

# Preliminary findings of a qualitative study exploring police encounters in child and adolescent mental health

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# Today

- Background to the Issue
- Research Purpose and Methods
- Preliminary Outcomes
- Conclusions and Implications *(hand-out)*



# Background to the Issue

- Limited scholarship about child and youth mental health  
*\*\* research is primarily on the experiences of adults*
- Studies explored:
  - a) Perceptions adults have of police and police interactions
  - b) Detailing the mental health training police officers receive
  - c) Examining the human rights implications of police involvement
- Main concerns with using police for (adult) mental health support are:
  - Criminalization of mental illness and of persons deemed to have a mental illness *\*\* cited as major form of structural discrimination*
  - Inappropriate or excessive use of force *\*\* extreme situations result in deaths*

# Research Purpose

- To explore the lived experiences children and youth involved with the mental health system, and their caregivers, have of police encounters

Community Collaborators:

**Peel Children's Centre** and **Nexus Youth Services**

Funding:



- 1) SSHRC Small Research Grant, York University
- 2) Faculty of Liberal Arts and Professional Studies, Minor Research Grant

*Ethics clearance obtained through  
Research Ethics Office, York University and community partners*

# Methods

<b>Qualitative Approach</b>	<b>Narrative Study</b> – exploring lived experiences
<b>Data Collection</b>	<b>In-depth, semi-structured interviews</b>  <b>1. Caregivers</b> (i.e. parents guardians) with child between 12-24 years old involved with mental health systems and a history of police involvement  <b>2. Frontline mental health practitioners</b>
<b>Data Analysis</b>	<b>Thematic content analysis</b> based on principles (steps) for <b>grounded theory</b>

# Participants

- Thirteen (**N=13**) interviews (2016-2017)
  - Six (**n=6**) **CYMH practitioners**
    - *Honoraria: \$20 gift card*
  - Seven (**n=7**) **caregivers** with a child between 12 and 24 years old involved with the mental health system and with a history of police involvement
    - *Honoraria + transportation allowance: \$65*

<b>CYMH PRACTITIONERS</b>	<b>n = 6</b>	
Sex/Gender:	5 = Female	1 = Male
Race:	4 = Caucasian; 2 = Racialized ( <i>Black</i> )	
Profession:	4 = social worker (MSW); 1 = counselling degree (masters); 1 = child and youth worker (college)	
Number of Years in CYMH:	4, 4, 7, 9, 11, 13 years	Mean = 8 years

<b>CAREGIVERS</b>	<b>n = 7</b>	
Sex/Gender:	6 = Female/Mother	1 = Male/Father
Age (at time of interview):	39, 49, 52, 52, 53, 54, 59 years	Mean = 51 years
Race:	4 = Caucasian; 3 = Racialized ( <i>Black, Latino/a; Middle Eastern</i> )	
Sexual Orientation:	7 = heterosexual (self-identified)	
Highest education:	1 = high school; 3 = some or college degree; 2 = some or undergraduate university degree; 1 = doctoral degree	
Family composition:	3 = one-parent household; 4 = two-parent household	
Annual family income:	2 = \$39K and below; 1 = \$40-49K; 3 = \$50-59K; 1 = \$150K	
Age/gender (male/female) of identified child:	4 = Male, 14, 15, 16, 17 years old 3 = Female, 14, 15, 17 years old	
Number of mental health diagnoses of identified child:	2 = one diagnosis; 4 = two diagnoses; 1 = three or more diagnoses	
Nature of identified child's mental health issues:	3 = Depression; 3 = Anxiety; 2 = suicide talk/ideation; 3 = ADHD; 2 = ODD; 1 = query psychosis (hearing voices); 1 = query Asperger's; 1 = trauma counseling/no diagnosis	



# PRELIMINARY OUTCOMES

## *Main Categories of Themes and Subthemes*

### Category 1:

**Police services were accessed for support to deescalate a crisis with a distressed child**

**C1. Subtheme 1:** Police encounters were often negative resulting in experiences of stigma and criminalization

**C1. Subtheme 2:** Positive encounters were associated with feeling respected and understood as a child and as having mental health issues *\*\* as “compassion” and transparency where information was shared by police with the parent*

### Category 2:

**Tensions about and between the child and youth mental health and police systems**

**C2. Subtheme 1:** Tensions related to the limits of child and youth mental health VERSUS police services, roles and mandates *\*\* a disconnect between parents’ expectations (e.g. to obtain mental health support, access services faster, etc.) versus the limits of police roles and mandates against the backdrop of a lack of appropriate mental health crisis services/support*

**C2. Subtheme 2:** Mental health system see the police as “heavy handed” in ways that mirrors parents’ ideas of the need for “compassion” (i.e. demonstrating “understanding” of the mental health issue and/or child) by police first responders

**ROSA [mother]:** ...it never dawned on them [responding officers] that, you know, this guy's 15 years old, there's – like, what's going on with him? What's going on? Let's find out what's going on...let's refer him to somewhere... Like, this is what I would expect, and 'nothing' – it wasn't like that. It was – it was, just, you know, you're a criminal and you're – you're going to jail, and they even treated him like verbally bad.

*[ADHD, anxiety, but had childhood exposure to violence and no one ever queried trauma]*

**Category 1. Subtheme 1: Stigma and Criminalization**

**ANGELA [cymh practitioner]:** It really stuck with me. It really upset me that you know, rather than trying to form some sort of plan around getting him supports around his mental health, they [police] just told him that if he called one more time, he was going to be charged, and then he was. And this youth is over 18, he is now 21 and this all happened within the last year, so these are charges that are going to be on his record.

*[suicidal ideation, threatened to jump off a building]*

**Category 1. Subtheme 1: Stigma and Criminalization**

**ROSA [mother]:** I would like to see the police have a little bit more compassion when dealing with youth who commit offenses, just – like, just step back a little bit, don't be so quick to treat them as if they're, like – I don't know, like a nothing, like just a piece of wood that you just move around from here to there. They're like cattle, you know, you're just herding cattle. Like, if they – just what I would like to see that they, you know, do a little bit more delving into what might be going on inside their minds.

**Category 1. Subtheme 2: Feeling Respected, Understood and Being Informed (i.e. transparency)**

**TARA [mother]:** So I take the Form 2 [community treatment order] to the police station and the same two cops that were at my house that morning took it from me...then they said to me, 'just have a seat right there, we'll be right back'... An hour and a half I sat in the police station waiting for them to come back... and [my daughter's friend] phones me and he says... 'go home right now, she's on her way home'... I go up to the desk and I said, 'excuse me, where did those two cops go? I have to leave because my daughter is on her way home, I've got to leave'. And they're just kind of looking at me, they go, 'well, we're not sure where they are'... I race home. Guess who's already at my house? The two cops. So I said to them, 'what are you doing here? Why did you leave me sitting in your waiting room for an hour and a half?' And they said to me, 'we made the decision not to involve you in this process.' I'm over the edge now. I said, excuse me? I'm her mother, right?

*[intermittent suicidal ideation, anxiety, ADHD, non-verbal Learning Disability]*

**Category 1. Subtheme 2: Feeling Respected, Understood and Being Informed (e.g. transparency)**

**KAREN [cymh practitioner]:** I'm just not hearing a lot of empathy. When I get feedback from clients about their experiences with police, I sense that families want to use the police as a resource, but when they're getting reminders [from police responders] about consequences and charges, I think it instils fear, and then they might be more reluctant to use the police.

**Category 1. Subtheme 2: Feeling Respected, Understood and Being Informed (e.g. transparency)**

**TARA [mother]:** [While police were responding in the home] I fully expected them to take her back up to the hospital [for an emergency assessment for threat of suicide]. Anyway, they came back out after talking to her for maximum 15 minutes, and the young guy, the younger of the two cops said to me, 'well, we're just going to leave her with you because we don't think she's going to do anything', and they handed me the knife back. And I just looked at them and I really felt like saying, really? You've met this kid for 15 minutes and you don't think she's going to act on anything, so you're just going to leave her here with us? ...I thought when the police came that this would be the answer, right?... why wouldn't they take her up to the hospital? I mean, this kid has threatened to hurt herself, she's threatened to hurt other people in the home.

## Category 2. Subtheme 1: Tensions between Mental Health VS Police Roles and Mandates

**LUCY [cymh practitioner]:** [Describing how mental health and police systems work together]...so when the police came, it really felt that everything that myself and my coworker had done to kind of bring him to a place where he was calm...the police kind of came in, stormed in, and very much treated him like he was a criminal and dangerous. In some ways, I understand because we were in a public space, but um, at the time, the youth was really in a place where he would have been very willing to comply and, um, go with them to the hospital... and unfortunately I just think that it was a lack of, um, training and just exposure to, um, mental health on the part of the police that they dealt with the situation just very poorly, and it ended up being just a huge breach in our relationship with the youth, and we didn't see him for probably two or three year...But I do feel that if that situation had been handled better, not so violently, um, that we could have been a better support for him in his recovery and stabilization as well.

## Category 2. Subtheme 1: Tensions between Mental Health VS Police Roles and Mandates



**MARK [cymh practitioner]:** Some of them have been very pleasant. They sit down, they have a conversation with them, and take us aside to hear what's going on, and then have a conversation with the kids. And sometimes they can be aggressive, like you need to listen or I'm going to charge you, with the authority--with a strong voice, letting them know this is it, you need to follow through or the next time I'm come, you're getting arrested, simple as that. This should not be happening in the house [residential treatment home] and that they're here to help you.

**Category 2. Subtheme 2: Police working within their mandates but heavy-handed as a mental health support – is that even their role?**

**SARHA [mother, ESL]:** It was for my son, it was negative experience because before that, he wasn't afraid from the police. But because they told him, 'you have to leave now either in our--in the police car or in the car of the shelter', he was frightened from them. Yes, he was frightened, and –he told me after that, he thinks that the police should support him, because--but now, they forced him for--to do things, it's so difficult for him.

*[refugee, possible war trauma, querying depression/suicidal ideation and anxiety (school avoidance and hearing voices) \* child being moved from shelter to motel by shelter system, child had panic attack and refused to leave and police called for assistance]*

**Category 2. Subtheme 2: Police working within their mandates but heavy-handed as a mental health support – is that even their role?**

# Conclusions and Implications

- Impact of competing views about children and youth, childhood, distress in childhood and roles and mandates of policing
- Adopting an anti-stigma approach to crisis and police services
- Completing the analysis of the pilot and starting a new project:

**\*\* HANDOUT**