discussed in the next section.

7.5   Role confusion

Kirst et al., (2016) identify role confusion as one of the challenges to mental health assignments. Daniel shared the same view as Matthew, and does not support the concept of cross-functional training. A 22-year veteran who served several years in various other units within the TPS, he is not receptive to the co-response model of the MCIT. He argued that: "[Police] are not doctors or health care workers. The problems [of persons in crisis] should not be passed on to us. We are police officers, not

psychiatrists." This "grey zone" of service in which he finds himself (Wood et al., 2017:1) could be as a result of inadequate training or role uncertainty (Kirst et al., 2016), but this is debatable. A cogent argument against the assertion that police officers have no reason to be confused is advanced by Ellis (2011). He contends that police officers and nurses alike rely on the same level of basic communication skills and techniques taught in CIT which should facilitate a seamless integration of disciplines. Skills acquired through CIT are not specific to mental health. They are transferable across vocations and tasks. Case in point, during the ride-along segment of this study, Peter was undeterred from carrying out the function of a regular officer, then switching modes to his MCIT function 30 minutes later. In my notes I documented an incident as we patrolled the streets. A woman was texting while driving and Peter pulled her over. He let her go with a written warning. Throughout the hours I was in police spaces, Peter remained flexible, unconstrained by his role or designation of MCIT officer. I deduced at the end of the study that MCIT officers are less linear in their approach to law enforcement. Their specialized training suggests that it is easier for them to switch back and forth between duties. The flexibility in transitioning from one type of task to another reinforces the argument for CIT across the board. The officers' responses in this study corroborate findings in earlier studies (Richmond & Gibbs, 2021; Bonfine et al., 2014). Inadequate training likely skews the perspectives of some officers making the role seem hazy. More training could alleviate the concerns of officers who do not fully support MCIT operations. Increased training, however, depends on the number of resources available. This and other challenges will be discussed in the next section.

7.6   Lack of resources

Inadequate knowledge and skills, (Koziarski et al., 2020; Compton et al., 2015) and inexperience dealing with persons in crisis (Borum, 2000) are parts of the systemic challenges in policing that MCIT officers witnesses daily. These factors signal an immediate need to address the lack of human resources in mobile teams. Jon pointed to the disproportionality between the number of PRUs and MCITs – the latter being far fewer. He explained:

> There are more PRU officers than MCIT and we have to triage calls because it is a very busy division…We just don't have enough manpower to handle all the crisis calls. We need to train more PRU in CIT because we can't handle all the calls.

Debbie concurred that human resource shortage is a major issue. She commented: "Manpower is scarce to deal with crisis calls…15 other calls on the screen and there is only so much manpower and so little time." I digress here to point out the gendered language by the use of the word "manpower". Even the female police officer used it repeatedly, demonstrating that there are still remnants of a culture of male domination and revering masculinity in police organizations. There is a clear imbalance of allocating too many officers to Primary Response units to interface with the public, and not enough to handle mental health. This denotes an organization that still places too much emphasis on dominant methods of training at the expense of burdening other areas where specialists are needed to handle mental health crises. As it stands there are approximately 17 MCITs across the greater Toronto area and each police division has coverage. Teams sometimes, however, have to cover multiple divisions.

Jon gave detailed insight into other problem spots of crisis intervention. His challenge was not with regard to interacting with persons in crisis; he is trained in CIT and loves what he is doing to help vulnerable people. He is dedicated to the specialized unit and passionate about mental health. His challenge was the lack of adequate support systems in place to make the mission of the MCIT more effective. Infrastructurally, he related there are inadequate facilities to which people need to be transported when necessary. This causes emergency room wait times to be lengthy due to over-burden. Compounding the issue, he added, is the resulting disruption to other patients. Other factors, such as increasing calls for service and lack of funding (TPS, 2018), are challenges the cross-sectoral partnership faces. Inadequate information systems, lack of on-the-scene consultation, and lack of support from the acute care mental health system hinders the ability to assist persons in crisis (Adelman, 2003).

7.7   Family interference

Rick cited family interference as a challenge. This is a variable over which officers have no control. He related that it is usually a family member who calls 911, but when officers arrive at a scene, family members of the person in crisis want to dictate to officers how to handle the situation. He pointed out that the interference inhibits them from making a proper assessment of the situation because family members at times make requests that are not in the best interests of anyone's safety. He explained:

> A lot of the times [persons in crisis] are a threat to themselves or others, yet [family members] don't want us to do our job. They say, 'Do not handcuff him', 'Don't arrest him'. [They are] telling you what they think you should do.

Family members have a natural inclination to become involved in police interactions due to fear for the most part that the person in crisis will self-harm (Iseselo et al., 2016). Some may know the law and the legal parameters within which police officers carry out their duties under the Mental Health Act. They believe the state should intervene and engage an automatic detention of the individual (duPlessis et at., 2021). Matthew likewise pinpointed uncertainty as a challenge. He remarked:

> [We] go there and if somebody is acting violently, we do as much as we can to de-escalate the situation and get them the help that they need without causing harm to the person. Now, when we walk into a situation dealing with a mentally ill individual, there is always the potential for escalation. Not everybody likes police. Some people, especially some people experiencing episodes, we're not their knight in shining armour. [People believe that] we're a part of the problem.

Family members can be a useful resource in assisting police officers with information (Reuland & Schwarzfield, 2008). They can also cause matters to escalate although they are more familiar with the situation than the police. This conundrum has implications for training that enables better communication strategies with families and communities as stakeholders (McKenzie et al., 2016). Being trained in dealing with all stakeholders' preparedness in navigating unexpected conflict is paramount. Community-level factors, subject characteristics, officer characteristics, and dynamics on the scene can all impact how a situation is resolved (Bittner, 1967). Failure to effectively navigate these complexities can produce negative outcomes.

7.8   Strategies for effective response to persons in crisis

When asked what strategies or training could better prepare police responding to mental health calls for service, Peter responded: "More education on stigma." This

segued into the issue of stigma from which I seized the moment to revisit its role in how police officers do their job. He admitted there is definitely a "heightened alert". He explained:

> Not knowing the psychosis or kind of substance abuse can be a challenge. That is why it's helpful to the have a nurse on the team as they are better trained to figure out on the spot, what the psychosis might be.

Chris responded: "I believe we all have our own strategies to respond to these calls. Communication is always the key because that is how we de-escalate situations." De-escalation was the most common, recurring theme throughout the study. Daniel was skeptical about the police's role in crisis intervention. While not directly addressing the question asked, his answer nonetheless generated data which related back to the stigma that he initially denied having toward persons in crisis:

> Unfortunately, I believe until science has decided a course for all professions, people in crisis are almost too difficult to assess on the street. It is not possible to accept the threat to other citizens when attempting to decide if a person in crisis 'might' harm an innocent… themselves, or an officer.

Daniel's dismissive stance on mental health training rang of the old, traditional mode of policing that is steeped in a culture where use of force is the default solution. His view that persons in crisis are "almost too difficult to assess" is a manifestation of a preconditioning to prioritize the safety of others, and automatic stigmatization. This infers a preference for use of force instead of engaging soft skills to communicate in crisis situations (Inzunza, 2015; Perez, 2010) which is a direct result of police cultural conditioning (Koch, 2010) deriving from an archaic (Birzer, 2003; Freire, 1972) mode of training. It was anticipated prior to this study that there would be officers such as Daniel who are more comfortable with traditional methods of policing. Unlike traditional police

training, CIT as a social justice-oriented intervention (Felix-Ortiz et al., 2021; Carr et al., 2014). Therefore, knowing where officers stand on social justice initiatives should make it easier for the administration to determine what areas of training should be addressed and which officers are best assigned to specialized units. All opinions are valued and the forthright views of each officer on the issue of mental health can be instructive. Clearly, Daniel would not be best suited for CIT though he might be an excellent officer in other areas.

As police training continues to evolve, society will likely see a change in police attitudes toward mental health crises. Matthew gave an overview of changes in policing he had witnessed over his long tenure. He explained that, when he joined the TPS, the emphasis was more on tactical communications. Back then, he recalled, there were even fewer officers trained to handle mental health crisis calls. He related that the role of police officers upon encountering an incident was to de-escalate a potentially volatile situation as best as possible simply by the way they communicated with the individual. He shared that they were not dismissive, nor did they take the crisis episodes lightly. Rather, they would engage using words, body language, and all communication methods at their disposal in order to achieve a positive outcome. He provided an example: "If somebody is about to jump off a ledge, you get them off the ledge and you get them the help they need. Our ability to communicate is something that even though they teach us, or they emphasize it, we all don't communicate the same way." Matthew's response supported using culturally nuanced communications as a part of CIT to better serve diverse communities.

Debbie viewed the challenges through an administrative lens. She highlighted the challenges and weaknesses in service delivery and offered suggestions for improvement. She believes that new recruits lack the requisite skill and experience, but appreciates that these are elements that will take time to build. In the meantime, she would like to see better coordination and organization at the administrative level to support officers. She is concerned that sometimes officers "think they are doing the right thing and the organization does not back them". Lack of support seems to be major deterrent to effectively being of service. In a call to action from the upper echelons of the police organization, Debbie spoke in favour of better support for officers from the lower ranks who interface with the public on a daily basis. In responding to this question, her seniority and propensity for organizational efficiency and pragmatism came through in her list of recommendations. She suggested:

> Come up with a finer checklist when you are going to calls. There's are things to do. Do a debriefing session after the call. Maybe with the Sergeant or Staff Sergeant. Ask [officers] do you like what you did? Would you have done something differently? Being mindful of what calls are going to monthly and who is doing what. Do some check-ins. Communication is always lacking. Support each other. It's a stressful job.

Debbie's response was prescriptive, and emphasized the need for all police officers to undergo CIT. She proffered CIT as a mandatory part of training, beginning at the training academy. Debbie was the only participant who mentioned the notion of soft skills as an essential part of policing. Her outlook on training was that it should be more frequent and inclusive of the perspectives of persons in crisis. She explained further that they used to be involved in policing training in the past but, for unknown reasons, it was discontinued. She elaborated: "Once there were actual survivors to tell their stories. That was in training one year. Still bring at least one in." Her choice of language in

advancing the input of persons in crisis in the training programs was peculiar; she referred to them as "survivors". This appeared to be an inadvertent acknowledgement that persons in crisis tend not to survive police interactions. It could also mean that persons in crisis have weathered the storm of mental illness and have returned to a state of wellness and stability. I did not ask for an explanation but made a note of the terminology. Other approaches to training she offered included identifying officers who have an interest in MHA. She elaborated:

> It would be nice if officers took turns working with the nurse. Or even If the nurse comes in and speak to the platoon…to all officers. We want to be able to identify folks on the platoon who might have a better propensity for specialized units. I like the idea of actors, but it would be nice for actors to come in for all training…not just MCIT.

Rick, the least senior of the participants, is in favour of CIT from the early stages of recruitment. He recommended: "Start at the bottom. I think when you get new recruits into the system. When they graduate from the college, I think it's important for them to have a lecture… get them prepared for what is out there. Have some officers come in and talk to them?" Rick's views echo Debbie's on training officers at the recruitment stage. As Ness (1991) argued, the curriculum in basic law enforcement has the greatest lasting impact on career performance. Rick's view is that basic training at the Ontario Police College where all new recruits have to attend, is too broad. He explained that it has a province-wide view which might not be best suited to urban, municipal policing. He believes that the training should be more "Toronto-focused". Rick's views mirror Tulloch's (2017) recommendations that have a community emphasis. He gave an example that:

> "EDP (which stands for Emotionally Disturbed Persons) in the [police]
> division is different from the highway [for example]. We get a lot of calls
> from Community Housing too. It would be useful to watch some videos of
> how police handle EDP, watch some scenarios, things like that."

Previously, police services used the terminology EDP. At this point, I noted that Rick received his cadet training after the terminology had changed. The change was intended to erase the stigma associated with the word 'disturbed'. I first learned about the new language when the police research department asked me to change references from 'Emotionally disturbed person(s)' to 'Person(s) in crisis' in my research application. This was a sign of progress even before I embarked upon the research.

Summary

The participants agreed that the collaborative MCIT strategy was helpful in improving key areas such as communication skill, exercising empathy and utilizing de-escalation techniques. Although some officers were opposed to the practice of police officers engaging in work that traditionally was left up to the health professions, tactical communications and using soft skills were essential for keeping situations under control. Their discontent was with grey areas of the job where roles were unclear. However, the advantage of having a nurse conducting symptom recognition and officers learning how to do so in the process, was a positive aspect. It made officers' jobs easier. Other challenges for MCIT were the inadequacy of back-end resources that affected deployment, including: lack of trained and experienced officers, long emergency room wait times, and the inadequacy of information systems to provide officers relevant information. The information deficit or 'broken telephone' caused unpredictability on the job as officers often do not know what to expect on arrival at a scene. Reliance on

information from family members helps to fill the gap, but this can be problematic when they get in the way of officers doing their job. Some suggestions for better service delivery included suggested better training from as early as the recruitment stage, taking a more locally-nuanced approach to service delivery, and more training on stigma. All of these have implications for resource allocation. In the next chapter, I explore the implementation of critical pedagogies to complement the ongoing stigma training as a means to facilitate a more comprehensive approach to service delivery.

Chapter 8:   How is mental health stigma complicated by race, ethnicity, and minority status?

8.1:   Introduction

This chapter addresses the intersectionality between stigma and race which compounds the dilemma faced by persons in crisis. This study was predicated upon demonstrated evidence of discriminatory policing of persons in crisis of colour. One of the aims of this thesis was to seek explanations for the racial disparity in negative outcomes from police interactions with the public, although all officers receive CIT as a mandatory part of their in-service training. It is well settled by mental health research that stigma is central to the discourse about discrimination against persons affected by mental health challenges. This chapter engages the issues of intersectionality of discrimination on different bases.

8.2   Stigma

None of the officers admitted to personally stigmatizing persons in crisis though they all admitted that such practices exist. Debbie revealed: "[Stigma] is the culture of the organization. We [the police] still stigmatize. There is a negative stigma that comes around persons in crisis. We're all human." All officers reported having a heightened sense of alertness when dealing with persons in crisis due to the uncertainty and potential volatility in some situations. This of itself, is a manifestation of stigma. All officers believe that mental health calls are volatile and may even pose a higher-than-average risk. Police officers tend to perceive that the mentally ill are dangerous (Soares & Pinto da Costa, 2019). Policing is a dangerous profession (Crank, 2004; Shearing &

Ericson, 1991). There is an inherent risk that is associated with the job that officers must accept, and mental health crises should be seen as no more dangerous than other activities involved in law enforcement. Although Debbie gives credit to the police organization for its stigma-reduction efforts over the long course of her tenure, she concedes: "[t]here is so much longer way to go to help [persons in crisis]. We [police] treat people differently even maybe because of what they look like. Money talks and people with money get treated differently. The neighbourhood [they live in], what they have, what you see". Debbie's views invoked the issue of classism which reflects social realities inside and outside of the police organization. Probing deeper into the notion of "what they have, what you see" she provided an example of the difference in police treatment of the 'haves and the have nots':

> You see things for yourself if you are called to a rich neighbourhood. You see the way people dress…rich versus poor… you see the types of cars they drive. If someone looks like they are rich even though they are having a mental health crisis, the police treat them with more dignity and respect.

There is a double-standard when meting out force, and the poor and marginalized, (including mentally unwell and racialised persons) are the usual recipients (Bonner, 2009). Racial bias is a persistent problem that she spoke passionately about. It is at the core of the phenomenon of Black people being killed during police encounters. Interestingly, Debbie confirmed that non-lethal means are available to police. She explained:

> We have tasers. We have guns with a plastic projectiles thing that can knock someone down. These days there is no need for lethal force anymore with all the things that you have if you keep a safe distance. But things can happen within a minute. But there is less and less justification for using lethal force with all the tools available to us.

It became more apparent that lethal force is discretionary and contingent upon how an officer feels about the individual being apprehended. It has less to do with an imminent threat to safety. This supports the view that using lethal force is indefensible in apprehending persons in crisis – especially if the subject is unarmed. I make no claims to be an expert on weapons and tactical maneuvers. Debbie's revelation about choice of weaponry is supported by the literature (MacDonald et al., 2009). I trust her to be the expert. For example, rubber bullets are a form of non-lethal projectile that can cause significant harm but does not necessarily cause death if used carefully (Haar et al., 2017, Dhar et al., 2016). To hear this revelation firsthand from a police officer was reassuring, yet troubling. It was reassuring that it was not a myth that police officers have options other than lethal force, but it was troubling to know that some of the deaths of persons in crisis that occurred were avoidable. I recall an instance about 20 years ago when a person in crisis was shot and killed by a police officer in another jurisdiction. I asked a classmate who was a police officer then if they have to shoot to kill. His chilling answer was: "Yes. That's how we are trained. Officer safety comes first." A reasonable person would think that, if there are options which are powerful but not necessarily deadly, the persons in crisis's life should be preserved, giving them the chance to seek psychiatric help. Officer safety should never be used to valorize excessive or deadly force where other options of restraint are available.

In addressing the intersectionality of race and mental health stigma, Debbie's response placed police culture at the center of the discourse. Beginning with her opinion on racism at the TPS, she declared:

> The more barriers, the more challenges in the mental health system. Anti-Black racism is a big problem. Let no one fool you. You see, they ask,

what is the definition of a Black male? Someone violent. But now people [police officers] are more aware of their circumstances if they do something.

Debbie's perspective as a Black police officer is aligned with Owusu-Bempah's (2014) findings that Black male police officers in Toronto feel that the police are against Black men and Black communities. She commented on the plight of the Black male and the perceptions of him that are deeply rooted within police culture. She recognizes and has witnessed the racial bias in how the Black male is treated on sight, and the police's propensity to use force against him. It can be inferred from her statement that the choice to use deadly force tends to be against Black men. She explained: "I'm not going to say that if the person was Black, he's going to get hurt however, if of another skin colour it would not happen. Unfortunately, this culture is going to take a long time [to change]". This phenomenon is what Gilmore (2007: 18) called "the exploitation of group-differentiated vulnerability to premature death". It was particularly interesting to hear her point of view as the lone female police officer who participated in the study. Her response indicated that she was attuned to other social factors that impact the way people are treated, such as age and gender. She asserted:

When I attended to some of these calls some of them are really young people. Some of them were young women. The sadness that I personally feel… mental health makes me sad. It breaks my heart.

Stereotypes about certain neighbourhoods or groups of people can influence an officer's behaviour and decisions (Schulenberg, 2014). As a woman and a visible minority, Debbie seemed to be more personally affected. She was not afraid to speak her mind, which indicated that she was confident in her position within an organization

that is usually guarded in the way it presents information to outsiders. She was clearly not concerned about reprisal and exhibited confidence in me as a researcher.

8.3 Labelling all officers as 'racists'

With the exception of Peter, a White male, all participants reported that they have been called racist several times during their police careers – even the Black police officers. Chris, a Black police officer related: "Funny enough, [I was called a racist] by a Black suspect. It really hurt. The problem is that some Black people feel that once you become a police officer, you're a 'sell-out'." Matthew, who is also Black, shared similar experiences. He commented:

> The funny thing is, I have only been accused by Black people too…especially in traffic stops. I remember one time I was accused by a Black teenager who I had to chase down on foot. Another time I was accused by a White woman because I refused to arrest a Black guy at her request because she said he looks like a rapist. It's bizarre at times.

Warren similarly commented: "Yes; I've been accused of racial profiling, but it does not bother me. I tell them I treat everyone the same. I know I am not a racist, so I just keep doing my job." Accusations of being racist or engaging in racial profiling, though hurtful, were not a deterrent to carrying on with the task at hand. Overall, officers gave the impression that developing a 'thick skin' is a part of the job. Jon's response to the question of accusations of racial profiling echoed Warren's. Although he has been accused, he is not bothered or affected because he treats everyone with dignity regardless of race. He concluded: "You are not going to be able to please everybody. You just have to carry on with your duties." This could signify a lack of introspection or denial. Jon did not provide an example of an incident or occasion that may have

triggered the label of being racist. Rather, he seemed to have accepted the label as being a part of the job.

Debbie was introspective. Although she is Black, she too has been accused of being a racist. Like Matthew and Chris, the accusers were also Black. She took responsibility for her own role in how she was perceived by the accusers, especially early in her career. She responded:

> Oh yes. I've been accused of racism. I've been called a 'sell-out'. Truth be told though; I was all caught up into the stereotypes too about Black people. I was judging people based on their history. Where they lived. That was my own lack of emotional intelligence. I got caught up too. At a certain point in time, I was overworked and stressed out. Crime is poverty. I was also arresting a lot of White people on drugs…prostituting…stealing. I know that Black males in particular get a bad rap. When I got called to a scene, I used to pray that it was not a Black male. I understand the issues more. The pushback I get from White people is that why don't Black people do better for themselves. They just don't understand our histories. I, myself, had to learn about other Black people, mind you. My mindset had to change.

Betty, the mental health nurse, confirmed the issue of racial accusation from her experience working closely with police officers. As someone from a separate profession, I saw her as a somewhat neutral observer of the interactions between the persons in crisis and police officers. Her neutrality is to the extent that she is not mandated to carry weapons or to apply force in apprehending persons in crisis. Her interaction is limited to triaging and making mental health assessments on the spot. She has a wealth of experience working alongside police officers. Betty has worked with various crisis teams and partnered with officers of different races and ethnic backgrounds. A White woman, she candidly related that she observed that Black officers were accused of being racists even more frequently than their White counterparts. She commented: "The public is

mean to Black officers. A homeless person even called [one of the Black officers] a sell-out." The accusation of Black police officers being called sell-outs intensified after the George Floyd incident (Quan, 2020). The social reality that Black people are discriminated against by the police gives stigmatized persons a sense of solidarity with other marginalized groups (Craig & Richeson, 2016). They believe that Black people should not be a part of an institution that is viewed as oppressors who hurt their own people. This attitude towards Black officers reflects a general distrust of policing as an institution based on the historical treatment of Black people by the police (Trinkner, 2019; Ezeonu, 2008). Their labelling of Black police officers as racists is really a denunciation of hegemony overall.

8.3.1 But are we really racist?

Not surprisingly, all the officers denied being racist. With the exception Warren, the lone of the officer of Asian descent, they all admitted to being aware that racism exists within the police service. With the exception of one (White) officer, all participants in the study have been called a racist at some point during carrying out their police duties. I suggest that people generally associate the police with racism. Even if the participants in this study are indeed racists, I would not expect anyone to self-incriminate and admit to this label. The admission from officers that racism exists among their peers is sufficient evidence that there is a systemic problem to be addressed. The admission is a fundamental step toward reform efforts. Warren denied that there was racism in the TPS and appeared to be speaking on the behalf of the entire police organization. His perspective raised two issues that have been hindrances to anti-oppression pedagogy: colour-blind ideology and race-neutrality. These factors have been counter-productive to

efforts at reform (DeCuir & Dixson, 1999), and arguments that seek to deny or downplay undisputable truths about race and inequality have only served to maintain the hegemonic legacy upon which the policing as a profession was built. Colour-blind ideology only further perpetuates racism (Richeson & Nussbaum, 2004) and social inequity (DeCuir & Dixson, 1999).

Some officers agreed that the issues can become more complex as they admit to being aware of racism among their peers. This is not unusual. It has been found that police officers will readily deny that they engage in racial profiling (Giwa, 2020). Warren's espousal of colour-blind ideology denotes implicit racial bias (Appfelbaum et al., 2014; Richeson & Nussbaum, 2004; Son & Shelton, 2012), notwithstanding that he is a racialized person. Warren suggested that because most calls handled by police officers are related to mental health crises, officers are accustomed to handling persons in crisis. He asserts therefore, that stigma is not an issue for police officers. He relates: "A good number of radio calls are for mental health and as a service. We do a great job and do not stigmatize. We treat everyone the same." His response equates frequency of dealing with persons in crisis with fairness. He was clearly the outlier among the participants and his response was contrary to studies which found that race and stigma influenced how police officers treated persons in crisis (Skeem et al., 2011; Markowitz, 2006; Cotton, 2004; Teplin, 2000; Lamb & Weinberger, 1998). Probing further, I asked: "So, you don't have any hang-ups about a persons in crisis when you attend to each call?" His response was: "All calls can be dangerous."

But assuming that "all" calls are dangerous suggested a predisposition to judging and believing that his safety is always at risk. Such assumptions can result in injury and fatalities, which is a problem in policing generally (Jilani & Smith, 2020). I deduced from Warren's perfunctory remarks and body language, including shoulder shrugging, that he was apprehensive about answering questions that related to discrimination of any kind. Before the interview began, he questioned whether the research would be published, and I responded: "Maybe". His question was an indication that he may not have been entirely forthright, choosing instead to be apolitical. This might have to do with his own minority status and associated fear of reprisal, despite the fact that I assured him of anonymity.

Daniel, who I would classify as the 'typical' police officer, being White male and espousing conservative views, was more candid and forthright in his response. He admitted that racism does exist in the police service. He declared that he personally does not discriminate. He commented:

> Some officers do discriminate. I don't. In [some parts of Ontario], I know it is more prevalent in some places. Me personally, I don't discriminate against anyone. I have been working with partners from all walks of life. From day to day, you don't know who might end up working with and I get along with everyone.

This suggested that he was comfortable in his position as a White male, without fear of reprisal from calling out the fact that racial discrimination exists in policing. His answer indicated that the opportunity to work alongside racialized officers enlightened his views and may have even dispelled certain stereotypical views of others. Recruiting officers from visible minority communities does not have positive effects only on the

communities they serve. Diversity can benefit peers within the police organizations as they become familiar with other cultures through professional interactions and can learn from each other. On the issue of mental health stigma, he commented:

> It's not so much that we as officers wish to stigmatize but we have to look for signs of violence for our safety. If we see a guy bleeding with a knife in his hand because he just cut off [a part of his own body] then we have to be on the alert.

Although there are situations that can escalate due to stigma, there are certain realities associated with mental disorders than can create genuine cause for fear. Persons with serious mental illness can be violent and dangerous (Soares & Pinto da Costa, 2019; Lamb, 2014; Torrey, 1994). Although studies have shown that police officers generally stigmatize (Skeem et al., 2011; Markowitz, 2006; Cotton, 2004; Teplin, 2000; Lamb & Weinberger, 1998), it is reasonable to conclude that someone whose psychosis causes them to sever their own body part would heighten an officer's fear in that particular moment. Responding appropriately in unique situations requires certain judgment calls that some police officers are prepared for if they have inadequate stigma-informed training.

Chris's answer from the point of view of a visible minority demonstrated he believes that exercising empathy is vital when communicating with persons in crisis. This was evidenced by his equating stigmatization with discrimination, and considering the question in the same light. He explained: "I don't personally discriminate. As a Black man who has seen racism in action, not discriminating against others is just a part of who I am. But I can't speak for my other colleagues". His response is an example of

ethnocultural empathy which can influence how other police officers behave. By identifying with certain realities, they develop a stronger connection and perspective and are more likely to empathize with persons with whom they share similar characteristics (Rasoal, 2009; Wang et al., 2003).

Jon likewise denied that he stigmatized. He explained that most officers keep stigma in mind and consider not just words uttered by persons in crisis but body language too, as it can be "a good indicator of symptoms". He was candid in his response that police officers do in fact stigmatize, and that is a natural part of how they react in situations of uncertainty. Peter 's response corroborated Jon's explanation of stigma in relation to their work as MCIT members. He commented:

> I don't stigmatize people. My first instinct is to see how I can help someone get the necessary help they need. However, when you arrive on a scene and someone is displaying certain behaviours, I definitely have a heightened sense of alertness.

Matthew unwittingly offered a similar view on stigmatization which was indicative of stigma itself. He commented:

> Officers know the volatility of dealing with unwell persons. There are preconceived ideas of what to expect and when we arrive at a scene, things can go from calm to flat out chaotic. There is also perception from the other side as [persons in crisis] think police don't care. People are ignorant of the fact that police sometimes have no idea what they have encountered. We have no access to data about criminal history or propensity for violence because we don't know the names of a suspect or [persons in crisis] beforehand, so we don't know who they are or what to expect.

The common theme was that each participant denied stigmatizing but claimed that others do. Regardless of the denials, the narratives were confirmation that stigma is a

persistent problem within the police organization, and officers may not be aware of their own biases. Unconscious biases underscore stigma (Knaak et. al., 2017). On the issue of race, Matthew was more direct. He bluntly pointed to the "blue wall of silence" that keeps the "sad realities" suppressed. In the confines of the police department, he has heard racist comments. He shared:

> [I] have heard comments made about minorities; we all have personal biases and I personally deal with Whites and blacks differently and take a nuanced approach, not because I am racist, but experience teaches me to approach people in ways that you can connect with them best.

This revelation goes to the heart of police culture, which stigmatizes minorities and persons in crisis based on stereotypes and ignorance. Prejudices are hidden from the public behind a wall of silence. These prejudices can translate into lethal outcomes during public interactions. Black officers who hear and witness racist manifestations first hand, have the added burden of maintain the professional solidarity when they know that members of own race are at high risk, which includes family members. This highlights the tension between occupational culture and organizational culture (Paoline, 2004). Occupationally, police interface with the communities they serve, while organizationally, the ugly truth of the behind-the-scenes interactions between peers is a realty that Black officers have to navigate daily. Like Matthew, being able to adjust one's approach occupationally in dealing with persons in crisis regardless of race is a part of effective community policing. But first, police officers need to be aware of their own biases and become culturally aware of diverse communities in order to effectively 'connect' with the people they serve. Effective crisis resolution requires cultural sensitivity training, which was proffered in the Tulloch (2017) recommendations.

Chris, as a Black police officer, situated his own experience in the centre of the discourse thus demonstrating empathy for the people he polices. From his perspective:

> Races and cultures may differ and so you're completely isolated when you don't feel a connection with anyone around you or who understands you or see things your way. So that can put stereotype on top of stereotype.

Such is the dilemma of being a Black police officer. Disability and race are personal characteristics that have "operated to define, segregate, and oppress" (Gilborn, 2015: 280) especially when "stereotype is placed on top of stereotype", and Chris's account is demonstrative of this fact. Black male police officers in Toronto already feel that the police are against Black men and Black communities (Owusu-Bempah, 2014). Within the police profession, the feeling of being stigmatized by one's own peers can cause a Black officer to demonstrate ethnocultural empathy (Rasoal, 2009; Wang et al., 2003) toward the marginalized. Debbie pointed to other intersectionalities, such as gender, age, social status, and even a person's neighbourhood that can compound discrimination. Herein lies the complexity of the intersectionality of oppressive elements that are often denied due to unconscious bias.

8.4   Media representations

Disparate media representations were a concern that all officers expressed even before they were directly asked for their opinions about the media. I focused on generating data of the officers' views on each interview question as seen from their point of view, without venturing into conversations about media interpretations. I wanted to elicit each officer's opinion about the media's portrayal of policing and find out about their awareness of the findings of public inquires. For legal and ethical reasons, I avoided

discussion about any particular incident involving a persons in crisis, even though it may have been broadcast by the mass media.

One of the most common accusations of police officers as seen usually through media outlets – especially in large urban areas – is that they engage in racial profiling. To that end, they are often labelled as racists, regardless of their race. This study deliberately elicited responses from officers from different races and ethnicities for the potential diversity of views. Seven of the eight officers were aware of the public inquiries conducted by Justices Iacobucci and Tulloch following some high-profile cases of persons of colour who were killed during police encounters while experiencing mental health crises (see Appendix A). Rick, the most inexperienced officer (with under two years of service) was not aware of the public inquiries. He too, is an immigrant who has been in Canada for less than seven years. Like all the other participants, he is aware of the accusations in the media of racial profiling on the part of police officers.

Matthew's position on the issue is that stigmatization cuts both ways because the public labels police officers as racists even those who are visible minorities, due to the conduct of other police officers. All officers get painted with the same broad brush. He commented:

> Expectations of the police is one challenge. The media portrayal of the police is another factor that comes into play. If one officer does something that is outside of police character, we all are painted with a broad brush, that we are all the same. That's one thing. The media influence is another challenge. The level of experience of each responding officer is another concern. We have some young guys who just got out of high school, college, university, some with more life experience, they are not equipped. There is a delicate balance when you're dealing with people. And some of us don't have it. They think just because they wear a uniform that people

are supposed to do what we tell them to do. That doesn't always work. The experience of officers is another factor. I don't want to say it's another challenge, it's another factor when dealing with the mentally ill.

Matthew attributed the negative views about the police to the conduct of junior police officers who lack the necessary skills to interact positively with the public. Ensuring professional maturity is one of the main reasons why MCIT members need at least three years of policing experience before they can join. If officers are assigned to MCIT after police college graduation, this could expose them to situations for which they are unprepared (Richmond & Gibbs, 2021), resulting in devastating consequences for themselves and persons in crisis alike (Herrington & Pope, 2014; Dupont et al., 2007). Younger first responders are unlikely to be sufficiently trained to handle crisis calls (Koziarski et al., 2020; Compton et al., 2015). The presumption is that basic training alone is not sufficient to contain bad behaviour. When social ineptitude is combined with egos, paramilitary training, and inexperience, it is conceivable that even benign situations can escalate to disastrous outcomes, thus attracting media attention. Negative public perception of the police delegitimizes them (Franklin et al., 2019) regardless of where within the police organization the blame lies. Although there is some suggestion that age, education (Psarra, 2008) and experience dealing with suspects (Oxburgh et al., 2016) influences officers' reactions. The evidence does not support placing the blame for bad publicity entirely on the rookie officer phenotype. Seasoned police veterans have been guilty of committing atrocities that have garnered negative media attention. For example, the officer who murdered George Floyd was a 19-year veteran of the Minneapolis police department. Similarly, the officer who murdered Lester Donaldson in Toronto was a 12-year veteran of the TPS. Negative

media representations are to be attributed to notorious incidents as a result of excessive force rooted in police culture (Birzer, 2003).

Daniel, however, believes that the media is creating a myth about policing. He expressed:

> [The media] blows things out of proportion…. [they] don't report the positive things. They should report both positive and negative stories. Neutral or fact-based reporting would be nice. The police are not a creed or a group as they make us out to be. We are all family and community members. The myths are likely too vast to address, but I think once we are seen as human, the myth disappears.

By expressing that the police are not "a creed", he is essentially denying that there is an underlying police culture that influences negative behaviours. Being asked to be seen in a positive light is a perception that has to be earned. It cannot develop in a vacuum. Negative incidents generate more publicity than positive ones. The onus is on police officers to hold themselves accountable for good or bad press. For example, unlike the other participants, Jon placed some of the blame for negative media coverage on the TPS administration. He explained:

> The TPS has not done a good job in communicating what MCIT does. The media has controlled the narrative totally and it's all political. We need to do better PR. We need to assure the public that we are not a bunch of enforcers who hurt people. We actually do care and see to it that people get the care they need. Most people don't even know about the MCIT. That is not good. The positive news needs to get out too.

The police have been criticized for using the media to influence the discourse on crime (Ezeonu, 2008; Wortley, 2002; Sacco, 1995) when it suits them. It is peculiar that the police do not use this influence to communicate positive initiatives like CIT much to Jon's frustration. Arguably, if the public becomes aware of the CIT training and the

existence of MCIT, it will hold the police to an even higher standard of accountability based on the view that if they are trained to handle mental health crises, there should be no justification for killing persons in crisis. The decision to keep this social justice initiative low-keyed seems strategic and political.

Debbie, the lone female officer, again provided a balanced view of the various issues that were probed. She responded bluntly to the question: How has the media influenced public opinion?

> [The media] report that police are killing Black people. Those are the conversations that I'm hearing. Not all true, but I am glad that it is coming to the table. I have worked with a lot of racist cops. But they [police] need the spotlight for changes to be made. And changes are not going to be made internally but externally from the community to force the culture of policing to change in some areas.

The notion of culture was raised as an underlying problem that leads to bad behaviour and subsequently, negative media coverage. The media will always report negative outcomes of police officers' interactions and questionable police conduct (Gramlich & Parker, 2017). That is a given. The more heinous the act committed, the more likely it is to attract media interest. Public exposure prompts accountability and mobilization, which will send a message that the police cannot flout their obligations to the public with impunity. What the police should be more concerned about is going back to its sub-cultural root cause leading to the sequelae of negative outcomes.

Summary

The impetus behind this this study was to explore ways in which police education can be improved to ensure better outcomes in handling mental health crises, particularly the differential treatment of the marginalized. After having discussed the contents and the

structure of CIT and the co-responsive mental health strategy between police and nurses I turned to the question of stigma and how it intersects with other bases offer oppression. I proffered a curriculum that is social justice-informed, taking into consideration oppression theories such as Stigma Theory and CRT. A stigma-informed curriculum overhaul was then discussed. It behooves decision-makers in course design to address not only the disability aspect of mental health, but to include stigma as it relates prejudice based on racial stereotypes. The reality of double jeopardy was discussed, as Black people in particular are at a higher risk of being killed due to the intersectionality of disability and race. The accusation of police officers having racist tendencies was discussed. All participants except one admitted that's racism exists within the police service. They all denied being personally racist. Within the discussion, the issue of marginalization came to fore as it impacted persons based on gender and social status. Multiple characteristics were found to trigger prejudicial treatment of the oppressed. Given the admissions and revelations generated in the data, it was clear that critical pedagogy is not just an ideal; it is a necessity.

Finally, I examined the role of the media in exposing the phenomena of discrimination against marginalized people. With the proliferation of media stories that have brought negative attention to policing, I would be remiss to not investigate the potential impact on police officers and how they handle crises. I appreciated the possibility that there are other stories that should be told but are being left out. All officers believed the media was unfair to police. They varied in their opinions of the causal factors behind negative outcomes, with some officers attributing them to prejudice and discrimination and others taking a race-neutral stance. The mixed views on critical pedagogy required an

investigation into how it could be received from a policy standpoint as an integral part of police training. I broached the topic of curriculum reform by posing the question: What are grounds or appetite for making race-based pedagogy mandatory in police training? The next section addresses this final RQ.

Chapter 9:   What are the grounds/appetite for making race-based pedagogy mandatory within police training?

The previous chapter discussed the intersection of various individual characteristics that subject them to police discrimination. CRT holds the view that racism is endemic and entrenched in society, and is normative (Solorzano, 1997). Police organizations are no different, as racism exists in the institutions and structures within our society (Neocleous, 2000). In this chapter, I explore officers' views on changing the curriculum to be more social justice-oriented and, specifically, to include race-based education to address discriminatory treatment.

9.1   Implementing critical race pedagogy

Daniel, a White male, does not support the implementation of race-based education. He acknowledges racism broadly and even its existence in policing. His perspective is that silence on the issue will eradicate racism eventually. He is skeptical about its usefulness and proposed hypothetical alternative scenarios wherein the problems in policing may not be racially motivated. He commented:

> The way I see it, the more we talk about race, the harder it is to stop discrimination and people stop listening. It seems like every time something bad happens, race is brought up as the issue. What if there are situations where it had nothing to do with race but how the person was behaving or if there was a crime in progress or of public safety was at risk? Not just public safety but officer safety? Then what? I'm not saying that racism does not exist in society but maybe if we stopped talking about race so much, then people would feel equal, and discrimination would not be an issue.

This response rang of denial and race-neutrality, which assumes that race does not matter (Annamma et al., 2017) and should be disregarded (Gotonda, 1991). His

oversimplification of racism and discrimination was evidenced by "whataboutisms" (O'Connail, 1974), although acknowledging that racism exists is a contradiction in itself.

Warren, the lone participant of Asian descent, was the only participant to suggest that there is no racism in policing and no need for raced-based pedagogy. His race-neutral view runs counter to studies that have concluded that race matters in law enforcement (McKay, 2021; Tulloch, 2017; Souhani, 2014; Gilmore, 2007) including his own organization (Owusu-Bempah, 2014). It was noted that his denial of racism was not personal. He spoke on behalf of the entire police organization, responding with "we" instead of "I". He explained:

> In policing, *we* don't allow race, ethnicity or minority status dictate any outcomes. There is only one race-human race. *We* don't see colour. *We* treat everyone the same [Emphases are mine].

Speaking on behalf on an organization which itself admits racism is a problem seemed disingenuous. Policing is not a monolith. Although there is a dominant subculture within policing, the move towards diversity within the profession is evidence in itself that there will be diversity of opinions and beliefs within the organisation.

9.2   Being Wilfully (Colour) Blind

Warren's response was demonstrative of the kind of protectionism that negates accountability and can have implications for covering up blameworthy conduct. By assuming a self-imposed ambassadorship on behalf of an entire organization and profession, however, he became the notable outlier in this study. His views clearly demonstrated colour-blind ideology which has been counter-productive in facing and

dealing with issues of racial discrimination head-on (DeCuir & Dixson, 1999). What I found peculiar was that as a racialized police officer himself, he seemed to feel comfortable to make such bold statements that had no evidentiary support. Granted, some officers might be resistant to new forms of learning that move them beyond their comfort zone, but extreme ideologies within the profession can be dangerous. I suggest that being wilfully colour-blind only serves to replicate old approaches which have led to adverse outcomes. Contrast Warren's position with Peter's, a White male who was born and raised in Toronto. Peter's view is that race-based pedagogy was useful for critical thinking and changing people's (racist) mindsets. He opined:

> It is important to look beyond skin colour and look at [MHA] symptoms instead. People should not be judged by the skin they are born in. We did not create ourselves but unfortunately, people have stereotypes about others. Race-based education can't hurt. If anything, it may enlighten about others races and cultures. To me, that can't be a bad thing.

This progressive view was shared by Debbie who supported the idea of raced-based pedagogy and CRT in police curriculum with an unequivocal, "Yes, it should be included!" Having taught anti-racism courses in-service, she embraced the idea and had been a recipient of its usefulness in interactions with other police officers and the public. She was candid in her explanation about the prevailing methods and provided an extensive explanation of why CRT is needed in police pedagogy.

> The police do not know about deeper stuff…critical thinking. Yes. It is important in order to understand what the issues are or simply to do a better job. Not just of mental health but for any unit., investigation, booking. You are interacting with your colleagues who are not from the same background as you as well, so you should be educated on what the issues are. Learning begins once you are in service, in your division, once you go to the call. Learn these different things besides Use-of-force or

filling out paperwork. It will make you a better police officer… and a better person.

The changing nature of police work will influence police education and training (Kratcoski, 2004) as time goes by. Handling mental health crises is one such area of policing that has changed to nature of the vocation over time. Debbie's narrative provided compelling reasons for the support for critical pedagogy. She approached the support from both the practical and theoretical angles, and applied the rationale to different aspects of the job. She shared a realism that old methods of policing have been outgrown by the changing demographic as we strive toward a more equal and just society in other fields. To this end, she expressed concern for the lack of life experience for rookie officers who would not likely have interacted with racialized persons, and added:

> We're not hiring by minimum standards anymore. We are not hiring the 18-year-olds anymore. We're now hiring people with experience. The minimum standards are not cutting it anymore. We want to know: what kind of person, are you? Your people skills? Passing the physical test is just a small part. Anyone can do that especially if you are younger.

Rick, the least senior police officer in the study, has a background that reflects Debbie's statement. He is Black, has work experience in other fields, and a university education. His profile exemplifies the new recruitment strategy with a view to reforming policing to a profession that emphasizes people skills, emotional intelligence, and capacity for critical thinking. This is in contrast to the traditional characteristic of a young recruit with little or no post-secondary education. Rick demonstrates a nascent interest in crisis intervention on which the police organization can capitalize given the shortage of human resources in this area.

Debbie's philosophy on policing is in direct contrast to the banking concept of education, critiqued by Freire (1970). In banking theory, the police officer is a passive recipient of the education they receive in order to meet their job requirements – unconscious as to the impact it may have when they interface with the public. The banking concept does not allow a student to be a critical thinker, and sustains biases toward certain segments of society. Effective policing requires physical, cognitive, emotional, and interpersonal skills (Blumberg et al., 2019). All elements must be engaged to achieve positive outcomes in serving the public. The life experience that Debbie argues for enables introspection and development of emotional and interpersonal skills. I probed further to find out if Debbie supported the view that police officers should have a university education. She contends that university education might place the profession out of reach of visible minorities who are from poorer economic groups and unable to afford tuition. Her concern was that we would see fewer Blacks and persons of colour entering the profession. She is in support of post-secondary education, such as vocational college. Debbie's response showed that she too was reformed as she learned more about Black communities across Toronto, which reshaped her perspective having succumbed in her early career to stereotypes that she bought into, as promulgated in policing. She reflected: "I, myself, had to learn about other Black people, mind you. My mindset had to change," demonstrating the transformation she underwent to becoming a better police officer who is attuned to the needs of the communities she served. Here, the issue of ethnocultural empathy again came to fore (Rasoal, 2009; Wang et al., 2003). As a Black woman, over time she became more aware of the diversity within Black communities and that they were not homogenous. There were multiple ethnicities

and identities within the urban Black communities with which she had to familiarize herself to become a better police officer.

Challenges create opportunities. Debbie's growth shows that immersing officers in spaces where they can connect with their assigned communities is an opportunity to be situated in the narratives of the disenfranchised persons they serve. This has the potential to offer unique perspectives as they engage in reflexive exercises while contextualizing their personal lives and roles within the broader justice system. Even during this course of this study as questions were posed, police officers, even if for a short time, paused and questioned their own positioning and narratives in the reflexive process of the semi-structured interviews.

Rick supported a similar view that policing education should include race-based pedagogy. As an officer with less than five years of service, his early training appeared to be still fresh in his mind. He, too, had ideas of how the TPS could improve the current curriculum. Like Debbie, he proposes that social justice pedagogy should be implemented form the early stage of recruitment at the Ontario Police College, which are police officers attend before moving to their respective municipal police departments within the Province of Ontario. He explained:

> Based on the trends that I see so far, based on history, and our more frequent customers being visible minorities, if implemented in the proper way, it can be good but if not, it can have a snowball effect [on racism]. You might get some bias or reprisal if you get some [racist officers].

The question about whether CRT should be included in police pedagogy was posed slightly differently to Matthew. The intent was to fit key questions that strike at the heart

of the issues into the flow of the conversation without having to break, then get back to it later. His counter-narrative was compelling, as he challenged the view that race education is unnecessary. While he was addressing the issue of racism in policing and relating the many times he faced discrimination from his peers, I posed the question: "What would you say to the view that race-based training is not a good idea for police officers?" His response was forceful and impassioned:

> And anyone who thinks race in not an issue in policing is in the wrong profession. In fact, the TPS needs to weed out troublemakers (ones who think race is not an issue). [Stop] them from putting their foot through the door in the first place. How are you going to understand people's situation if you can't even educate yourself on the life they and their families had to go through. And why would a little education hurt? It's not like the [TPS] is asking you to pay for the course. Anyone who thinks it inappropriate is probably afraid their true colours would show in a classroom.

As someone who feels marginalized even within his own professional life, this study gave him an opportunity and a voice to speak his truth (DeCuir & Dixson, 2004). With the exception of Warren and Daniel, all officers supported the idea of race-based education becoming a part of the curriculum at the TPS. The six other police participants welcomed the idea, as it would provide an opportunity to learn about other races and cultures, and the root causes of crime in certain communities.

Peter took a more nuanced position on the issues of race and stigma. He posited, "Race specifically may not be an issue, but culture and communications can be an issue. Not knowing what certain things means when the person is trying to say something can make it difficult to discern what the [persons in crisis] needs or concerns

are." This pointed to the issue of nuancing communications to fit the diverse array of communities being served.

9.3   Intercultural communications

The notions of 'communications' and 'culture' were recurring themes throughout the interviews. In 2020, the topic Intercultural Communications was added to the TPS Level 1 CIT course, presumably in consideration of the realities of policing a diverse society. I say "presumably" because the course designer did not go into detail about the contents. Again, the secrecy surrounding the curriculum demonstrated a sub-cultural propensity to be cynical (Loftus, 2010; Niederhoffer, 1967), distrusting (Balch, 1972; Niederhoffer, 1967), and evasive about internal administrative or operational matters. Based on the responses given by the participants, I probed their knowledge of the CIT curriculum as of 2021. I deviated from the set question I prepared (Appendix D) and posed the following open-ended question presuming that the participants knew about the new subject in the syllabus: "The TPS implemented a new CIT course curriculum as of 2020 called Intercultural Communications. How important is this to you?"

Peter responded:

> I haven't taken that course yet, but Toronto is a multicultural city. How we do something does not translate across the cultures. We sometimes enter a situation, and we are trampling on someone's beliefs unknowingly. That doesn't help the situation, and it can make it worse, because we have offended them, and sometimes, we just don't know. I'm guessing. It's about educating people about various cultures.

Peter's response suggested that he was guessing what the course entails based on the title, rather than having received information about this new addition. It is implied from the course title that language and vernacular have different meaning across cultures. I

was somewhat taken aback that Peter – as a member of the MCIT – did not know about this new development. He continued: "Maybe if [police] knew what certain verbal and non-verbal things meant, they would not stigmatize." The new addition of a communication course is an indication of progress and that the TPS is adapting to the realities of the diverse cultural communities it serves. Peter saw communications as means to overcome stigma. One of the main impetuses behind CIT overall is to place greater emphasis on a verbal, compassionate response to improve communications (TPS, 2019). Matthew endorsed this initiative stating:

> Intercultural communications barriers can create problems so that is important. For example, it is easier for me to talk to a youth at Jane and Finch from a certain immigrant background because I can speak the language, than it would be from my partner who was born a raised in Canada all his life.

This response spoke not only to the issue of being able to communicate in nuanced ways based on culture and familiarity with vernacular; it has implications for diversity in recruitment. Matthew is Black, and he believes his immigrant background is an asset to the TPS. Cultural competence is vital to effective community policing (Tarver et al., 2020; Serreni-Massinger & Wood, 2016). This has implications for how officers are assigned throughout the jurisdiction based on demographics.

Chris is also an immigrant of African descent who received his early education outside of Canada. He is a proponent of training in intercultural communications based on the fact that Toronto is a multicultural city. He gave examples of his own experience learning about other cultures:

> When I was growing up, I learnt about our [Black] history and culture and a bit about other cultures although it [other cultures] was European culture mostly…colonization stuff, but at least we had history classes that gave us

a bit of background about how out culture was shaped or influenced. It was not only about African culture but Europeans, Chinese, Indians etc. But I realize that in Canada we only learn about Canadian history. And it's not even about the full history. Some things are left out, but we don't learn about other people's history. It wasn't until I went to college that the professor talked a bit about the Underground Railroad and a bit about Black history. Aside from that, it just does not get treated as an important part of the curriculum…at least not while I was in high school.

All officers agreed that intercultural communications was a valuable addition to the curriculum. Debbie, the most experienced officer, was more cynical about the course title and (presumed) course content. She commented:

It would be nice if members of different communities gave their comments on the makeup of, the course. If there is something missing or inappropriate, they can address it. An outside person should look at it. The question is: what are the learning objective and outcomes? Sometimes titles are put on things and its garbage. They attach these titles to thing so that when the board reports to the community people will thinks they are doing something toward diversity. Really now.

The responses were a mixture of cynicism and optimism. The notion of better communication skills seemed to be a common theme. Rick saw the value in being able to communicate in a different language. He related: "I went to a call one day and had an Asian partner with me and [the person in crisis] was there speaking patois (a Jamaican language). He said 'It good fi si a Black offisah. Yaa yaadie?!' [Translation: It's good to see a Black police officer. Are you Jamaican?] It was a mental health call. He blocked out my partner, but he was more receptive to me." His suggestion was that the TPS should look at each division and the demographic it serves before dispatching officers. He gave an example:

[T]he cultures around 31 and 32 division are mainly Caribbean culture (See Figure 2 Map of Toronto police Service Divisions). You can't send a White Canadian there who knows nothing about the culture. It's a Black, Afro-

Caribbean community mostly. Send officers there who can relate to the people.

The fact that the TPS officers were not aware of the new addition to the CIT curriculum showed that the TPS may have fallen short on communicating developments within the organizations. A perusal of course syllabi across four police organizations revealed that none of them address the issue of race or include social justice pedagogy in their training modules. The closest the curriculum comes to incorporating social justice pedagogy is stigma education. Only Toronto and British Columbia appear to address 'culture' or 'cultural' issues (see Table 3) in its curriculum. Even so, based on Debbie's response, this could be mere window dressing.

Summary

This chapter aimed to explore the receptiveness of critical race pedagogy as an integral part of police curricula. Six police officers were receptive to the idea of including race in the curriculum. Two officers were opposed. One of the officers who admitted that racism existed in the TPS did not support the idea. His assumption is that if race is not talked about, racism will go away. He suggested that negative outcomes may have nothing to do with race at all. The other officer who did not support a race-based education did so based on his contention that there is no racism in policing. Both perspectives are symptomatic of race-neutrality and colour-blind ideology. The importance of cultural nuances was a dominant theme. The MCIT officers saw value in including race pedagogy as a way to learn about others' differences and cultures. The TPS's introduction of a course entitled Intercultural Communications was supported by all

although they have not yet had the opportunity to participate. Even the ones who were averse to a race-based curriculum supported the idea. Their support was based on the presumption that the course would entail culturally nuanced communications to serve the needs of the diverse communities in Toronto. It is peculiar that they support culturally diverse pedagogy but not that which supports race. They might be in for an awakening when they discover that in some communities race and culture, are inseverable.

Conclusion

This thesis illustrated that CIT is fundamental in reducing negative outcomes arising from interactions between police officers and people who experience mental health and addiction crises. Additionally, it has addressed a gap in the literature on CIT which was filled by exploring the perspectives of police officers who had undergone mental health CIT. The is an area in police education that is under-researched. The most in-depth study in the Canadian context was conducted by Coleman and Cotton (2010) over a decade ago. In addition to CIT being under-researched, no study has examined the issues pertaining to policing mental health in Canada thorough a Critical Race Theory lens. This approach was used to identify gaps in the established pedagogies which exclude issues of race, stigma, and other intersectionalities from the police curriculum. CIT has been approached from a normative, value-free perspective which bears a presumption that there is equal treatment of persons in crisis across all communities when in fact, persons in crisis are disadvantaged by the structurally embedded prejudices and biases inherent in policing. None of the studies cited in this thesis have

indicated whether anti-oppressive pedagogy aside from anti-stigma education, was included in the curriculum. This is a gap that needs to be addressed.

As the research questions suggest, there are systemic practices that are not transparent to the public which has implications for racialized persons. In particular, this study sought to explore the root causes of the disproportionately negative treatment of Black people by the police. The TPS has been making efforts over the last two decades to increase its intellectual and human resource capacity of personnel to deal specifically with mental health and addictions crisis calls. Recurring incidents of fatalities involving Black persons in crisis during interactions have elicited public inquiries as accusations of police brutality and overuse of force continue to surface. Four main themes emerged from the data: i) CIT is essential but is currently inadequate to meet the complex needs of a diverse society; ii) stigma and racism are normative in police practice; iii) critical pedagogies are a welcome addition to CIT curricula at the TPS, but might face resistance by officers who do not share progressive views; and iv) police officers admit that there are incidents where they are blameworthy, but the media make their job more challenging by not reporting balanced perspectives.

Limitations of The Study

The research questions were driven by the data and were discussed and analysed to explore the potential root cause of negative outcomes. Although this was a qualitative study, a larger sample size could perhaps inform better generalizations from the data. The unavailability of race-based data from the TPS concerning mental health further rendered it difficult to determine whether there has been a decline or rise in incidents

resulting in negative outcomes for persons in crisis. Qualitative research compensated for this deficiency by drawing upon the richness of information which is garnered from participant narratives. The richness of information as found in thick descriptions compensates for some of the weaknesses inherent in small sample sizes (Geertz, 1973; Holloway, 1997). In collecting empirical data, a longitudinal study could establish if the changes in police education over time resulted in fewer incidents of fatalities and injury to persons in crisis, or even fewer complaints against the police arising from encounters (Caruana et al., 2015). In other words, it could better determine if there is a cause-and-effect relationship between applied pedagogy and reduction in deadly outcomes for persons in crisis. The practice of collecting race-based data in Toronto only began on January 1, 2020, and in fairness, not enough time has passed to assess and compare outcomes. Even so, race-based data collected over time might only map the types of incidents police handle, and the outcomes. There is no indication of an intention by the TPS to identify linkages between education and outcomes. We wait and see. The inability to track even basic descriptive trends in the police research industry and developing empirical explanations remains a daunting task for researchers (Huey et al., 2021; Maguire & King, 2004), Without relevant data on a particular topic, research becomes tedious. Another limitation of this study is that stories provided in the narratives could not be independently verified; I had to take them at face value. Key aspects of policing and mental health were shared across the interviews, and there were strong similarities in the officers' experiences, which strengthened validity. The officers' narratives on the central issues such as stigma, racism, cultural (un)familiarity and media bias, independently corroborated each other.

Beginning at Chapter 6, I engaged with the discussion and analysis of officers' perspectives of the current CIT curriculum and how it is administered across the two first responder units in mental health, namely, MCITs and PRUs. The research revealed that although there is a mandatory minimum required number of hours on mental health education, it may not be applied in a formal manner but rather *ad hoc* for more senior officers. Their responses indicate that CIT is inadequate and that basic training in CIT, although useful, might not be sufficient in preparing officers for crisis situations. Collaboration with the health sector to address the needs of persons in crisis is a relatively new phenomenon which is in stark contrast to the traditional use-of-force type of policing that the subculture feeds. Some officers embraced it for the pragmatism of having a trained mental health nurse on their team to assist with symptom recognition. Some officers criticized it citing role confusion in the co-response collaboration.

Some officers felt that they do not have the requisite competence to handle crisis calls. If officers are not provided with the necessary training to handle persons in crisis (Richmond & Gibbs, 2020) it can result in negative outcomes (Herrington & Pope, 2014; Dupont et al., 2007). The data suggests that these officers are products of the dominant force-driven policing style that relies less on emotional intelligence, and the co-response model is markedly different from the training received at the training college. Officers are now challenged with adapting to collaboration with other social services. It will take some time to adjust but it must be sustained. One area of police training that the participants all emphasized was de-escalation, which is a key feature of the CIT. It seems to be resonating within the culture. For the most part, their views

showed a willingness to exercise emotional intelligence in conflict resolution. Stigmatization of race and disability, jointly and severally, has led to police meting out unequal treatment of the public. Citizens who are seen as more affluent are treated more respectfully while marginalized persons are handled with excessive force, often causing death. To hear police officers actually admit that racism and stigma are normative in policing, though disturbing, is the first step toward making meaningful adjustments in areas such as recruitment, education, and resources. The fact that both Black and White officers alike agree that racism exists within the police service indicates a general openness to transformative efforts to eradicate the problem. Some officers will clearly still oppose change based on their own socio-political views, but it was worth broaching the subject of infusing race-based education into the existing CIT curriculum.

Chapter 7 discussed just this possibility. I have argued that unless social justice pedagogy becomes integrated into CIT as standard practice, Black people will remain at high risk of death. White police officers supported the idea of including race in the curriculum. The Black officers spoke passionately about education reform designed at eradicating systemic racism in the police service, and likewise supported race-based education. Here, the potential for transformational learning was manifested. After all, the purpose of transformative learning requires the learner to assess current perspectives and approaches to life through education, and to provide an opportunity to change perspectives and approaches (Mezirow, 1991). Knowledge acquired can be passed on to even the most resistant, as they too are forced to rethink approaches and reflect on their own conduct. All officers shared concerns about negative media attention. They

will not likely get sympathy from the communities they serve if they continue to harm persons in crisis, but it is within their purview to address bad behaviours that draw media attention.

Community engagement is an integral part of the officer-citizen dynamic and the notion of effective communications in a diverse city is critical to police operations. Incidents of discrimination and excessive force negatively impacts these critical factors. To this end, implementing critical pedagogy is an imperative. Introducing training content focusing on intercultural communications to address diversity, is of itself a sign of progress. This suggests that police officers can use their agency internally to introduce education reform to curb the "perpetuation of its own customs" (Dewey, 1916: 81). They can even do so informally by enlightening their fellow police officers who do not hold progressive views, and change the subculture in the process. For adults, learning must be transformative for it to be effective (Mezirow, 2000). MCIT officers in particular, can use their agency to effect change. Incorporating feedback from officers who have real experience on the job into pedagogy (Goldstein, 1979) can be accomplished through an iterative process. I have further argued that comprehensive training should be applied equally across the board from inception for recruits, and continuous professional development would provide in-service refreshers in keeping with the Memphis Model. This presents an opportunity for the police service to only attract and recruit police officers who know right up front, what the training entails so there are no surprises after they are dispatched for duty. An officer who is opposed to mental health training, is likely not a good fit for police work overall.

The data generated in this study suggest that the TPS has not adequately addressed the phenomenon of the disproportionate negative outcomes from interactions between Black persons in crisis and the police. The CIT program does indeed challenge the dominant police training methods by emphasizing soft skills and emotional intelligence. This is a start, but if training is not reformatted through anti-oppression lenses it will do little to quell the phenomenon of Black persons in crisis dying at the hands of police. This study was approached from a social justice perspective, which envisions police education and training formulated within a framework of equality, fairness, and a recognition of the lived realities of the marginalized. A social justice perspective allows us to critically analyse how institutions preclude and disempower people with mental illness (Corrigan et al., 2005). Notwithstanding the limitations of the study, the data and secondary sources drawn upon in this thesis have also shown that there is potential for police service organizations to reform and be more reflective of social justice. It is propounded here that police education and training could benefit over time from a complete overhaul wherein all stakeholders in the system (e.g. police, social work, healthcare, families of persons in crisis, court system) work toward a common goal – to protect vulnerable persons. This study has implications for police education in general and has the capacity to inform policy and pedagogic reform. It lays a foundation for informing policy across sectors. Tensions between law enforcement and the mentally ill have been identified as a global issue (Ellis, 2014). References were therefore drawn from studies from various jurisdictions and the wider knowledge base on policing. What is clear is that there are certain universalities in policing which transcend geographical borders. By drawing upon studies from across various jurisdictions outside Canada, there is much work to be accomplished in implementing best practices toward a human-

rights centric approach to service. While further rigorous studies are warranted to explore CIT's effectiveness, it is worthwhile in the interim to adopt critical pedagogy within police curricula. Aspects of policing in the modern era that repeat and reproduce systemic, discriminatory practices are not sustainable. During this study I recognized and appreciated the definitive efforts of the police to face the issue of stigma. Efforts to address race and other sources of prejudice are not so obvious. The time has come for police service organizations to place the 'elephant' squarely in the centre of the curriculum and incorporate critical social justice pedagogies into its training framework. It is long overdue.

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HIGH PROFILE CASES INVOLVING DEADLY POLICE FORCE

YEAR	MEDIA SUMMARIES
1988	Lester Donaldson was shot dead by a police officer in the Toronto rooming house where he lived. Donaldson, a 44-year-old Black man, was holding a small paring knife and had been diagnosed with schizophrenia. Donaldson reportedly tried to attack the officers with a knife. He was shot at close range. Constable David W. Deviney, 33, a 12-year police veteran, was charged with manslaughter. (https://buffalonews.com/news/2nd-manslaughter-charge-stirs-toronto-police-protest/article_d509d2e4-5251-5eba-9fd9-b017e1d0a7e2.html. January 14, 1989.
2012	Michael Eligon, a 29-year-old Black male, escaped from a Toronto hospital where he was involuntarily admitted under the *Mental Health Act*. He was dressed in a hospital gown and armed with two pairs of scissors. According to the SIU, Eligon tried to rob a nearby convenience store and cut the cashier. It was reported that he attempted a carjacking and tried to break into a house. When the police finally apprehended him, he was shot to death. The "rookie" officer with only one year of policing experience claimed that he "feared for his life" (CBC News, December 2, 2013).
2013	Sammy Yatim, an 18-year-old Syrian immigrant was shot nine times by Toronto police who responded to a call about a person with a knife aboard a streetcar. The incident was captured on surveillance and cellphone video. The evidence of police mishandling of the situation resulted in the police officer being convicted of second-degree murder. This type of conviction was a first in Canadian history (Toronto Star, July 28, 2013).
2015	Andrew Loku, Black male, father of five, was having a mental health episode when police officers were called to a Toronto apartment building after reports that Loku was threatening a woman inside with a hammer. Loku was killed in the third-floor hallway of his apartment building which was leased by the Canadian Mental Health Association (CMHA) to specifically house tenants with mental health challenges. It appears that the police during that incident did not even possess this crucial piece of knowledge about the purpose of this particular residence which may have assisted in preparing to use alternatives to lethal force (Toronto Star, 2017).
2020	Regis Korchinski-Paquet, a 29-year-old Black female who was reportedly experiencing a mental health crisis, fell 24 floors to her death at her West End Toronto apartment, while in police custody). The media reported that the victim's family had made a 911 call out of "safety and concern". This incident prompted a large street protest while people across the world were still protesting the George Floyd murder which occurred only a few days prior to this incident. The TPS was again accused of racial discrimination and mishandling mental health crisis. (CTV News, May 2020).

Participant Information Sheet

Name of Project: Curriculum development in Mental Health for law enforcement officers: Evaluating pedagogy and approaches to training.

Researcher: Dahlia Bateman
Thesis Supervisor: Dr. Carolyn Jackson

Dear M__

I would like to invite you to take part in a research study which is part of my PhD studies in the Department of Educational Research at the University of Lancaster.

Before you decide, you need to understand why the research is being done and what it would involve for you. Please take time to read the following information carefully. Talk to others about the study if you wish. Ask me if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part.

Several high-profile cases arose in Toronto over the last decade involving police fatalities in dealing with persons who are apparently experiencing mental health or addiction (MHA) issues, especially visible minorities. This growing problem prompted the Toronto Police Service to request a Commission of Inquiry. In 2014, Supreme Court of Canada judge the Honourable Justice Frank Iacobucci lead the task of investigating policing interactions with persons dealing with MHA challenges. One of the deficiencies discovered by Justice Iacobucci was a lack of education and training. Justice Iacobucci recommended Crisis Intervention Courses that would build on training given to all officers, while placing a greater emphasis on a verbal, compassionate response instead of an approach that emphasizes control. It was recommended that the course should incorporate lectures, visits to mental health treatment facilities, interaction with persons with mental illnesses who are not currently in crisis, and practical scenario-based training (Iacobucci, 2014).

The Mental Health Commission of Canada (2013) also found that the various police departments were doing a "reasonable job" of training officers for basic situations, there was much room for improvement when it came to dealing with persons with mental health challenges. One key area that was identified by the study at the national level is the need for education that combines training of police personnel, adult educators,

mental health professionals, mental health advocacy organizations and people living with mental illness.

You have been invited to participate because you are a police officer in the Toronto Police Service who may be a part of the Mobile Crisis Intervention Team or may from time to time, have encounters with persons who have (MHA) issues as you carry out your duties as a police officer. You may also be a lecturer or trainer at the Police Training Academy who can provide insight on the pedagogical approaches that are currently being used to educate and train police officers. Your participation is voluntary, and you can withdraw at any stage, however, your contribution would be greatly appreciated as we seek to further understand any resistance against the new curriculum.

I will be asking you questions with respect to your experience as a police officer in Toronto. In particular, I would like to get your views on the apprehension of persons dealing with MHA challenges. Because Toronto is known as one of the most diverse cities in the world, your views on the notion of diversity and race and how it impacts your approach to policing would be of great interest. It will take about two months for me to get through all the interviews and generate the necessary data for the study.

I may do an audio recording of our conversation, with your permission. The recording will be only for my purpose to help me capture the information most accurately. I can provide you with a copy or transcript of the information that you have provided to me. If you are uncomfortable with an audio recording, I will make hand-written notes only. There will be others involved in the study and I can provide you with the information and data collected from them with their prior, written consent. Likewise, if you consent to a release of the information, I may provide it to other participants in the study. If you are uncomfortable with your real name being attached to the information, you can opt to use a pseudonym to protect your identity.

Your data will be stored in encrypted files (that is no-one other than me, the researcher will be able to access them) and on password-protected computers. I will store hard copies of any data securely in locked cabinets in my office. I will keep data that can identify you separately from non-personal information (e.g. your views on a specific topic). In accordance with University guidelines, I will keep the data securely for a minimum of ten years.

Before we proceed, I ask that you sign a consent form which is attached hereto, so I may use the information provided by you in the study. The information collection may become publicly available after I conclude the study. I would like to meet with you in person to discusses the issue, however, I would like to follow up with you by telephone if I have any further questions or need clarification on the information already provided.

At all times, I will ensure that your information is protected in accordance with the consent form that you will be required to fill out and return to me before we proceed.

Because this is an issue that affects thousands of families in the province of Ontario, we hope that your experience and opinions will help to provide clarity on the subject, assist in curriculum planning and development, contribute to the wider conversations regarding mental health and policing.

Thank you for reading this information sheet.

Sincerely,

Dahlia Bateman

APPENDIX C

Consent Form

Title of Project: Curriculum development in Mental Health for law enforcement officers: Evaluating pedagogy and approaches to training.

Name of Researcher: Dahlia Bateman

Institution: Lancaster University, UK

     Please initial box

1. I confirm that I have read and understand the information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.	
2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason.	
3. I consent to the interview/session being audio-recorded.	
4. I agree to take part in the above study.	
5. I would like a Pseudonym to be used to protect my identity	

Name of Participant:

Date:

Signature:

Toronto Police Service Questionnaire

Topic: Mental Health Education in Policing

Dahlia Bateman
Lancaster University

1)   What city or town in the Greater Toronto Area (GTA) do patrol?

2)   How long have you worked in law enforcement?

3)   What is your race/ethnic background?

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4)   What role do frontline personnel play when responding to mental health calls for service?

5)   Have you participated in the annual MCIT course at the Police College in Mental Health?

6)   How does the curriculum at the TPS training college deal with the issue of mental health?

7)   If you are a teacher/instructor, what course(s) do you teach?

8)   What training do PRU officers receive to prepare them for the MCIT units?

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9)   What challenges do officers face when responding to mental health calls for service?

10)   Are there any other strategies or training which you think could better prepare police personnel when responding to mental health calls for service?

11)   Are you aware of the recommendations from two inquiries led by judges (Iacobucci, 2014 and Tulloch, 2017) regarding policing people who are experiencing mental health or addiction (MHA) issues?

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12)   How is the application of police education and training affected by system operational barriers?

13)   How do you feel about making race-based education and training a part of the police curriculum?

14) The TPS has added a new component to the course Intercultural Communication lecture/presentation.

- Are you familiar with that? Y/N

- What are your thoughts on this course?

15) What, if anything, are you tired of seeing in the media about police-community relations?

16) What, if anything, is the media leaving out in their stories about the police?

17) What, if any, myths are there about the police?

18) What is happening now with policing in your community? How do you feel about that?

19) What do you enjoy most about being a law enforcement officer? What do you enjoy least?

20) What stressors if any, are you under as a police officer?