



# The enduring and contagious optimism of change makers

Norman E. Taylor\*

I am fairly certain our readers will appreciate the difficulty of my task here, to introduce a journal issue, likely any journal issue, during the first quarter of 2021. So many of us directed our ever-straining faith towards a good-riddance ending to 2020, even as we still struggled daily to comprehend and adapt to the multi-layered global, national, and local conditions. Maybe a few mixed metaphors might help?

Such was a year in which public health, social equity, and disrupted political currents coalesced into a tsunami, a wave that swamped our systems and our psyches, alike.

Alas, the new year has yet to reveal any silver bullet solutions. In fact, thus far, it appears to have barely paused to reload.

For many of us, the months ahead appear to promise only that daily injections of anxiety still remain more likely than those coveted two-dose injections coming in sufficient number to reduce our vulnerability to infection.

Enough of those? And yet, we persevere.

First responders, front-line health and social workers, and essential workers across a range of industries continue to brave public spaces to keep the world turning for the rest of us. Many of us merely commute between rooms, open a computer screen, and continue to engage through virtual means with colleagues and collaborators, suppliers and customers, teachers and learners. Out in the public spaces we share, the term “eyes-only” has taken on new meaning. But, as our eyes may be fixed by necessity on getting through tough days, we are fortunate that many continue to lift their gaze to a better future.

As I reviewed the diverse slate of authors and their articles curated for this issue by our Editorial Team, I was struck by the common denominator evident in their optimism. Every one of them is showcasing new ways and new possibilities that can help the system bend to better serve society. Some are directly seeking to restore trust where it has eroded or create it where it never was; some, to help build greater strengths and protections for individuals, families, or communities; some, to conceive and deliver

more responsive services to those who need them most; and others, to advance the essential re-engineering and modernization of our justice apparatus.

Notably, many of these papers also continue to reinforce both the urgency of and commitment to multi-disciplinary collaboration as essential to bringing these changes about. Just a week after the release of this Issue 6 (1) of our *Journal of Community Safety and Well-Being*, our journal will again play an active role in the Sixth International Conference on Law Enforcement and Public Health (LEPH2021). The same combined spirit of resilience and optimism already hovers over this upcoming conference. Originally scheduled as another mass gathering of like-minded academics, practitioners, and policy-makers from around the world, situated this time in Philadelphia, PA, the hosts and organizers have admirably executed their pivot to a fully virtual event.

Two papers in this current issue are already keyed to these LEPH proceedings, and the theme of our upcoming June issue will be directly linked to the conference proceedings, with several papers already committed from presenters and panellists who will be participating. We look forward to robust online engagement throughout the week-long event, albeit absent the enjoyable dinners and social gatherings that the City of Philadelphia would have otherwise delivered as a bonus.

In the meantime, we are pleased to offer an excellent suite of reading material, much of it peer-reviewed, some as commentary, and, through our commitment to open access, we invite you to enjoy it all from the safety and comfort of your home. Stay well.

## CONFLICT OF INTEREST DISCLOSURES

The author has continuing business interests that include providing advisory services to communities, police services and related human service agencies.

## AUTHOR AFFILIATIONS

\* Editor-in-Chief

**Correspondence to:** Norman E. Taylor, Community Safety Knowledge Alliance, 120 Sonnenschein Way – Main, Saskatoon, SK S7M 0W2, Canada.  
**E-mail:** [ntaylor@cskacanada.ca](mailto:ntaylor@cskacanada.ca)

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# Police De-Escalation Training & Education: Nationally, Provincially, and Municipally

Lisa M. Deveau\*

*This article is related directly to the 6th International Law Enforcement & Public Health (LEPH) Virtual Conference in March 2021.*

## ABSTRACT

In this critical review and social innovation narrative, the current literature on de-escalation and policing is reviewed. The following explores how services train recruits and experienced officers on de-escalation, conflict resolution, and crisis intervention skills. A limited environmental scan was completed to inquire about the number of hours dedicated to de-escalation training compared with tactical and combative training within Ontario law enforcement agencies. The environmental scan also considered how services respond to imminent mental health crises, as some services rely on mental health professionals to respond to 911 emergencies with police officers, through the Mobile Crisis Team. Within the literature, questions are proposed about the government's role in overseeing policing, and why there fails to be any federally or provincially mandated training and approach to mental health and de-escalation within Canadian law enforcement. The author ultimately advocates for systemic change by highlighting the priorities, values, and contradictions within Canadian police services which have been influenced by colonization and patriarchal narratives.

## INTRODUCTION

Police officers enter situations that are unfamiliar and unknown. Their skills and expertise are required to either diffuse a situation, detain a suspect, or restore civility. In each situation, an officer must critically assess and respond in order to ultimately preserve their own safety and the safety of the public. Given the responsibilities of police officers, it is reasonable to assume that their training is comprehensive and governed by research that supports evidence-based practices—research that highlights skills commonly needed and used by officers, which is then used to inform officer annual training. Further, it is assumed that the training incorporates invaluable skills that extend beyond tactical and combative measures to incorporate de-escalation, conflict resolution, and mediation.

Throughout Canadian law enforcement history, there appears a critical tension that remains influential today. Officers are expected to build trust and partnerships in their communities, by applying de-escalation and conflict resolution skills, while also being trained to have the strategic, combative, and tactical skills to protect public safety. This dichotomy remains prevalent within the officers' culture, duties, and legislation. Leaders in policing seem to prioritize tactical responses over peaceful resolution, undoubtedly

stemming from historical influences of colonization and patriarchal narratives that continue to influence the profession and are perpetuated by governmental and regulatory bodies.

The following critical review explores de-escalation training in police education within Canada, focusing on the following questions: How is de-escalation taught to officers, and what strategies are used in teaching de-escalation? Are there national, provincial, and municipal standards for teaching de-escalation to police officers? Are services mandated to incorporate strategies that teach peaceful resolution during annual training? What other skills and training, such as use of force, are officers taught? What structural and systemic issues influence the prioritization of police training? Finally, the Ontario Ministry of the Solicitor General's role in training and educating Ontario officers is explored and discussed.

## Mental Health Response/Approaches

Mental health responses make up a large portion of an officer's responsibilities. In some cities, mental health accounts for over 60% of the calls for service (Watson et al., 2008). De-escalation has been an effective and safe response that restores order and preserves the safety of both citizen and officer. In Canada, 98% of the calls for service required de-escalation, while only 2% of calls required forceful and

**Correspondence to:** Lisa Deveau, Department of Social Work, Carleton University 1125 Colonel By Drive, Ottawa, ON K16 5B6, Canada. **E-mail:** lisa.deveau@outlook.com

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combative responses (Public Safety Canada, 2015). Given the frequency of the need for de-escalation, the following will discuss the most common approaches used within law enforcement agencies that teach and guide officers how to de-escalate and respond to mental health-related crises.

There is a lack of research on the most promising approaches to training and responding to mental health crises within Canadian law enforcement. The most common approaches within Canada and the United States are the Crisis Intervention Training course (CIT) and the Mobile Crisis Team. Crisis Intervention Training originated in Memphis, Tennessee, as a 40-hour program that reduces excessive use of force and prevents injury to both officer and citizen by training officers on promising de-escalation skills (Watson et al., 2008). The more common approach within Canada is the Mobile Crisis Rapid Response Team (MCRRT) (also referred to as impact team, mobile crisis engagement team, mental health and engagement team or other variations depending on the service) in which front-line, specialized officers are paired with mental health professionals to respond to imminent emergencies. Within this team, officers assess perceived risks and threats, then allow mental health professionals the chance to de-escalate and respond to the person in crisis.

In evaluating the approaches, CIT was found to be effective in helping officers identify mental illness, reduce rates of arrest, and increase referrals to mental health services (Watson et al., 2008). However, overall, the research shows the MCRRT to be more effective than the CIT course in responding to, identifying, and de-escalating mental health crises (Coleman & Cotton, 2010; Watson et al., 2008). It is important to highlight that the research methods and conclusions drawn are open to question. The current research measures the effectiveness of these approaches and courses by focusing predominantly on reduced hospital wait-times, the ability to divert people in crisis away from the judicial system, and reduced on-scene times, which do not necessarily equate to promising responses in which force/excessive force was not used by officers on the scene.

### Methods of Teaching De-Escalation

Most services apply an interdisciplinary approach when teaching officers promising approaches to de-escalation and mental health awareness. Through collaboration, law enforcement agencies teach de-escalation by incorporating skills used by social workers, psychiatric nurses, and counselors. The training incorporates live testimonies/lived experiences, practical application of skills, group discussions, seminars, and lectures that identify and bring awareness of mental illness. The core goal of this training is to encourage officers to self-reflect, remain self-aware, and practice emotional regulation (Coleman & Cotton, 2010; Krameddine et al., 2014; Richter et al., 2006; Watson et al., 2008).

### Application of Skills

The CIT model incorporates a behavioural approach, in which officers apply acquired skills. The Edmonton Police Service (EPS) model, for example, dedicates a full day to simulated exercises as officers “respond” to carefully scripted, realistic scenarios performed by trained actors (Krameddine et al., 2014). The application of skills allows the actors, colleagues,

and mental health professionals who provide the training to offer feedback on officers’ presence, posture, tone, and verbal commands to encourage them to consider how they present themselves by tapping into self-awareness and self-reflection (Coleman & Cotton 2010; Kisely et al., 2010, p. 663; Krameddine et al., 2013; Shapiro et al., 2015).

### Live Testimonies & Lived Experience

Incorporating live testimonies is another technique used in de-escalation training to increase empathy, patience, and understanding of mental illnesses as officers gain a first-hand account of a person’s daily struggles. This provides officers the opportunity to observe and interact with a person when they are at their baseline and not experiencing a mental health crisis, which then makes them more capable of recognizing a person in crisis by identifying signs and symptoms. Lived testimonies also encourage officers to challenge any preconceived judgements and stereotypes they have about mental illness by giving them the opportunity to actively listen and ask questions (Coleman & Cotton 2010; Kisely et al., 2010, p. 663; Krameddine et al., 2013; Shapiro et al., 2015).

### Lecture

Any effective mental health course incorporates content that educates trainees on identifying mental illness and local mental health resources. Crisis Intervention Training incorporates lectures, seminars, and group discussions. Police officers who are trained and certified in CIT report having increased confidence in identifying and therefore de-escalating, mental health crises and referring citizens to appropriate mental health resources (Coleman & Cotton, 2010; Kisely et al., 2010; Shapiro et al., 2015). Moreover, officers expressed that they learned to ask key questions when dealing with a person in crisis to help navigate the interaction (Coleman & Cotton, 2010).

These are a few of the strategies used to teach de-escalation, a skill that is arguably the most essential for officers. The requirements to become a police officer place a great deal of emphasis on physical strengths, perhaps at the expense of educational achievements. Recruits have experiences and educational qualifications that differ substantially from one candidate to the next. Officer annual training is the only standardized training officers receive and presents the best opportunity to teach essential skills to both novice and experienced officers. It is crucial that law enforcement agencies use the annual training time wisely and as an opportunity to educate officers on essential skills that might not be acquired otherwise.

### National and Provincial Standards

A limited environmental scan was completed to explore how many hours law enforcement agencies dedicated, annually, to mental health and de-escalation training both within Canada and in the United States. In completing the scan, questions were asked regarding the number of hours dedicated to de-escalation training and whether law enforcement agencies are provincially or nationally mandated to teach and instruct on de-escalation, conflict resolution, and crisis intervention.

The International Association of Directors of Law Enforcement Standards and Training (IADLEST) and International Association of Chiefs of Police & Cincinnati University Center

for Police Research & Policy (IACP/UC) are two agencies that focus on evidence-based practices within policing in the United States. The IADLEST is an organization that rigorously evaluates and certifies courses that claim to equip officers with essential skills, such as a de-escalation (IADLEST, n.d.). Although it is not a requirement for law enforcement agencies to have this stamp of approval, most law enforcement agencies access and train officers using courses that have this certification (IADLEST, n.d.).

While IADLEST is an international organization that dedicates time and research to evidence-based police practices, including de-escalation and conflict resolution, most of their research involves educating and training officers in the United States. However, the research in relation to evidence-based de-escalation and mental health training for officers is lacking and outdated (IADLEST, n.d., IACP, n.d.). Other than the CIT model, the effectiveness of de-escalation training has not been well researched by professional and academic bodies (IADLEST, n.d., IACP, n.d.). According to researchers at the Center for Police Research and Policy at Cincinnati University, agencies are not required to allocate a certain number of hours to mental health, de-escalation, and conflict resolution training. Each police agency has discretion over the amount of time spent on de-escalation and crisis intervention training, and this training is not nationally mandated (IADLEST, n.d., IACP, n.d.). Agencies within each state arbitrarily dedicate hours to such training and often choose to prioritize use of force, combative, and tactical training over other essential skills, such as de-escalation, conflict resolution, and mental health awareness (IADLEST, n.d., IACP, n.d.). It is unclear whether there is an optimal number of hours for teaching de-escalation as “the research is just not there” (IADLEST, n.d., IACP, n.d.).

In Canada, the research record is just as thin. While most agencies use unique approaches in responding to mental health calls, such as the Kingston Police Service, Barrie Police Service, and Hamilton Police Service, which implement both the MCRRT and the Crisis Outreach and Support Team (C.O.A.S.T.) models, these models are not implemented consistently across Canadian law enforcement agencies. The MCCRT pairs a police officer with a mental health professional, and together this team responds to emergencies called in to local police forces, while C.O.A.S.T. officers follow-up on mental health-related calls for service after front-line officers have responded to and resolved the emergency. Officers who are part of C.O.A.S.T. ensure the person in distress is connected to mental health resources. However, the success of these models varies from service to service, as each agency applies a slightly different variation of the MCRRT and C.O.A.S.T. models. Furthermore, agencies are not mandated to have a mobile crisis team or a C.O.A.S.T. team. Therefore, some services use front-line officers, who are not well equipped to respond to and de-escalate mental health crises. Similar to the United States, there is a dearth of any published research that specifies how many hours, if any, each Canadian police agency dedicates to mental health and de-escalation training. There is also a lack of research on the effectiveness of mental health and de-escalation training, which makes it nearly impossible to train officers from an evidence-based perspective.

Considering that mental health calls make up a large percentage of the calls for service, and that over 75% of police-involved civilian fatalities in Canada involve a person who

is experiencing a mental health crisis and/or is also under the influence of a substance, it is unclear why there appears to be minimal mental health and de-escalation training for officers (Nicholson & Marcoux, 2018). Further, it is unknown why there is a lack of research to address this contradiction. Law enforcement agencies train from an enforcement approach which prioritizes proficient use of weapons. Within Ontario, training in baton strikes, hands-on combat, the use of oleoresin capsicum (OC) spray, and firearms use are all mandated by the Ministry of the Solicitor General through the Policing Standards Manual. The Manual does not mandate training hours for conflict resolution, de-escalation, and crisis intervention. It seems logical that officers would resort to their weapons when responding to high-stress situations, given that this is their training. This contradiction in the skills mandated by the government and the actual duties of a police officer should be further explored by asking the following key questions: Does law enforcement devote enough time to de-escalation training? Why does law enforcement continue to endorse use of force over de-escalation? What approaches in de-escalation training are promising? What is missing?

### Systemic/Structural Considerations

Canadian law enforcement is regulated and mandated by provincial legislation and authority, which in theory oversee policing. Police forces are governed by provincial legislation, including the Police Services Act (in Ontario and Manitoba) and similar legislation in other provinces. Governing bodies specify how many hours of training each law enforcement agency must dedicate to specific skills and abilities. De-escalation, conflict resolution, and mediation are devalued, failing to garner appreciation and attention comparable with tactical and combative skills. Herein lies part of the issue: law enforcement agencies are not mandated to offer or evaluate mental health and de-escalation training.

The culture, organization, and structure of policing, including officer training and education, can be understood through a critical, historical, and structural lens. Policing began as a means to protect colonized land that was forcibly taken and occupied by European settlers (Nettelbeck & Smandych, 2010). Through the establishment of the North-West Mounted Police (NWMP), conquered land was subsequently protected by the frontier police, who forcibly implemented law to protect the settlement schemes of European settlers (Nettelbeck & Smandych, 2010). The NWMP was a paramilitary force that recruited officers with a military background (Nettelbeck & Smandych, 2010). The relationship between the NWMP and Canada’s First Nations and Métis peoples was one of mistrust and mistreatment at the hands of NWMP, “who viewed Indigenous peoples as inferior” (Nettelbeck & Smandych, 2010). Policing and security continue to value this paramilitary enforcement model by continuing to endorse use of force over de-escalation, conflict resolution, and crisis intervention. Officers are trained in a very traditional manner, oriented towards the legitimate “use of force,” most of the training focusing on efficient use of weapons (Fielding, 2002).

Within Ontario, the Ministry of the Solicitor General perpetuates this paramilitary model, mandating agencies to meet specific and sometimes impractical training requirements (CANSEBP, 2020). The Ministry, the overarching



governmental body in Ontario, imposes training requirements in collaboration with the Police Service Boards. The Policing Standards Manual directs law enforcement agencies to dedicate a certain number of training hours to baton strikes, oleoresin capsicum spray, and firearms (CANSEBP, 2020), requiring a minimum number of training hours dedicated to firearm requalification annually (Ontario Ministry of the Solicitor General, 2000). Yet they do not enforce, review, or evaluate de-escalation and conflict resolution training across Ontario (CANSEBP, 2020).

### Questions that Remain

Research within policing is needed, specifically around officers' approach to de-escalation, conflict resolution, and mental health training so that law enforcement agencies can train officers in the response to mental health crises from an evidence-based perspective. While there is some research on the MCRRT and CIT, much of it is outdated. This begs the question, are law enforcement agencies reluctant to work with academic researchers? If so, why have agencies not been compelled to collaborate with academic scholars by the Ministries who oversee policing? Police services trained from an evidence-based perspective could perform optimally, and agencies' practice could be informed by collaboration with academic researchers.

Research has concluded that force is minimally used by officers, with "use of force" making up roughly 2% of all interactions (Government of Canada, 2015). Why does the Ministry of the Solicitor General then continue to emphasize use of force training? Are these standards informed by research? How can officers who are trained from a use-of-force perspective, as opposed to a de-escalation approach, have the skills to effectively de-escalate when called to do so?

### CONCLUSION

There is a contradiction within policing, one that explains the current political and social climate around police officers addressing and responding to mental health calls. The lack of de-escalation, conflict resolution, and crisis intervention training for officers, coupled with a lack of research that evaluates the effectiveness of the training, contributes to the poor responses led by police and the current pressures facing law enforcement. As this impacts policing on a national level, the burden of overcoming this shortfall should not be placed solely on the agencies themselves, but on the regulating governing bodies that are expected to mandate and oversee policing. Officers have never claimed to be mental health professionals; they have been forced into a position of responding to mental health crises due to a lack of resources and responses to mental health. While it is certainly vital to train officers on use of force, it is arguably more important to train them on de-escalation, conflict resolution, and crisis intervention as it is more pertinent to their daily responsibilities as officers.

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### CONFLICT OF INTEREST DISCLOSURES

The author has no conflicts of interest to declare.

### AUTHOR AFFILIATIONS

\* Department of Social Work, Carleton University, Ottawa, ON, Canada.

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# Building trust in modern day policing: A neighbourhood community officer evaluation

Robert Blauer,\* Samnit Mehmi,\* and Kathryn de Gannes\*

## ABSTRACT

Over the past several years the Toronto Police Service has engaged in forming partnerships with communities that have been plagued with high crime rates and have traditionally not trusted the police through the implementation of The Neighbourhood Community Officer Program. The program places Neighbourhood Community Officers in the community for three to five years with a strict mandate to build trust through professionalism, cooperation, and partnerships with community members. Prior research on the program displayed that it was achieving most of its mandate. To determine whether it was still enjoying success, a thematic analysis was conducted on interviews with social agencies that worked with Neighbourhood Community Officers and social agencies that did not.

## INTRODUCTION\*

Recent media releases have reported on an apparent distrust between the Toronto Police Service (TPS) and members of minority groups, which is hindering police legitimacy for the TPS (Gillis & Rankin, 2019). This seemingly growing disconnect has been accompanied by a wave of violent crime that has plagued the city and has left Torontonians asking whether the TPS really can help curb the violence (Gillis & Pagliaro, 2019). In order to overcome the issues that have been plaguing Toronto's communities, the TPS understood that it had to develop more proactive partnerships with community members and social agencies under the guise of community policing's (CP's) components (Drummond, 2018). This would allow all stakeholders to engage in problem-solving techniques to address crime and victimization within their neighbourhoods while working efficiently together and enhancing police legitimacy (Quinton & Tuffin, 2007).

The TPS introduced the Neighbourhood Community Officer Program (NCOP) in 2013 to specific neighbourhoods in Toronto where trust and partnership between the police and community have been lacking. The TPS assigned Neighbourhood Community Officers (NCOs) to specific neighbourhoods for a period of up to two years, their main

objectives being to increase trust between residents and themselves, reduce crime, gain insight into community needs, and work on improving intelligence about local crime in those communities (Webber et al., 2017). The NCOs were selected based on performance evaluations, knowledge of and involvement in community issues, and strong interpersonal and conflict resolution skills (Webber et al., 2017). Strained relations have meant that NCOs have had to remain patient and engage in innovative strategies to build trust between themselves and the community to enhance their mandate all while reports surfaced that put the TPS's legitimacy into question (Hayes, 2018).

## Literature Review

Traditionally, not all members of society perceive their police services as having legitimacy, even when the philosophy and components of CP are used (Rukus et al., 2018). In order to gauge Torontonians' perceptions of the TPS's legitimacy, the Toronto Police Services Board (TPSB) conducted a quantitative study in 2019 to measure community members' perception of the TPS's legitimacy. Participants were asked about interactions they have had with the TPS and whether they believed those officers engaged in professional and/or biased conduct. Of the participants surveyed, an overwhelming percentage of visible minorities believed police officers had discriminated against them in the past through police interactions and that TPS officers could do more to engage with community members (Fearon & Farrell, 2019). Moreover, a survey conducted in 2017 found that African

\* This study is only a small sample of the research that was obtained from the many communities in the City of Toronto. The data researched was highlighted using four social agency perspectives and the conclusions presented may not reveal the full extent of the study just by the evident analysis in this article.

Correspondence to: Samnit Mehmi, 3199 Lake Shore Blvd W, Social and Community Services, Humber College, Etobicoke, ON M8V 1K8, Canada.  
E-mail: HTanalysis10@gmail.com

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Canadian males living in disadvantaged neighbourhoods in the City of Toronto were disproportionately stopped in public by the TPS on pretext of carding, accounting for nearly 80% of these stops (Breen, 2017). This was at a time when the TPS was heavily using carding practices in low-income communities while treating individuals with a micro-aggressive attitude, including following them, treating them with rudeness and suspicion, and threatening them (Breen, 2017). Owusu-Bempah (2014) suggests that African Canadian males view the TPS as a discriminatory police service, and that interactions with police officers escalate into hostile encounters because individuals are stopped for no reason other than their skin tone.

Community responses have shown that NCOs are able to lower the fear of crime and contribute to residents' feelings of safety and security by helping increase community cohesion (Webber *et al.*, 2017). The positive results generated by the NCOP in at-risk communities predominantly made up of visible minorities are at odds with the TPSB's findings, which suggest that its officers could do more to engage with the same population. The TPSB survey may not represent an accurate picture of visible minorities' and residents of disadvantaged communities' perceptions of TPS officers. But the continuing poor relationship between visible minorities and the TPS reported in the media raises the question of whether NCOs can positively influence the relationship between themselves and the agencies they work with.

## PURPOSE

The purpose of this study was to evaluate whether the NCOP is still continuing to work under its main mandate to help increase police legitimacy for the TPS while building on the research that has already been conducted on the NCOP. Two social agencies that work closely with NCOs were chosen as the sample population to be interviewed. An additional two agencies that do not work with NCOs were interviewed as a control population. The sets of interviews were then compared using a thematic analysis to help determine codes and themes that would provide insight into whether the NCOP was still functioning positively. During the interviews, the old terms Neighbourhood Policing Program (NPP) and Neighbourhood Officer (NO) were used rather than the new terms such as Neighbourhood Community Policing Program (NCOP) and Neighbourhood Community Officer (NCO) as they were thought to be more familiar. The neighbourhoods where the agencies in this study are situated were selected based on numerous variables, such as the level of poverty among the community, neighbourhood crime rate patterns, and ethnographic makeups. This would substantiate the NCOP's success in helping lower crime rates in neighbourhoods traditionally been plagued by crime. The demographics were also used as an overlay to understand the makeup of visible minorities living in neighbourhoods where the NCOP has been implemented to determine whether previous research contradicts how visible minorities feel towards officers with whom they have frequent contact.

## Theoretical Framework

The theory of community policing and its principles guided our research. The theory has its roots in the 1820s

in London, England, when Sir Robert Peel established England's first modern police service (Griffiths, 2016). Peel's mandate under CP was to create a perception that the community and police rely equally on each other (Webber *et al.*, 2017). Community policing is based on three essential components: community partnerships, problem-solving, and organizational transformation (Webber *et al.*, 2017). These have led to CP being defined as a philosophy, management style, and an organizational strategy that allows the police to deliver their services by engaging in partnerships with agencies and community members to help address the root causes of crime and social disorder (Gill *et al.*, 2014). This concept of CP helps bring the police closer to the public, helping them get to know their communities' concerns and be able to apply the proper resources to each problem. All stakeholders therefore become problem solvers, which should eventually lead to a decline in resistance towards the police (Fielding, 2005).

Although the definition of CP is reasonably understandable, its mantra has been critiqued by different police services and gone through numerous phases to be more in line with their attitudes and ethos. This makes the foundations of CP open to interpretation and difficult to measure (Griffiths, 2016). The difference between the police's and the community's perceptions of community issues is a frustrating barrier when trying to test for positive impacts towards the effect of CP initiatives (Stein & Griffith, 2017). Community policing has been implemented inconsistently across police jurisdictions, making it difficult to determine whether community partnerships and problem-solving are working effectively.

Fielding, a community theorist, believes that empirical findings have shown CP to be problematic in high-crime and high-deprivation areas. Fielding suggests that mistrust and strained relations between the police and members of those communities make it difficult for CP's tenets to thrive in those neighbourhoods (Stein & Griffith, 2017; Fielding, 2005). High-crime and high-deprivation neighbourhoods have traditionally been made up of visible minorities in western countries, leading to outsider perceptions that the members of the community themselves are problematic (Drummond, 2018; Adedoyin *et al.*, 2019). Community policing was not designed to create proactive partnerships between the police and one specific group, but rather to help all racial, ethnic, religious, and cultural groups that traditionally have or do not have a positive relationship with the police (Rukus *et al.*, 2018). It allows all individuals in the community to acquire a sense of power and helps build a perception of police legitimacy and trust in the police service (Rukus *et al.*, 2018).

Fielding's belief is problematic because CP should be able to contribute the most to high-crime and deprived areas but is being impeded by mistrust and strained relations. The implementation of new strategies requires the contribution of community members but community police officers need to take the lead on program implementation to achieve the success. In order to do so, they first need to gain the trust of members of the community (Stein & Griffith, 2017). We hypothesize that the interviews with participants from agencies that work closely with NCOs will touch on the components of CP that NCOs are using to help build trust

and cooperation between community members and social agencies, while those components of CP will be absent from the interviews with those who do not work with NCOs and may at times have had to deal with TPS patrol officers.

## METHODOLOGY

The research method used was a set of four interviews with an embedded thematic analysis. The unit of analysis was the NCOP in Toronto, Ontario, and the research question was “To what extent have NCOs influenced the relationship between themselves and their communities through the agencies they work with?” In order to evaluate how well the NCOs were doing, members of two agencies (*Agency #1*: Homes First Kennedy Women’s Shelter, and *Agency #2*: Agincourt Community Services Association) that work closely with NCOs and two agencies (*Agency #3*: Westway Christian Church, and *Agency #4*: Montgomery Inn) that did not work with any NCOs were interviewed. Three propositions potentially surfaced from the interviews: 1) agencies that work with NCOs will have a more positive outlook of the NCOP and the TPS; 2) Agencies that do not work with NCOs will have less of a positive outlook of the NCOP and TPS; 3) NCOs help create more proactive partnerships built on trust between the TPS and the communities they work in.

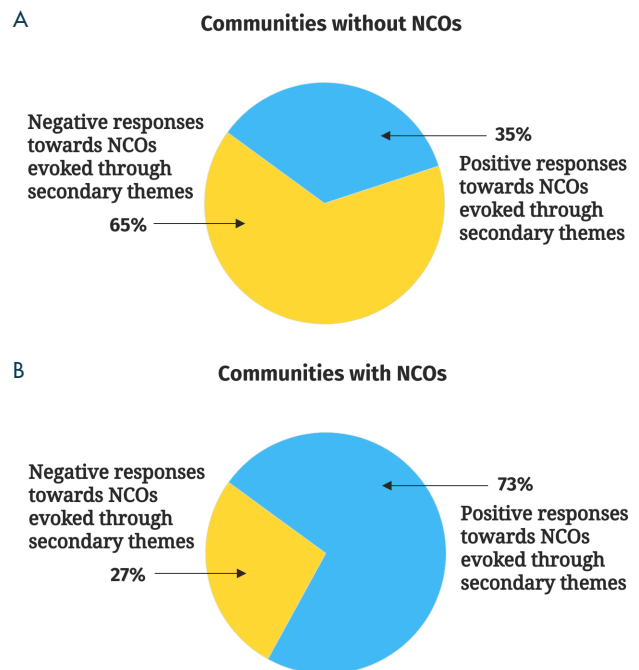
Once all four interviews were coded, the framework analysis was used to undertake a thematic analysis of each transcript to determine relevant details, the type of language, and common themes used by the interviewees. Two of CP’s essential components (community partnerships and problem-solving) along with public views of the police (public satisfaction and police legitimacy) provided the theoretical framework for the thematic analysis, while the three propositions outlined above aided in the development and identification of major themes and sub-themes during primary coding. Primary themes were initiated through the agency correspondent’s responses as either positive or negative, allowing their responses to be specified under labeled categories, which then helped lead to the formation of the secondary codes. The secondary themes were formed not through positive or negative responses but the number of times specific words and titles were used. Once the secondary themes were established, positive and negative responses from initial coding were brought back into the theme-evoking process to determine the primary themes of the thematic analysis. The thematic framework presented two distinctive themes based on the positive and negative codes that emerged from seven different secondary themes. See Figures 1 and 2 below.

## RESULTS

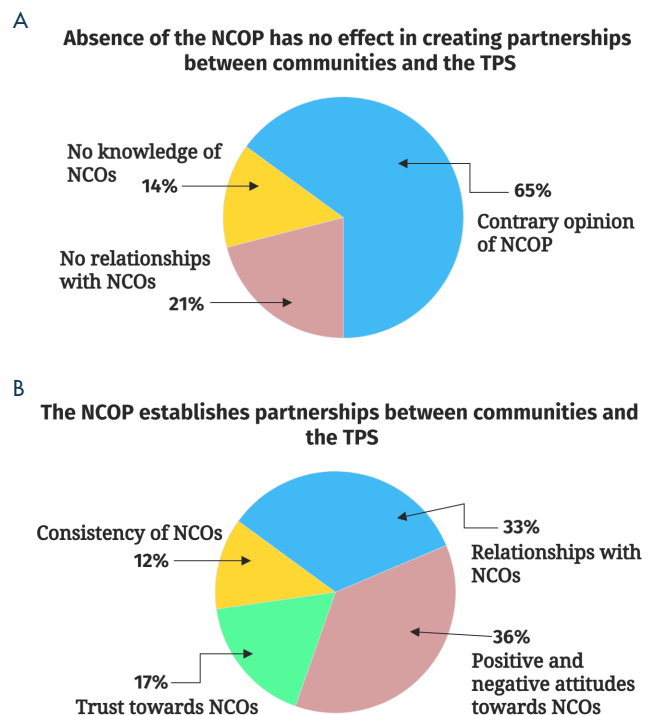
The results were assessed using subjective data analysis. The following are some of the abbreviated highlights of this study and, on their own, may not reveal the full extent of the study and analysis conducted.

### Agencies that Work with NCOs

The data in Figure 2A supports the first and third propositions that guide this study. Consistent across both interviews was that NCOs helped establish partnerships between



**FIGURE 1** Primary themes evoked across secondary themes through positive and negative responses of the NCOP. A) Primary Theme 1: The NCOP establishes partnerships between communities and the TPS. B) Primary Theme 2: The absence of the NCOP has no effect in creating partnerships between communities and the TPS. NCO = Neighbourhood Community Officer; NCOP = Neighbourhood Community Officer Program; TPS = Toronto Police Service.



**FIGURE 2** Secondary themes evoked through interview responses. NCOP = Neighbourhood Community Officer Program; TPS = Toronto Police Service; NCO = Neighbourhood Community Officer.



their communities and the TPS. Agency correspondents referred to how strongly NCOs were committed to forming relationships with different types of community members using different strategies for each group, allowing the NCOs to remain consistent while building partnerships in the community: “NCOs take initiative to make sure that relationships are built with other members and partners of the community” (Agency #1); “NCOs also remained in contact and involved” (Agency #1); “NCOs are consistent and involved with community support and other initiatives” (Agency #2).

Interviewees also made reference to the trust that has been established between the community and NCOs, which has helped form positive attitudes towards NCOs on the part of community members: “NCOs approach with a friendly motion to create comfort with a client” (Agency #1); “Community members trust NCOs with information as opposed to other officers” (Agency #2); “Trust is limited to only those involved with the agency, which includes NCOs” (Agency #1); “NCOs are viewed through a different lens because of their relationships with community members compared to regular police officers” (Agency #2). While a high percentage of responses were considered positive, 27% of excerpts were framed as negative responses. Most of these revealed suggestions regarding what the NCOP can do better, for example, “Training in trauma, mental health and dealing with LGBTQ2+ [is required] for NCOs” (Agency #1); “NCOs do not work at night and most crimes occur late in the night” (Agency #2); “Visibility of recognizing an NCO is an issue” (Agency #1).

### Agencies that Do Not Work with NCOs

The datasets from agencies that do not work with NCOs were inconsistent in terms of secondary themes and the number of responses being framed as negative or positive. The figures surrounding the makeup of primary and secondary themes regarding agencies that do not work with NCOs supports the second proposition guiding this study to a certain extent. Consistent across both interviews was that there were contrary opinions about whether the NCOP could help each agency’s community if it were to be implemented. Both interviews referred to the issues that might arise and gains that would result if the NCOP were to be implemented in their community. This led to contrary opinions regarding the NCOP and NCOs: “The NCOP could have a negative outlook on the community by hinting that there may be a problem in the community when in fact there is not” (Agency #4); “I believe that having NCOs can cause more damage than good but probably won’t make a difference in the end” (Agency #3); “Seniors that come to the agency place a majority of trust in police” (Agency #4); “No need for a program like the NCOP in the community due to low levels of crime” (Agency #4).

Furthermore, each agency mentioned having no prior knowledge of the NCOP preceding the interview: “I had no idea there was one” (Agency #3); “I was not aware that there was a particular and specific neighbourhood officer program” (Agency #4). The lack of knowledge regarding the NCOP led to there being no relationship with NCOs. About a third (35%) of excerpts were framed as positive even though these agencies have had no contact with NCOs. Like those

of agencies that work with NCOs, most of these excerpts included suggestions regarding what the NCOP could do if it were to be implemented in their communities: “Would help certain groups in the area who are fearful of crime rates going up, and having NCOs around would help lower some community perceptions of being victimized” (Agency #4); “NCOs would help teach children that the police are on their side” (Agency #3). These quotes indicated that both agency correspondents did believe that there is always a benefit that their community can derive from the NCOP.

## DISCUSSION

The responses from participants in this study help increase the TPS’s legitimacy in areas where the NCOP is being implemented and show that the NCOP has the ability to frame NCOs as more than just authority figures. These officers appear to be making some notable strides with agencies in regard to building relationships, which then make problem-solving easier with community members’ support. This study showcases that the TPS has acknowledged and accepted that there are issues between themselves and specific communities that need to be addressed and properly solved without resorting to the band-aid approach whereby the police look at the problem from the outside without addressing the underlying causes of the issue (Addeo, 2019).

The results drawn from this study’s thematic analysis supported propositions one and three, and slightly supported proposition two. In support of propositions one and three, it was reported that in communities where the NCOP is implemented, NCOs were patient and used their strong interpersonal and conflict resolution skills to help agencies and members of the community begin to trust them. According to the agencies that work with NCOs, this tactic was very successful because it gave community members a chance to slowly build their trust in the NCOs. Agencies that work with NCOs believed that when NCOs remained patient and worked on gaining community trust, it allowed the NCOs to gain knowledge of community issues and increase their involvement. When NCOs used their time wisely by getting to know the issues before establishing trust, they were able to attend to calls with prior knowledge of the issues they could face at each call. This approach created partnerships built on trust between community members, social agencies, and NCOs, which, in turn, led to agencies and community members having a more positive opinion of the NCOP and the TPS. This was possible because agencies and community members began to perceive the NCOP as a strategy designed to help build trust, create partnerships, and problem solve in areas that have for so long been lacking. The professionalism and highly skilled qualities that NCOs brought to the community may have contributed to the perceptions of community members that not all TPS officers and personnel should be painted with the same brush when negative encounters surface.

Proposition two of this study was only slightly supported due to the fact that the correspondents for agencies that did not work with NCOs had not heard of the NCOP. Each correspondent believed that implementing the NCOP into their neighbourhoods would be problematic due to the low levels of crime in their specific areas. The presence

of an NCO would either leave their clients with a perception that there is a problem in the community or just be a waste of resources. However, it was also found that each agency believed that there was a group that would benefit from the presence of an NCO, such as children or seniors.

## CONCLUSION

The empirical research conducted in this study suggests that the NCOP should be used where it is needed the most and that resources for the NCOP should not be allocated to neighbourhoods that may not benefit from it, demonstrating the necessity of allocating police resources responsibly.

The TPS is helping empower communities to take back control of their neighbourhoods by supporting the NCOP's mandate. Moreover, it may also be helping visible minorities in those communities gain a better understanding of the TPS's mission, vision, and core values, thereby slowly gaining their trust. Toronto Police Service managers have been able to strategically implement the NCOP in neighbourhoods where it is needed the most, in communities that have been plagued by high crime rates and have traditionally had a bitter relationship with the TPS. In an era where credibility is lacking, the NCOP may well be humanizing the badge, which will not only help make the TPS more professional and trustworthy, but will also help the police gain greater legitimacy in the eyes of all Torontonians.

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## CONFLICT OF INTEREST DISCLOSURES

The authors declare that there are no conflicts of interest.

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\* Social and Community Services, Humber College, Etobicoke, ON, Canada.

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# Systemic Discrimination in Policing: Four Key Factors to Address

Rajnish R. Saini\*

## ABSTRACT

Canada's demographic landscape is comprised of a breadth of cultures and religious beliefs, racialized groups, Indigenous persons, and genders and sexual orientations. In contrast, the demographic composition of many police services in Canada does not reflect the communities they serve. While efforts of police services across Canada to diversify have led to a proliferation of racial minorities, women, and Indigenous persons gaining employment within police organizations, serious obstacles of exclusion, racism, and discrimination remain. This paper will critically analyze four factors that accentuate and contribute to systemic discrimination in policing and provide recommendations to identify, mitigate, and address this issue.

**Key Words** Police; racism; exclusion; diversity; occupational segregation.

## SYSTEMIC DISCRIMINATION IN POLICING

The demographic composition of many police services in Canada, traditionally comprised of Caucasian males, does not reflect the communities they serve (Jain et al., 2000). Recent diversity efforts have culminated in a significant number and percentage of police services hiring women, Indigenous persons, and members of racialized and cultural minority groups (Niemi, 2004; Jain et al., 2000). However, well-established concepts rooted in our colonial history, integrated into our legislation, maintained in our institutional practices, and enabled in our organizational culture create serious barriers of exclusion, racism, and discrimination amongst police services in Canada (Sloly, 2020). This paper will critically analyze four factors that accentuate and contribute to systemic discrimination in policing: (1) diversity concentrated at the constabulary level, (2) occupational segregation, (3) racial harassment, and (4) supervisor evaluation. Furthermore, recommendations will be provided to identify, mitigate, and address systemic discrimination in policing.

Canada's demographic landscape is comprised of a breadth of cultures and religious beliefs, racialized groups, Indigenous persons, and genders and sexual orientations (Szeto, 2014). As a result, police services attempt to diversify in response to the changing social milieu by implementing internal policies and creating government initiatives such as

the *Employment Equity Act, 1995* (Szeto, 2014). For instance, in 1988, a Sikh Indo-Canadian named Baltej Singh Dhillon applied to the Royal Canadian Mounted Police (RCMP) as a police constable and was denied because the dress code forbade beards and the wearing of turbans in place of the uniform hat (Baker, 2019). Dhillon appealed the decision to the RCMP Commissioner, who in turn made a recommendation to the federal government to remove the banning of beards and turbans in the interest of diversification (Baker, 2019). This proposed reform incited acrimony across Canada, as over 90,000 Canadians signed petitions against allowing turbans to be worn in the RCMP, while certain businesses profited by promoting anti-turban pins (Figure 1) or calendars satirizing uniform changes (CBC, 2017; Baker, 2019). Even after becoming a full-time RCMP member once the dress-code changes were announced by the government, Dhillon received death threats from the public and was ostracized within the police service (CBC, 2017; Baker, 2019). To illustrate the systemic discriminatory practices of police services, the exemption for hijabs was not implemented in the RCMP until 2016 (CBC, 2017). These systemic discriminatory practices are evidently still espoused in the Brantford Police Service, which has no policy to address turbans or any accommodation for members' religious observances.

While diversification efforts of police services across Canada have led to a proliferation of racial minorities, women, and Indigenous persons gaining employment within police

**Correspondence to:** Rajnish R. Saini, School of Graduate Studies, Wilfrid Laurier University, 23 Webb Avenue, Brantford, ON N3T 6S5, Canada.  
**E-mail:** rajsaini911@hotmail.com

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organizations, serious obstacles of exclusion, racism, and discrimination remain (Szeto, 2014; Jain et al., 2000). The aforementioned barriers accentuate systemic discrimination, which is defined as “behavioural trends, policies or procedures that are part of the structures of an organization, and which create or perpetuate disadvantage for racialized persons” (Ontario Human Rights Commission, n.d, para. 2). The following four factors accentuate and contribute to systemic discrimination in policing: (1) diversity concentrated at the constabulary level, (2) occupational segregation, (3) racial harassment, and (4) supervisor evaluation (Niemi, 2004).

### DIVERSITY CONCENTRATED AT THE CONSTABULARY LEVEL

Fundamentally, the Vertical Mosaic conveys that Canada is a mosaic of different races, ethnicities, languages, and religious groupings which are unequal in status and power (Helmets-Hayes, 2019). According to the Vertical Mosaic, those in elite positions exercise influence over all domains of society (Inwood, 1999). A racially vertical mosaic consisting of a “Caucasian male culture” exists in a plethora of police services despite two decades of employment equity (Jain et al., 2000, p. 68). This vertical mosaic is exemplified in many police services as recruitment and selection focus on hiring members with diverse backgrounds for entry-level police constable positions (Niemi, 2004).

Consequently, many police services are negligent in diversifying all organizational levels, including the civilian



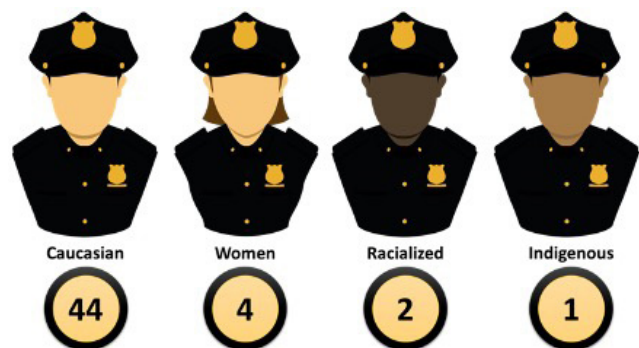
**FIGURE 1** Keep the RCMP Canadian Pin Sold in 1989. This image of the pin was being sold to many Canadians when Baltej Singh Dhillon attempted to appeal his decision to become a member of the RCMP in 1989. Adapted from “Controversial Canada RCMP No Sikh Pin Keep Canadian Silver Coloured Backing” by Redmoongifts, 2020 (<https://www.ebay.com/itm/Controversial-Canada-RCMP-No-Sikh-Pin-Keep-Canadian-Silver-coloured-backing-/193407724078>). In the public domain.

ranks. For instance, Ontario has 51 police services, and analysis reveals that there are 44 male Caucasian police chiefs, four female police chiefs, two police chiefs from racialized minority groups, and one police chief who identifies as an Indigenous person (Ministry of the Solicitor General, 2019; Ontario Association of Chiefs of Police, 2020) (Figure 2). This blatantly illustrates the racially vertical mosaic consisting of a “Caucasian male culture” in policing (Jain et al., 2000, p. 68).

The recent appointment of the Chief of Police for the newly created Surrey Police Service in British Columbia exacerbates the racially vertical mosaic that has been prevalent in policing for decades. The City of Surrey has a population base that is largely composed of racialized minority groups, and the appointment of a male Caucasian Police Chief may contribute to mistrust within the community (Stewart & Azpiri, 2020; Statistics Canada, 2019a). This recent hiring indicates that the glass ceiling is thick for racialized police officers wishing to gain employment in senior management positions within policing (Stewart & Azpiri, 2020).

### OCCUPATIONAL SEGREGATION

In policing, women, racialized minority groups, and Indigenous persons are primarily concentrated at the constable level (Niemi, 2004; Conor et al., 2020). Efforts at diversification in policing often ignore career progression and promotional strategies, perpetuating occupational segregation (Rigaux, 2018). The low representation of women, racialized minority groups, and Indigenous persons in specialized units and high-ranking positions within the police service creates a climate that hinders professional mobility while promulgating the male Caucasian perspective (Jain et al., 2000). Furthermore, it fails to provide role models for young people from diverse groups within and outside the police organization (Canadian Centre for Diversity and Inclusion, 2019). An example of occupational segregation occurred in 2013, when Staff Sergeant Baljiwan Sandhu entered the promotional process for the rank of inspector with the Peel Regional Police Service. He was one of 33 applicants seeking promotion to the rank of inspector. Sandhu’s cultural and linguistic skills resulted in his superiors routinely seconding him for assignments involving the South Asian community (Grewal & Rankin, 2017). While these skills were



**FIGURE 2** Demographics of Chiefs of Police in Ontario. This infographic illustrates the demographic composition of police chiefs in the province of Ontario for 51 police services. Created by Raj Saini, 2020.



considered an asset to promote diversity, Sandhu was denied the promotion because, according to senior officers, he lacked the frontline supervisory experience to become an inspector (Grewal & Rankin, 2017).

## RACIAL HARASSMENT

Many police officers representing Indigenous persons and racialized minority groups experience implicitly or explicitly offensive jokes, insults, and other acts of degradation (Rigaux, 2018; Bureau, 2019). *Ontario Regulation 268/10 – Police Service Act of Ontario* delineates a code of conduct that all police officers in Ontario must adhere to (Government of Ontario, 2018). In the code of conduct, all police officers are to “treat or protect persons equally without discrimination with respect to police services because of race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, marital status, family status or disability” (Government of Ontario, 2018, p. 10). For fear of being alienated, ostracized, and committing so-called “career suicide,” many minority group police officers simply disregard and tolerate racial harassment (Carpenter, 2020). Such was the case for Staff Sergeant Baljiwan Sandhu of Peel Regional Police Service and Inspector Baltej Singh Dhillon of the RCMP. They were subjected to racially derogatory comments and insults throughout their respective careers (Baker, 2019; Grewal & Rankin, 2017).

Sandhu listed examples of alleged discrimination that he faced when he started his career. These included:

- Officers mimicked his accent. “It reached the point where I felt like I was an ethnic punching bag, yet I soldiered on,” he said in his complaint.
- He once walked into a packed gym at police headquarters, and someone shouted: “Hey, no one called a cab!” Sandhu said the room “erupted with laughter,” which he found distressing but “forced” himself to “laugh” and to “endure” the “blatant racial slur.” (Mall, 2017, para. 5–7)

## SUPERVISOR EVALUATION

The traditional performance appraisal method creates obstacles for the professional mobility of women, Indigenous persons, and racialized minority police officers (Oliver, 2017). The prerequisite of positive assessment or approval from one’s supervisor becomes one of the most formidable barriers to equal representation in police services’ upper echelons (Niemi, 2004). A Caucasian male perspective may often operate at the exclusion of police officers who are women, Indigenous persons, and members of racialized minority groups (Jain et al., 2000). A supervisor’s opinion about a candidate for promotion can be fraught with arbitrariness and racial bias (Niemi, 2004). An example of this occurred in the Ottawa Police Service, when Inspector Samir Bhatnagar entered the promotional process in 2012 for the rank of Superintendent. He successfully entered the candidate pool, scoring the highest mark, but was overlooked for promotion. Ultimately, the chief, deputy police chiefs, and civilian director decide who is promoted, based on several factors that include “trust, ability to support the executive, fit, and needs of the organization” (Yogaretnam, 2018, para. 15). Bhatnagar alleges he was denied a promotion because the Chief

of Police and members of the senior executive subjected him to differential and disproportionate treatment because he was a “brown-skinned man of East Indian origin” (Yogaretnam, 2018, para. 4).

Despite all the rhetoric of inclusion and recruitment from visible minority communities, the Ottawa Police Service does not have a single officer of colour at the rank of Superintendent or above, and there has only been one in the entire 150-year history of the service. (Yogaretnam, 2018, para. 5)

Since Inspector Samir Bhatnagar’s complaint to the Human Rights Tribunal in 2017, the Ottawa Police Service named Peter Sloy as the new Chief of Police in October of 2019 and Uday Jaswal as Deputy Chief of Police in September of 2018, both of whom represent racialized groups (Ottawa Police Service, 2021; Britneff, 2018).

## RECOMMENDATIONS

This section discusses recommendations to mitigate and manage factors that contribute to systemic discrimination in policing. Assessing and tackling systemic discrimination can be complex. One of the first steps is that police services need to be aware that the current methods and practices adversely affect women, racialized groups, and Indigenous persons (Ontario Human Rights Commission, n.d.). The following three factors can be used to identify, mitigate, and address systemic discrimination in policing: (1) policies, practices, and decision-making processes, (2) statistical data, and (3) organizational culture (Ontario Human Rights Commission, n.d.).

### Policies, Practices, and Decision-Making Processes

Policies, practices, and decision-making processes within police organizations can create serious barriers of exclusion, racism, and discrimination for women, Indigenous persons, and racialized minority police officers (Ontario Human Rights Commission, n.d.). In most circumstances, the design and implementation of policies, practices, and decision-making processes do not account for individual differences and are based on the dominant culture, which is the male Caucasian perspective, as the norm (Ontario Human Rights Commission, n.d.). This was epitomized in a recent incident where the RCMP reassigned several frontline Sikh and Muslim officers who had unshorn facial hair for religious reasons (CBC News, 2020). During the COVID-19 pandemic, RCMP policy required officers to be clean-shaven to ensure a proper fit of N95 respirators (CBC News, 2020). The use of the dominant culture as the norm is reflected in the design and implementation of this policy, practice, and decision-making process. To eliminate subjective considerations, differing standards and biases, police services need to include women, Indigenous persons, and members of racialized minority groups in the decision-making processes for designing and implementing policies and practices.

### Statistical Data

Collecting and analyzing statistical data can provide police services information regarding the management of women,

Indigenous persons, and racialized minority groups within the police service (Ontario Human Rights Commission, n.d.; Sloly, 2020). The use of disaggregated data can illustrate the representation of women, Indigenous persons, and members of racialized groups within a police service and those in positions of leadership (Ontario Human Rights Commission, n.d.; Sloly, 2020).

For instance, nationally, four percent of police officers identify as Indigenous persons, while eight percent of police officers identify as belonging to a visible minority group, and women account for twenty-two percent of all police officers (Conor et al., 2020). However, in the Brantford Police Service (Figure 3), four percent of officers identify as Indigenous persons, while five percent of officers identify belonging to a racialized minority group, and women account for sixteen percent of all police officers (Brantford Police, 2020). Based on this data, the Brantford Police Service is well below the national average in hiring women and racialized minority groups for the role of police officer (Statistics Canada, 2019b). Statistical data can be used to assist in defining recruitment, selection, and promotion strategies to increase diversity within all regions and at all levels.

### Organizational Culture

Organizational culture is conventionally defined as the “ensemble of beliefs, assumptions, values, norms, artifacts, symbols, actions, and language patterns shared by all members of an organization” (Huff, 2014, para. 1). The basic underlying assumptions of police organizational culture reflect a traditionalist, Caucasian male-dominated,

paramilitary hierarchical structure governed by formal rules, regulations, procedures, and operational protocols (Batts et al., 2012). Forbidding beards and turbans in the RCMP and relegating Sikh and Muslim officers who have facial hair for religious reasons to administrative duties are examples of an organizational police culture that perpetuates systemic discrimination (Baker, 2019; CBC News, 2020). Despite the diversification of police services, aspects of the traditional police culture remain entrenched and can marginalize or alienate racialized persons (Ontario Human Rights Commission, n.d.).

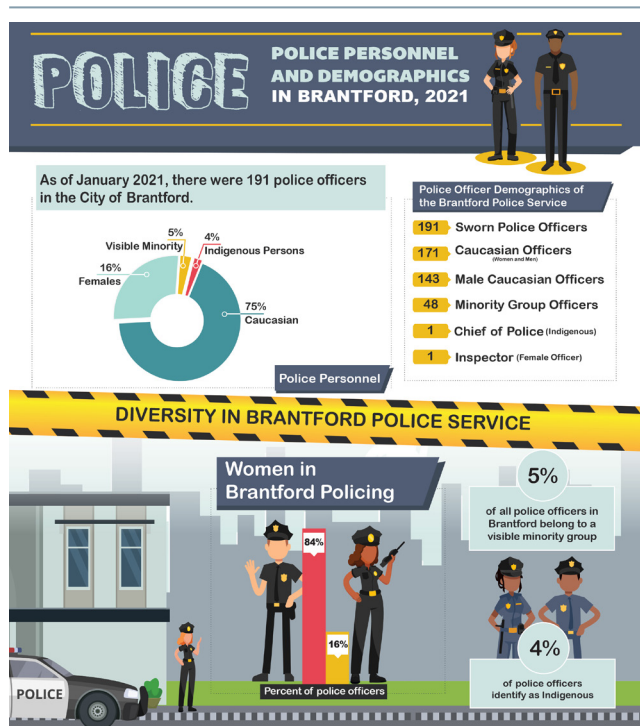
Police services have to ensure that they do not unconsciously engage in systemic discrimination by using the dominant culture as the norm. This takes vigilance and a willingness to monitor and review statistical data, policies, practices and decision-making processes (Ontario Human Rights Commission, n.d.). For instance, the development of a promotional or interview panel that is diverse, reflecting differences of both gender and race, is a trifling implementation but can profoundly affect the organizational culture of a police service (Jain et al., 2000), bringing about positive change.

It has been found that when a person of one race interviews another person of the same race (a Caucasian person interviews another Caucasian person, or a [B]lack person interviews another [B]lack person, for example), they tend to assign higher ratings to those candidates who are from the same racial group. (Jain et al., 2000, p. 67)

Additionally, the promotion of women, Indigenous persons, and racialized groups to senior ranks within a police service can influence organizational culture. Conventionally, police organizational culture elicits conformity and assimilation (Szeto, 2014). Organizational diversity in a police service’s senior ranks creates a deviation from the traditional, Caucasian male-dominated police culture (Jain et al., 2000). This, in turn, attenuates systemic discrimination within a police organization and allows for different policing perspectives to develop, promoting public trust and confidence (Jain et al., 2000).

### CONCLUSION

Systemic discrimination results from deep-rooted obstacles that create serious barriers of exclusion, racism, and discrimination in policing. A vertical mosaic exists in policing consisting of a male Caucasian perspective that influences and dominates all facets of policing. While police services are proactively diversifying the constabulary level within their respective organizations, they are negligent about diversification strategies in the senior ranks. The opinion of a supervisor about a candidate for promotion can be fraught with arbitrariness and racial bias, which in turn creates occupational segregation for women, racialized minority groups, and Indigenous persons within police services. Furthermore, many police officers representing Indigenous persons, racialized minority groups, and women experience some form of harassment but choose to remain silent because they fear being alienated or ostracized, or having their career impeded.



**FIGURE 3** Demographics of Police Personnel in the Brantford Police Service, 2021. The infographic illustrates the demographics of police officers at the Brantford Police Service. Adapted from “January 2021 – Brantford Police Service Sworn Roster,” by Raj Saini 2021.

To identify, mitigate, and address systemic discrimination in policing, statistical data can be used to assist in defining recruitment, selection, and promotional strategies to increase diversity at all levels of the police service. Additionally, by including women, Indigenous persons, and members of racialized minority groups in the design and implementation of policies, practices, and decision-making processes, police services can eliminate subjective considerations, differing standards, and biases. Lastly, vigilance and a willingness to monitor and review statistical data, policies, practices, and decision-making processes within police services can change a traditional police organizational culture from one that marginalizes or alienates women, Indigenous persons, and members of racialized minority groups to one that is truly inclusive.

#### CONFLICT OF INTEREST DISCLOSURES

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\* School of Graduate Studies, Wilfrid Laurier University, Brantford, ON, Canada.

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# Pop culture and social insertion: How can play in adolescence and adulthood be “therapeutic”?

Anne M. Goodall\* and Alexis H. Truong\*

## ABSTRACT

In this study we explore how participation in tabletop role-playing games (TTRPGs) fosters experiences of social insertion in adolescence and adulthood. We conducted semi-directed interviews with nine participants who identified themselves as having used such practices to overcome difficult and challenging life experiences. We look at how participants interpreted their play experiences, described by some as “therapeutic.” Through TTRPGs, players were able to explore and better understand aspects of themselves, explore new interactions, and “test” new ways of expressing themselves. Additionally, participants were able to develop their interpersonal skills by participating in such practices, namely because of the role-playing element. Participants stated that these practices and their therapeutic qualities also had positive effects on their lives outside of the game, helping them to enter and engage in various social situations that they previously felt excluded from, or hesitant to participate in. We argue that social interventions could invest in these types of cultural practices, embedded in popular culture, to encourage and facilitate participation of adolescents and adults in mental health services.

**Key Words** Mental health; role-playing; well-being; social insertion; marginalisation.

## INTRODUCTION

How do tabletop role-playing games (TTRPGs) help prevent experiences of social exclusion in youths and young adults? In the late 1970s and in the 1980s, TTRPGs were popularized through the publication of games like *Dungeons and Dragons* (D&D) (Bowman, 2010). Role-playing games (RPGs) generally require the players to adopt the role of a character, interact with others through this character and experience a collectively imagined and sustained world for the purpose of the game. Objectives often focus on completing quests and adventures, though some games also focus on storytelling and world exploration. Examples of non tabletop RPGs include video games, such as *The Legend of Zelda* series, and live action role-playing games (LARPs) like *Vampire: The Masquerade*. Video games are played on virtual platforms with an animated version of a character, while LARPs generally involve elaborate costumes and physically acting out characters. On the other hand, TTRPGs like D&D resemble more traditional board games, as they are mostly played with no more than twelve players, and require only a pen and paper, a rule book, and a set of dice (Wyatt et al., 2014). In TTRPGs, no tangible representations of the

characters or the environment is necessary: game play occurs nearly entirely within the players’ imagination, the pen and paper are used to keep track of the characters’ statistics and possessions, and dice are used to determine the success of actions. Moreover, some individuals and groups involved in the TTRPG community propose that the main objective is not winning or losing, but rather appreciating a collective experience of creating and inhabiting this immersive fictional realm (Schiesel, 2008).

In the early days of the 1980 moral panic that surrounded TTRPGs like D&D (Martin & Fine, 1991), these practices were framed as cult-like communities that targeted socially excluded individuals or further fanned retreat from the “real world” and social anomy (Martin & Fine, 1991). However, recent scholarship has shown that similar practices can actually foster social inclusion and social and professional insertion (Truong & Gaudet, 2020), much like other forms of leisure (Rowe, 2014; Smallfield & Molitor, 2018). Although little has been written on the topic, contrary to popular belief, such role-playing practices could actually help address social exclusion (Truong, 2013). The term social exclusion is commonly associated with bullying, but social exclusion can occur due to a variety of reasons (Lynn Mulvey, Boswell &

**Correspondence to:** Anne M. Goodall, Department of Criminology, Faculty of Social Sciences, University of Ottawa, 1-97 Ste-Cecile St, Ottawa, ON K1L 5L4, Canada. E-mail: agood019@uottawa.ca

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Zheng, 2017). As a widespread issue gaining recognition, the United Nations defines social exclusion as “a state in which individuals are unable to participate fully in economic, social, political and cultural life, as well as the process leading to and sustaining such a state” (United Nations, 2016, p. 18). Social exclusion is also considered a risk factor for decreased prosocial behaviour, low self-esteem and mental health struggles, and even criminal activity (Coynne et al., 2011; Rowe, 2014; Stanley & Arora, 1998).

In this text, we argue that the playfulness that characterizes these practices deters normative pressures associated with interactions in a way that also fosters social participation and inclusivity. We believe such practices could provide clues to innovate in the field of social intervention, especially in regard to young marginalized populations, by investing in their shared interests and cultural practices. We start by providing a bit of context and by introducing our methodology, and then move to present some of our data and interpretations.

## OUTCOMES OF LEISURE

Tabletop role-playing games emerged in the 1970s and grew in popularity as they spread through high schools and colleges in North America (Kushner, 2017). However, they quickly became labelled by some as being associated with satanism, murder, suicide, and crime (Bowman, 2010; Martin & Fine, 1991). An advocacy group called “Bothered About Dungeons & Dragons” (BADD) claimed that D&D was corrupting young minds, leading them to commit murders and suicide (Dempsey et al., n.d.). Mental health-related issues were seen as an increased risk factor, leading children with late-schizophrenia towards bad moral behaviour or causing depression in children because of the game’s high emotional involvement (Dempsey et al., n.d). The media also helped to spread this image of TTRPGs. Most notably, an episode of the popular investigative news program *60 Minutes* heavily criticized the game, arguing that children can become obsessed with the game, blurring reality and fiction in a way that could encourage some criminal behaviour (CBS, 1985). This negative media attention caused the game to be banned in many schools and youth programs, often due to protesting parents (Martin & Fine, 1991). Today, the stigma against these practices has diminished greatly, as “geek” and mainstream culture become more and more intertwined (Cohen, 2014). Tabletop role-playing games have become more popular, as is made evident by television shows like *The Big Bang Theory*, movies like Disney’s *Onward*, and a surge of popular podcasts on the topic, as well as with schools creating D&D clubs for children not interested in sports, and restaurants and bars creating gaming nights for adults interested in this pastime (Barnes, 2018; Jahromi, 2017; Kraus, 2018).

While leisure is not considered essential to life, it has been recognized as important since Antiquity (Rudnik, 2005) and has been shown to have positive effects on health, self-esteem, and quality of life (Chen & Chippendale, 2018; Rudnick, 2005). It has also been found to satisfy an individual’s psychological needs, which in turn can have a positive effect on physical health, mental health, life satisfaction, and personal growth (Caltabiano, 1995; Chen & Chippendale, 2018). Leisure activities have also been used as a form of social intervention

to assist individuals who experience social isolation by providing them with a social network and opportunities to participate socially (Smallfield & Molitor, 2018). For example, programs like *Project Friendship* and *The Citizenship Project* use leisure activities to help integrate marginalized individuals into the community (Rowe, 2014). Such networks can provide individuals with the opportunity to discuss their problems, share their experiences and receive emotional support (Caltabiano, 1995).

## METHODOLOGY

We conducted semi-directed interviews with nine participants between June 2019 and January 2020. We decided to invest in longer, more in-depth interviews with a smaller number of participants in order to pay close attention to their lived experience and to the place and role of these practices in their lives. Because of this, statistical generalization of results is not possible. Interviews were conducted with participants who self-identified as having overcome hardships through their participation in TTRPGs. They were also chosen based on the extent, distinctiveness, and diversity of their experiences in these practices. Participants were aged between 23 and 56 years old, with experiences in TTRPGs ranging between 1 and 44 years in length. Six participants identified as male and three participants identified as female—with one participant also identifying as transgender male and one also identifying as transgender female during the interview.

During interviews, participants were asked to describe how TTRPGs helped them overcome challenging or difficult life experiences. Interviews were organized around three main themes: describing their most marking TTRPG experiences; describing the difficult or challenging life experiences they had overcome through their participation in TTRPGs, and describing the place and the role of TTRPGs in their lives since their first encounters with these practices. Interviews were recorded with an audio-recorder and subsequently transcribed. We used the qualitative data analysis software *QDA Miner* (Provalis Research) to code and analyze transcripts. We started with a “vertical” analysis of each interview, coding emerging themes and identifying the “story” shared by participants as well as variations and recurring elements. We then moved to doing a “horizontal” analysis throughout the various interviews in order to compare and integrate the various themes (see Gaudet & Robert, 2018, for a more detailed description of this approach). This allowed us to classify the original 52 nodes identified inductively in our analysis into a series of primary, secondary, and tertiary categories of concepts. One of the main themes that emerged is this notion of “therapeutic experiences” shared by participants.

## THERAPEUTIC QUALITIES OF TTRPGS

On numerous occasions, participants either expressed or evoked the idea that TTRPGs had a “therapeutic effect.” Three participants explicitly described these practices as being “therapeutic,” while the other participants spoke of related notions working towards well-being, which we consider a common thread for varying forms of therapeutic care (e.g., Binfet, 2017; Brooker & Duce, 2000; Sweeney, 2009).

Few authors have explored this topic in relation to such play practices. Blackmon (1994) described a specific case where D&D had been used in therapy to help a player explore their personal identity. Others have explored the use of TTRPGs in social rehabilitation, helping individuals to develop skills and behaviours to navigate social situations (Rosselet & Stauffer, 2013; Zayas & Lewis, 1986). However, we still know little about why these practices seem especially relevant for participants in terms of healing or overcoming life difficulties. As Ashley, a participant, put it:

[TTRPGs] allow me to work through feelings of rejection, or pick an issue. Social exclusion, anything, questions around not having money, all of these sort of things, which we're able to do in a cooler setting. [...] Outside of games, the only real place that I have to work through some of the stuff that I'm working through with some of my characters is therapy, and that is an hour a week as opposed to three hours.

Playing a character that she identified with provided her the opportunity to work through some challenges or difficulties she had experienced, outside the conventional space of her formal therapy sessions. Ashley also expressed that playing such characters helped her reflect on and identify other issues she was facing, and facilitated raising them to her therapist. Even though participants did express playing these games as ludic activities, it appears that they facilitated a type of introspection conducive to a certain sense of well-being.

Expanding on this idea, participants also described how play allowed them to better understand certain aspects of who they are, were, or could become. Tabletop role-playing games were characterized as open worlds that allowed seemingly infinite possibilities for character creation and play. Participants explained that this gave them “agency” to explore various ways of being. Adam described how role-playing was an opportunity to distance himself from his own behaviours and be critical of certain aspects of himself he felt were more “negative”:

Being able to separate out that part of myself, and putting it in a character, and going “oh, that guy’s an asshole.” It’s much easier than saying “oh, I’m a bad person.” It’s taking a behaviour and saying, “oh, that’s bad behaviour”. I don’t have to... It’s just behaviour. Behaviour changes.

Artistic forms of therapy like dance and drama therapy have been shown to develop an individual’s self-esteem, identity, and confidence in skills as well as their motivation to change (Heard et al., 2013). Here, by gaining some distance, Adam felt it became possible for him to conceive personal change that did not feel threatening but, rather, was an opportunity for personal growth. This distance also allowed participants to explore and discuss various complicated and socially relevant notions such as sexism, racism, and corruption—on their own terms.

Identifying with characters was especially important in facilitating therapeutic effects experienced by participants. Many participants explained how character creation allowed

them to role-play different characters that always reflected, to some degree, aspects of themselves. One way that they did this was by creating characters who represented “idealized” versions of themselves, allowing them to “practice” being and acting differently. A common example that was cited was the use of characters who were particularly “outgoing” and “socially adept,” which allowed participants who otherwise described themselves as “introverted” or “socially awkward” to perform a confident self-presentation. Furthermore, much like the previous example shared by Adam, participants also used the freedom associated with character creation to generate characters who had lived similar experiences, or shared more negative or less desirable qualities with the players. This, in turn, helped them reflect and learn about themselves, the world around them, and what they felt to be their place in this world.

Participants also spoke of their TTRPG experiences as being “cathartic.” They said that this kind of play opened an “inclusive” space and allowed them to express and release their emotions without the fear of consequences outside of play. This was the case, for example, when participants felt angry or stressed, but also felt like they did not have the means to express said emotions outside of play. As David stated: “RPGs are good for just dealing with that frustration. [If you are playing a fighter,] just the fact that you’re pounding on something [...] [that’s] enough to help you deal with some of the [...] frustrations that happen in everyday life.” James explained that playing such characters allowed him to “feel powerful,” a sense of power that he did not often feel outside of play, having experienced a lot of bullying. Role-playing was therefore a way to channel intense emotions that were explained as “difficult to deal with” in everyday life, but also a means of experiencing positive emotions that he rarely encountered outside of play. Like in other creatively geared therapeutic programs, such as dance and drama therapy, these opportunities may help individuals explore their own emotions and learn to better express their feelings (Frigon, 2010; Heard et al., 2013).

Similarly, for some participants, TTRPGs gave them an opportunity to express facets of their identity that were either unrecognized outside of their play community, perceived as less valued by others, or outright stigmatized. Both participants who identified as transgender reported using the game as an opportunity to express and explore how they defined themselves in a way that they felt they could not outside of the game. For example, Brandon used the game to play a female character and express characteristics and behaviour traditionally interpreted as being “feminine,” which he states are a part of his upbringing, his interests and who he is, but not conducive to how he wishes to present himself as a man. This echoes Truong’s (2013) discussion of how “doing gender” in role-playing practices allows one to play with social norms and social categories, almost inevitably reiterating them while also challenging them in a fluid process.

Finally, TTRPGs had a therapeutic effect in participants’ lives by helping participants develop social skills they then mobilized in and out of play. We know that role-playing is found in more traditional forms of therapy, such as cognitive behavioural therapy, which engages role-play in order to rehearse new lifestyles, learn to identify and change thinking

processes, and gain new social skills (Milkman & Wanburgh, 2017). In TTRPGs, this process naturally comes about as players adopt a character and invest their own feelings and experiences in the game and the interactions. For example, Adam, who described having trouble socializing with other children and who also experienced bullying, explained that this structured play time helped him to “figure out” social situations in a way that felt safe. Other participants also stated that TTRPGs offered them an opportunity to practice new ways of being which helped them develop a variety of skills. For example, James describes how he used the game to develop his style of humour through role-playing. Participants also played characters who were more outgoing and socially confident, helping them develop stronger interpersonal skills.

Participation in TTRPGs also helped participants develop self-expression skills and a sense of self-advocacy, which can be defined as “the act of supporting one’s own interests” (Doherty et al., 2016, p. 253). Conducive to this, leisure-based intervention programmes are believed to allow the individual to take control of their own intervention (Rowe, 2014). Through playing TTRPGs, participants described learning to be “more assertive,” to have “more tolerance” for people not liking what they said, and to assert their own independence. This was facilitated through the support, recognition, and validation of other players in the group. For example, Ashley states:

Through D&D, I learned a lot more of like, I learned a lot more how to be in charge of things, how to have a lot more tolerance for people not liking what I said, how to be a lot truer to myself instead of being customer service [Ashley]. And people still liked it, and people still found me funny, so, I got a lot better at almost every aspect of interpersonal stuff over the time that I’ve been playing.

Here, Ashley makes a concrete link between her experiences of play and her experiences of life outside of play, and how things she has learned through play become relevant outside that specific context. Other examples include Suzan, creating a transgender advocacy and support group, something she felt empowered to do through her participation in TTRPGs, or Andrew, describing how TTRPGs “changed his life”:

I would like to say that they’ve impacted me for better [...] it made me broaden my horizons so to speak [...] uhm, it made me take dives or like risks. I mean taking chances and all that [...] Umm, like I think the very first few times I’ve actually played with other people were the first times I’ve ever made independent decisions for myself. [...] And so, and so, if like, and this is like one of my first few steps to obtaining independence [...] But personally I think it’s just one of those stepping stones that I took for me to become who I am today. If I never had that chance back in the day, I wouldn’t know what would happen to me.

We know that leisure-based interventions help individuals develop useful skills and self-esteem as well as integrate them

into the community (Ponce & Rowe, 2018). Tabletop role-playing games can similarly help participants develop these skills as well as form social ties through their participation in gaming groups, local game shops, conventions, or online discussions. However, the role-playing aspect of these games, mixed with their openness to players’ experiences and desires, is a rare feature—one that enables a sort of connection with “what is played” that makes it more than fiction.

## CONCLUSION

How do TTRPGs help prevent experiences of social exclusion in youths and young adults? These practices allowed participants to explore and discover different elements of themselves, and the world around them, as well as opportunities to express themselves. The therapeutic qualities of these practices went beyond simply discussing and exploring issues; they were an opportunity to gain new skills and confidence—which were fundamental to improving the participants’ lives, well-being, and experiences outside of the game. Furthermore, participants shared that they had developed self-expression skills and a sense of self-advocacy, which encouraged them to support their own interests and build healthy relationships.

We know that encouraging participation of young adults in mental health-related services and keeping them involved can bring many challenges (Truong et al., 2019). We believe that such community organizations could invest in cultural practices that make sense for and are of interest to these individuals. While the sample size of this study may have been limited and precludes generalization, it opens a reflection on the potential therapeutic benefits of these types of practices. We believe more targeted research on the therapeutic potential of TTRPGs is required, as well as on other similar popular culture-related practices for adolescents and adults.

## CONFLICT OF INTEREST DISCLOSURES

The authors declare that there are no conflicts of interest.

## AUTHOR AFFILIATIONS

\* Department of Criminology, Faculty of Social Sciences, University of Ottawa, Ottawa, ON, Canada.

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# From public safety to public health: Re-envisioning the goals and methods of policing

Jeremiah Goulka,\* Brandon del Pozo,<sup>†,‡</sup> and Leo Beletsky\*

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## A MOMENT OF URGENCY

There is an acute need for major reform in policing in North America, and especially in the United States. The murder of George Floyd and the movement it energized emphasized the urgency of this long-term, ongoing need. As the Movement for Black Lives expanded into possibly the largest social movement in U.S. history (Buchanan et al., 2020), many of its protests were policed in ways that only served to heighten tension and mistrust between the police and the public seeking change in their practices (Brunsdon et al., 2020).

The political and policy responses to this movement have ranged from proposals to abolish the police and prisons, to proposals to “defund” (i.e., reduce) police budgets and shift resources elsewhere, to specific, limited policy reforms, such as rewriting use-of-force policies to ban choke holds, to mandating additional training (e.g., anti-implicit bias and de-escalation curricula). The breadth of proposals reflects the breadth of opinion and the lack of consensus on how to reform policing in a democracy or, indeed, what the roles and goals of the police should be in American society.

As the nation grapples with defining the proper roles and limits of police generally, and particularly in Black, Brown, and other communities that have borne disproportionate harms from police (as well as from many other institutions), we propose an approach that we believe would be both realistic and effective: adopting the goals, metrics, and lenses of public health. A call for such a union has been voiced for several years now (Burris & Koester, 2013; Krupanski et al., 2020; van Dijk et al., 2019), but we have yet to operationalize it using a discrete and scalable approach. We begin to take up that task here. By replacing current performance metrics with public health metrics and flawed conceptions with ones that are based upon evidence, and by demanding agility and accountability in changing practices and policies when they are shown to cause harm, we can improve the health, safety, and well-being of communities across the United States.

This will require collaboration between the fields of public safety and public health. It will require the introduction of public health terminology into policing in order to establish a common language for setting goals and measuring results, a step that may empower communities to hold police officials accountable in ways that have so far proven elusive (Table I). In theory, this is not a radical recommendation. Police officials already name public health-related goals as their ultimate objectives: to reduce morbidity and mortality related to violence, non-violent victimization, roadway safety, and emergency responses to risk behaviors associated with drug use and mental illness. While this should be a cause for optimism, to transform these stated objectives into actual policy and practice will require that these goals be more explicitly internalized within police departments.

In limited ways, this work has begun. A body of research has conceptualized promising police linkages with the pursuit of public health and the opportunity for complementary work (van Dijk et al., 2019). The nascent development of diversion and deflection programs for people suffering substance use disorders reflects some growing acknowledgement among police departments of the value of public health approaches. But we have yet to lay out the basis of a common language or to operationalize concepts in a way that make commensurate the goals and work of policing and public health. This article sketches out the way forward and provides some illustrative examples.

## MOVING AWAY FROM TODAY'S INEFFECTIVE AND HARMFUL PERFORMANCE MEASURES

At present, the performance measures commonly used in policing include metrics such as the number of arrests made, tickets issued, guns seized, and pounds of illegal drugs seized. These metrics are rooted in a belief that, through deterrence and incapacitation, these basic law enforcement actions will lead to a jurisdiction-wide reduction in crime (as

**Correspondence to:** Brandon del Pozo, PhD, MPA, MA, The Miriam Hospital, Division of Infectious Diseases, 164 Summit Avenue, Providence, RI 02906, USA.  
**E-mail:** bdelpozo@lifespan.org

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**Table 1** The reform effects of a paradigm shift from public safety to public health with key concepts of medicine

	<b>Policing/Public Safety Paradigm</b>	<b>Public Health/Medicine Paradigm Shift</b>	<b>Reform Effect</b>
Objective	Lowering community violent crime	Population-level morbidity and mortality reduction aggregated from individual interventions	Provides a common language with implications for goals, methods and metrics
Primary focus	Deterrence and identifying offenders	Prevention	Shifts from tertiary prevention through policing to primary and secondary means that address structural determinants
Measures	Productivity measures: arrests, tickets, contraband seized	Surrogate vs. true endpoints	Holds interventionists accountable for their stated goals
Authority	Law enforcement as an end in itself	Law as empowering an agent to pursue an end	Focuses on discrete outcomes rather than assuming the means can achieve them
Negative effects	Collateral consequences	Iatrogenesis	Explicitly calls for reduction; acknowledges self-perception of police as interventionists
Specialization	Generalist response by officers to calls for service	Preliminary diagnosis and referral to specialists in behavioural health as needed	Promotes evidence-based outcomes; realigns municipal budgets as necessary
Minimizing impact	Reduce overpolicing	Compute Number Needed to Treat	Asks prospective question rather than making post-hoc observation; nests with iatrogenesis

measured by crime rates). Unfortunately, the evidence base consistently demonstrates little if any connection between the acts measured—and thereby encouraged—through these performance metrics and the ebb and flow of crime rates. This is true even when additional resources are poured in or punishments ratcheted up.

## ADOPTING GOOD GOALS AND METRICS

To provide evidence of effective policing, surrogate endpoints should be linked to actual ones we can accept as independently valuable and worth striving for (Beletsky, 2018). That police should endeavour to detect and arrest the perpetrators of serious crimes is a widely accepted goal, but this comprises a small proportion of the daily work of most officers. We recommend adopting the most obvious endpoints as lodestars: the basic public health goals of healthier, longer lives for all people. How policing contributes to or detracts from these endpoints should be measured. The ways police can operationally contribute to these endpoints of healthier, longer lives—such as by engaging with upstream preventive efforts—should be identified, quantified, and then operationalized through performance metrics and incentives.

Some of these will concern direct police interactions: do they save lives or cause trauma? Others will be indirect, such as aspects of life that evidence suggests contribute to a community's health, resilience, and economic solvency. Police should be explicitly tasked with fostering them. While police are not and should not be primary service providers delivering the key elements of strong social determinants of health, they can facilitate them. Examples include the ability of a community to use public spaces constructively and without fear, or to safely use roadways and public transportation.

## IMPROVING PUBLIC HEALTH IMPROVES PUBLIC SAFETY

There is a basic congruence between public safety and public health. The most obvious example is violence: it undermines both. Focusing on Black Americans, the Centers for Disease Control and Prevention ranks homicide as the leading cause of death for Black individuals between the ages of 15 and 29, and specifically men between the ages of 15 and 34 (Centers for Disease Control and Prevention, 2018). This disparity extends to nonfatal shootings: Black Americans are shot at the rate of 113.8 per 100,000 people, which is ten times higher than their white counterparts (Everytown for Gun Safety, 2020). If police can effectively reduce this violence, they will be improving both public safety and public health.

## RECKONING WITH IATROGENESIS

Can police effectively reduce this violence without adding to public health harms? A public health-informed approach to policing means adopting—but not co-opting—the concepts and language of public health. One of the critical shifts will be to seriously reckon with iatrogenesis (Anderson & Burris, 2017). Policing has often been impervious to evidence demonstrating that some practices are ineffective or harmful, or that interventions with proximate positive effects foster negative ones that manifest in the long term. The public health-informed approach will require building a willingness to change based on evidence.

Continuing to highlight the experience of Black Americans, they are also the group at greatest risk of being killed during a police encounter, with the lifetime odds of being killed by police approximately 1 in 1,000 (Edwards et al.,

2019). The cumulative causes of violent death, injury, and debilitation are acute, recurring public health and safety crises for not only Black Americans but several other marginalized constituencies, such as the LGBTQ+ and Latinx communities, and cultural and religious minorities. These crises provide tragic support for the increasingly widespread acknowledgement that racism is a public health emergency and the growing contention that policing is one, too. Aligning policing with public health therefore not only requires recognizing the proper endpoints of policing but also recognizing when interventions are a source of great harm and have few redeemable features.

## MOVING AWAY FROM “HEALTHWASHING”

A reason to be skeptical of current statements by police and political leaders purportedly embracing public health goals is that policing already includes many iatrogenic policies that are promoted specifically in the name of public health. Some see this as a way to take troubling police practices and “healthwash” them in order to make them more palatable. Take the example of America’s failed “war on drugs,” the source of extraordinary iatrogenesis (Alexander, 2012). Not only have its collateral consequences been harmful, but the interventions themselves continue to be largely ineffective. Drug possession and the crimes associated with use and addiction are prime examples of harmful practices justified in the name of health, in continued defiance of the evidence. Indeed, in most jurisdictions, police have consistently undermined the scaling up of evidence-based health services shown to reduce drug crime, chaotic drug use, and overdose mortality—such as harm-reduction agencies and medications for opioid use disorder—through opposition at the political level and through targeting enforcement activities at or near harm-reduction agencies. A comprehensive reform of the United States’ failed drug policies is long overdue (del Pozo & Beletsky, 2020).

A handful of forward-thinking jurisdictions have made substantive changes such as the *de facto* legalization of the unprescribed possession of addiction treatment medications (del Pozo, Krasner, & George, 2020) or the decriminalization of the simple possession of controlled substances (Levin, 2020). Similarly, the onset of the COVID-19 pandemic led to significant police reforms in the name of preserving health and preventing the spread of infection, from reduced drug arrests to fewer pretrial detentions. These changes present an opportunity to re-center the entire approach to policing addiction, but their results need to be evaluated to make the strongest case possible (del Pozo, Beletsky, & Rich, 2020). The results of these evaluations should help determine which policing practices should be incentivized in order to change police culture, which is often entrenched and difficult to shift when it comes to deflection and diversion in lieu of drug arrests (Barberi & Taxman, 2019).

## INCORPORATING IATROGENESIS-AVOIDANCE INTO POLICE CULTURE

Framing negative outcomes as iatrogenic effects would encourage police to think like their colleagues in fields such as mental health and addiction treatment. There is

another advantage to invoking this concept that should not be underestimated: it would reconcile the harms caused by policing with the belief held by police leaders that their interventions are meant to *protect* citizens, *help* communities, and *avert* even greater harms.

While the actions police take can be simply harmful, or even criminal or unconstitutional, most are well-intended interventions developed to address dangerous situations. Policing is viewed by most officers as a type of treatment meant to secure or preserve public safety, but taking this idea seriously means acknowledging that, like chemotherapy, even the best-intentioned treatments can cause harms. Talking about the iatrogenic effects of policework requires that collateral harms be both measured and reduced, the most critical among them being unnecessary or excessive force. It also means foreclosing the use of interventions that produce more harm than good, even if lawful or supported by a vocal or politically powerful constituency. For example, arrest, incarceration, and their long-term consequences are deeply harmful to an individual’s well-being (as well as that of their family and community). These should be considered impermissible iatrogenic effects unless they can be unambiguously justified by a safer, healthier community.

## THE NUMBER POLICE NEED TO TREAT

The idea of iatrogenesis allows policing to leverage another useful public health concept: the number needed to treat (NNT). This measures the effectiveness of an intervention by measuring how many people it must be applied to, who may need it or not, to prevent one undesirable outcome (Cook & Sackett, 1995). Many police interventions, from traffic enforcement to investigating “suspicious” people, are broadly distributed and intend to prevent undesirable outcomes downstream, be they accidents or violent crime. The police need to consider they may be treating many more citizens than necessary to regulate behaviour, especially if the downstream effects on roadway safety or violent crime are not clearly spelled out by research and may actually reduce a community’s quality of life.

Stopping and frisking is a paradigm case. In New York City, before a court declared the practice unlawful and discriminatory in its effects, many hundreds of people were stopped and frisked for each illegal firearm actually found; over 90% of people stopped were found to have committed no infractions (Goldstein, 2013); and these fruitless stops have been associated with elevated risk of psychological distress in minority communities (Sewell et al., 2016). The constitutionality of these police practices aside, in the same way medicine should minimize the number of patients it needs to treat to preserve health, police should minimize the number of interventions necessary to promote safety. This would commit police to acting based on evidence rather than the simple prerogatives afforded by law, and to use caution when the endpoints being pursued are minor, or the NNT and its accompanying iatrogenic effects are disproportionately high. This way of thinking would preclude the use of many overbearing enforcement techniques before constitutionality—and potential payouts—even comes into question.



## LETTING EVIDENCE DIVIDE LABOUR

A police commitment to public health would require four actions: (1) basing procedures and policies on behavioural health and science, (2) collaborating with health professionals such as social workers, harm reductionists, and mental health counselors when situations call for co-response, (3) ceding or referring work to health professionals when a police response would not be particularly effective or requires specialized knowledge or skills that exceed the police remit, and (4) supporting rather than undermining the scaling up of evidence-based health services and practices such as harm reduction in the budgeting and legislative processes and in police practices (Burris & Koester, 2013; van Dijk *et al.*, 2019).

A considerable amount of routine police work involves responding to calls involving three categories of risk behaviour and vulnerability that are especially well-suited to such a division of labour: substance use, mental health crises, and homelessness. Police have traditionally been the default response to these issues, but there is compelling evidence that other actors would be more effective at addressing the problems they pose. The challenge is operationalizing such a shift without seeing an interruption in critical services because the police have been removed from certain roles before effective alternatives have been implemented (del Pozo, 2020).

Work would need to be done to draw lines between items (2) and (3) above. Calls involving drug use and addiction should almost always be routed to specialists in harm reduction and addiction treatment; the law enforcement approach to drug use has been a dismal failure (del Pozo & Beletsky, 2020). However, mental health calls with an element of volatility would require co-response; other such calls could be routed to health professionals. Indeed, promising models in Oregon have demonstrated that properly funded and trained specialists can handle mental health calls in lieu of police officers (Butler & Sheriff, 2020), and cities such as Rochester, San Francisco, New York, and Chicago have taken steps to implement this approach (Westervelt, 2020).

While such programs are piloted and scaled up, police officers can be trained and incentivized to outsource through linkages with the health and harm-reduction sectors. Like general practitioners referring patients to specialists, police can vector people to interventionists or hubs that will provide the proper services, with the proper training and resources. We deliver a training program that helps create these linkages for people who use drugs, and it has been shown to increase police willingness to refer people to treatment in lieu of arrest and to engage in other harm-reduction measures (Beletsky, 2020; Davis & Beletsky, 2009; Rocha-Jiménez *et al.*, 2019). Another approach is to give police officers some of the basic skills of interventionists through crisis intervention team training, which has been shown to increase police officers' reliance on de-escalation and referrals to psychiatric treatment rather than arrests in responding to mental health crises (Watson & Compton, 2019).

## MEDICINE AND PUBLIC HEALTH AS PARTNERS AND MODELS IN POLICE REFORM

Though typically conceived as totally different professions, there are some key conceptual similarities between police

and the health fields that, if recognized, may help build partnerships between them. Police interventions, like those in medicine, typically happen at the individual level, in response to proximal threats. In the aggregate, these have the potential to lead to population-level effects; indeed, police departments have population-level responsibilities, namely safe communities. While medicine typically lacks such responsibilities, practitioners often have public health in mind, and they work with public health agencies towards population-level effects. Thinking of police work this way—as a series of individual-level interventions undertaken by a system responsible for achieving population-level effects—may help police leaders understand the congruence of the missions of policing and health. Encouraging police leaders to understand this and accept its implications would provide a means to effectively operationalize a critical step in police reform.

This conception may enhance efforts to build linkages between law enforcement and health actors. The sense of a common mission may help develop alliances among players that operate in different lanes but have many intersections. Indeed, this conception may help police see how to reckon with iatrogenesis. It is the connection between individual health practices and population-level health results that has caused the medical fields to engage with the iatrogenic effects of their own practices, such as the origins of the opioid crisis (Frakt & Monkovic, 2019) and the disparate outcomes of medical practice by race and class (Paul *et al.*, 2020). Medical and public health efforts to come to grips with their own legacies of racism, through the careful use of evidence-based methods and metrics, may be a model for how police agencies can own their failures while working to reform themselves. If Americans are anxious for police leaders to reframe their work in a sweeping way, health care providers and public health officials can supply the language, methods and metrics that would help them do so, while affirming the core police responsibilities of protecting life and helping communities thrive.

The medical experience also highlights that there is much to be gained by police officers and leaders in this approach. We predict greater job satisfaction, lower burnout, improved retention, improved community relations, and fewer lawsuits.

## GETTING THERE

To turn these stated objectives into true objectives that are deeply internalized in police organizations and their policies, practices, and cultures will take great effort. The United States has over 18,000 law enforcement agencies. The nation will be on the road to real progress in police reform when police budgets are tied to public health metrics, when there are employment and budgetary consequences for iatrogenesis that goes unfixed, and when officers' performance and promotional paths are tied to public health outcomes. These metrics should be developed with the input and support of the communities they serve and the people most impacted by policing, and diverting and deflecting to health services should become the default practice. When police leaders and associations stop undermining and instead support the scaling up of those health services, and when political leaders ask police chiefs and candidates for police leadership positions what they will do to ensure their work will advance the jurisdiction's public health goals, the police profession

will be on a path of meaningful reform that delivers not only public safety but public health and well-being.

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#### AUTHOR AFFILIATIONS

\* Northeastern University School of Law, Boston, MA, USA; † The Miriam Hospital, Division of Infectious Diseases, Providence, RI, USA; ‡ The Warren Alpert Medical School of Brown University, Providence, RI, USA.

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# A call for de-policing crisis responses: Distressed children and youth caught between the mental health and police systems

Dr. Maria Liegghio,<sup>\*</sup> Herberth Canas,<sup>†</sup> Alexis H. Truong,<sup>‡</sup> and Salomi Williams<sup>§</sup>

## ABSTRACT

In this paper, we present the outcomes of a narrative study of 13 interviews with six child and youth mental health practitioners and seven caregivers with a child between 12 and 24 years old involved with the mental health system and with a history of police involvement. The focus of the interviews was on the experiences of young people involved with the mental health system, and their caregivers, with police encounters. Two categories of themes emerged. Presented here are the outcomes that show the contradictions between the child and youth mental health and police systems as contributing factors to the stigmatization and criminalization of psychiatrically distressed children and youth. A call is made for a collaboration between the mental health and police systems rooted in a commitment for de-policing crisis responses in child and youth mental health.

**Key Words** Collaboration; criminalization; policing; psychiatrization; stigmatization.

## POLICE ENCOUNTERS IN CHILD AND YOUTH MENTAL HEALTH

Despite a decade of emerging scholarship, increased public attention, and numerous government inquests, concerns about the policing of persons living with a mental health issue continue (Braidwood Commission, 2009; Brink et al., 2011; Chammartin et al., 2011; Coleman & Cotton, 2010; Cotton & Coleman, 2008; Eden 2014; Livingston et al., 2014; Sloly, 2021). Generally, the existing scholarship focuses on the experiences of psychiatrically involved or distressed adults and not necessarily those of children and youth. For adults, estimates suggest that approximately 7% to 15% of police calls involve an individual living with a mental illness (Cotton & Coleman, 2008), and that approximately 65% of adults newly admitted to inpatient and community psychiatric services had had some sort of encounter with police over their lifetime (Brink et al., 2011). For children and youth, in studies examining police referrals and arrest rates, youth using community-based mental health services were nearly three times more likely to be referred to police (Vander Koep et al., 1997), while those in group home settings had higher arrest rates than those in inpatient psychiatric settings (Robst

et al., 2013). In one of the only studies specifically focused on examining policing and children's mental health, Liegghio and colleagues (2017) found that of a community sample of 1,449 children and youth (birth to 24 years old) accessing mental health services, approximately 16% or one in six had had police involvement related to their mental health.

Similar to adults, the main reasons for police involvement were: for support to de-escalate a highly charged verbal or physical situation involving a distressed child; because of risks or threats of harm to self and/or others, in particular to parents and siblings; due to concerns related to a child's behaviour in the community, such as property damage and shoplifting; and for physical interventions when restraints or transports to hospital were required because of suicide threats or attempts (Liegghio & Jaswal, 2015; Liegghio, 2017; Liegghio et al., 2017; Liegghio et al., 2020). In most instances, encounters with police were described as helpful for de-escalating conflict situations but unhelpful as a mental health intervention, because of the associated stigmatization, criminalization, and psychiatrization of the child, caregivers, and family (Liegghio, 2017; Liegghio, et al., 2020).

Based on adults' experiences, the main concerns with using police for mental health support are the criminalization

**Correspondence to:** Maria Liegghio, Associate Professor, School of Social Work, S880 Ross Building South, York University, 4700 Keele Street, Toronto, ON M3J 1P3, Canada. **E-mail:** mlieggh@yorku.ca

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of mental illness and of persons deemed to have a mental illness. In particular are concerns about the inappropriate use of excessive force and physical restraints—in some instances causing death; the policing of mental illness; and the inappropriate treatment of persons living with a mental health issue by the criminal justice versus the mental health system (Corrigan *et al.*, 2005; Fry *et al.*, 2002; Morabito *et al.*, 2012; Watson *et al.*, 2008). Criminalization is cited as a major form of structural or institutional discrimination for psychiatricized adults (Chaimowitz, 2012; Corrigan *et al.*, 2005; Gur, 2010). For children and youth, criminalization is also beginning to emerge as a form of institutional discrimination in which young people experiencing psychiatric issues are dealt with by the police and the criminal justice systems rather than the mental health system (Liegghio & Jaswal, 2015; Liegghio *et al.*, 2017; Liegghio *et al.*, 2020). In the adult sector, reliance on police for mental health support has evolved over time.

### Reliance on Police as a “Necessary Ally”

In the adult sector, many argue that the use of police and police services as a mental health intervention is connected to developments in the mental health system and the expansion of mental health legislation (Cummins & Edmondson, 2016; Iacobucci, 2014; Kelly, 2005; Lamb *et al.*, 2002; Wolff, 2005; Yang *et al.*, 2018). Traced to the 1960s, the deinstitutionalization movement sought to shift the primary setting of mental health care and treatment from in-patient, psychiatric institutions and asylums to community settings. The general understanding, which continues to this day, is that individuals facing psychiatric issues are best served living as members of their communities and connected to their families (Cummins, 2011). However, a strong critique of deinstitutionalization is that it occurred without the simultaneous development and implementation of appropriate community services and supports (Cummins & Edmondson, 2016; Kelly, 2005; Soly, 2021; Wolff, 2005). Without adequate community-based mental health and social supports, individuals and families were pushed to rely on other systems, in particular, police services and the legal system (Cummins & Edmondson, 2016; Iacobucci, 2014; Kelly, 2005; Lamb *et al.*, 2002; Soly, 2021; Wolff, 2005; Yang *et al.*, 2018).

Simultaneously, through the expansion of mental health legislation, police and police services have been called upon to intervene, specifically in situations where a person is perceived to be a risk or to be a threat of harm to themselves or others. For some police services, it has been noted that calls for support are increasingly made by mental health service providers (Soly, 2021). With adults, under the Mental Health Act, police services are now relied on to provide physical interventions, including restraints, escorts to hospital, and the enforcement of involuntary committal and community treatment orders (Cummins & Edmondson, 2016; Iacobucci, 2014). Despite concerns about the policing of persons living with a mental health issue, police services are inadvertently positioned as a “necessary ally,” while for responding officers, providing mental health supports has become central to their legal roles and mandates. However, in the case of psychiatrically distressed children and youth, very little is known about the reliance on police services by the child and youth mental health system. This paper addresses that gap.

## METHODS

The research reported here is a pilot to a larger mixed-methods study currently under way. While the larger study explores the meaning young people make of their experiences of “distress” and of accessing and using crisis mental health services, including police, the pilot explores the lived experiences of children and youth involved with the mental health system, and their caregivers, with policing and police encounters. Using a narrative study design, a thematic content analysis was conducted of thirteen ( $n=13$ ) semi-structured, one-to-one interviews with six ( $n=6$ ) frontline child and youth mental health practitioners and 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. The research questions focused on gathering information about the subjects’ lived experiences of police encounters from the perspective of caregivers and of child and youth mental health practitioners. Ethics approval was obtained through the Office of Research Ethics at York University and the service agencies involved as collaborators.

### Recruitment and Sampling

Recruitment occurred through two community-based mental health agencies located in a large urban area near Toronto, Canada. The agencies have long-standing histories of providing a continuum of mental health assessment and treatment services to children and youth from birth to 24 years old and their caregivers and families. Recruitment of both the mental health practitioners and caregivers consisted of connecting with service managers within the organizations and arranging for the distribution of two letters of invitation (one for frontline practitioners and the second for caregivers) to participate in the study. In both letters, prospective participants were directed to contact the researcher (first author) directly. Full information about the study (i.e., purpose and risks and benefits) was then provided, appropriate practitioners and caregivers were invited to participate, and an informed consent form was signed prior to commencing the interviews.

Purposive sampling was used to identify both the practitioner and caregiver participants. The criteria for inclusion of caregiver participants was being a caregiver with a child between 12 and 24 years old, nearing the end of their mental health treatment or who had used mental health services within the previous two years and who had had police involvement for a mental health concern. The criteria for inclusion of practitioner participants was being a mental health professional (i.e., social worker, child and youth worker, etc.) with a minimum of two years of frontline experience providing mental health support to children and youth 12 to 24 years old. Caregivers were given \$65.00 honoraria, and practitioners a \$20.00 gift card.

### Data Collection and Analysis

The pilot data was collected between August 2016 and May 2018 and consisted of in-depth, semi-structured, one-to-one interviews with caregivers and child and youth mental health practitioners. The interviews were 1 to 1.5 hours, audio taped, and transcribed verbatim. The data for analysis consisted of the demographic information collected about the participants and the 13 transcripts.

Data analysis of the transcripts consisted of an inductive process using thematic content analysis (Braun & Clarke, 2006). The analysis followed three steps: 1) a general review of the transcripts for themes and patterns, similarities and differences, and a range of responses between caregivers; 2) a line-by-line review identifying discrete segments of meaning and concepts until the classifications of the concepts were exhausted and saturation was achieved; and 3) reorganization of the identified concepts into categories of themes that explained the phenomena under study. The goodness or rigour of the data depended on the consideration of all possible meaning for concepts as they were identified and labelled throughout the process (Weiss, 1994). As a validation of the categories, an inter-coder comparison was also conducted (Burnard, 1991). When presenting the findings, identifying information has been altered and pseudonyms used to protect the confidentiality of the practitioners, the caregivers, and their family members.

### Limitations of the Study

The main limitations of the study are related to the sample and sampling of the participants. Participants were recruited primarily through two programs for young people with severe or chronic mental health issues. The programs were provided through two community-based mental health agencies. Consequently, the findings reflect a small range of experiences of mental health practitioners and caregivers, specifically those accessing or working in community-based (versus hospital) services. Presumably, caregivers with children facing moderate or situational issues may have different experiences of police encounters. In addition, diversity along the lines of race, class, gender, culture, sexual orientation, immigration status, Indigeneity, family status, and type of mental health issue was also not well represented.

## RESULTS

### Participants

There were a total of 13 participants. Six were front-line child and youth mental health practitioners and seven were caregivers with a child between 12 and 24 years old involved with the child and youth mental health system and with a history of police involvement. Tables I and II summarize the demographic information of the mental health practitioners and caregivers, respectively.

Two main categories of themes emerged from the interviews. Reported elsewhere, one category described the reasons and nature of the encounters with police and police services (see Liegghio *et al.*, 2020). Generally, police services were accessed for support to de-escalate a high-conflict verbal or physical situation with a distressed child, and when police were accessed, the encounters were most often described as negative and resulted in experiences of stigma and criminalization. In this paper, we present the outcomes of the reliance on police services by the child and youth mental health system and the ways in which, through police charging practices, both the mental health system *and* the police are implicated in the criminalization of distressed children and youth. A call is made for the de-policing of crisis responses with children and youth—defined as the

**TABLE I** Demographic information of the child and youth mental health practitioners

Characteristic	Number (n)
Total	6
Sex/Gender	
Female	5
Male	1
Race	
Caucasian	4
Racialized (Black)	2
Profession	
Social worker (MSW)	4
Counselling degree (masters)	1
Child and youth worker (college)	1
Number of years working in child and youth mental health	4, 4, 7, 9, 11, 13
Mean	8

realignment of community services with an intentional and purposeful move away from relying on police for mental health support.

### Child and Youth Mental Health Reliance on Police Services

According to the perspectives of mental health practitioners and caregivers, as reported elsewhere (refer to Liegghio *et al.*, 2020), police services were most often accessed for support to de-escalate high-conflict physical, verbal, or emotionally charged situations involving a distressed child or youth. Police were called not only by parents and youth themselves but also by mental health practitioners working in counselling, residential, or drop-in centres. One practitioner, Jill, described some of the reasons police were called:

Police have been called numerous times to their house for verbal aggression, sometimes physical, often physical aggression, so punching, hitting, getting into physical fights usually with family members, running away from home, not coming home for curfew, skipping school.

Across the caregiver and practitioner interviews, reliance on police emerged from a service need and an expectation that police interventions would result in the child or youth being connected, in particular, to crisis or emergency mental health care. Interviewees from different perspectives—Tara, a mother, and practitioners Angela and Mark—poignantly describe their expectations as unmet.

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 suicidal ideation and threats]. Anyways, they came back out after talking to her for, maximum 15 minutes, and the younger of the two cops said to me, well, we're just going to leave her with you because

**Table II** Demographic information of the caregivers

Characteristic	Number (n)
Total	7
Sex/Gender	
Female/Mother	6
Male/Father	1
Age (at the time of the interview), years 39, 49, 52, 52, 53, 54, 59	
Mean	50
Race	
Caucasian	4
Racialized (Black, Latino/a; Middle Eastern)	3
Highest education	
High school	1
Some college or college degree	3
Some or undergraduate university degree	2
Doctoral university degree	1
Family composition	
One-parent household	3
Two-parent household	4
Annual family income	
\$39,000 and below	2
\$40,000 to \$49,000	1
\$50,000 to \$59,000	3
\$150,000	1
Age and gender (male/female) of identified child	
14	1 male, 1 female
15	1 male, 1 female
16	1 male
17	1 male, 1 female
Number of mental health diagnoses of identified child	
One diagnosis	2
Two diagnoses	4
Three or more diagnoses	1
Nature of identified child's mental health issues	
Depression	3
Anxiety	3
Suicide talk/ideation	2
ADHD	3
ODD	2
Query psychosis (hearing voices)	1
Query Asperger's	1
Trauma counselling/no diagnosis	1

ADHD = attention deficit and hyperactivity disorder; ODD = oppositional defiance disorder.

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 felt like saying—really?...Because I could not get her to go to counselling...I thought when the police came that this would be the answer... 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.

Angela [practitioner]: It frustrated me, and it angered me...knowing that this kid had been to the hospital so many times, I don't know, it blows my mind that they didn't come up with a different plan about involving crisis services. And it baffled me—it made me wonder, how much knowledge do the police have about the mental health services that are out there, because there are so many, and I couldn't understand why this kid wasn't being connected with any of them.

Mark [practitioner]: We had one client [in the residential treatment home] that would always make claims, I'm going to hurt myself...police are, "oh, I have to take him" or sometimes they just come in, "okay, I had a talk with him, he's good." And then hours later we're calling them back again because they're either destroying property or making the environment unsafe for other clients...Police that have come, they say either "we can't do anything unless they [the child] say they're a harm to themselves." Sometimes I find it a little bit frustrating because we're calling for their assistance because we feel the child is not safe, the child is assaulting other people and sometimes it just feels like our hands are tied, and their hands are tied too.

In another instance, one practitioner, describing how mental health and police systems worked together to intervene with a youth who had attempted to commit suicide by jumping from a public building, explains her frustration with police coming in and "undoing" her work as a mental health worker.

Lucy [practitioner]: So when the police came, it really felt that everything that myself and my co-worker had done to kind of bring him [distressed youth] to a place where he was calm, he still wasn't in touch with reality, [but he] was able to be calm and talk with us and start processing the situation. 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 at the time, the youth was really in a place where he would have been very willing to comply and go with them to the hospital...they dealt with the situation 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 years, and then he came back and we were able to kind of re-establish that relationship.

What was striking across these experiences was the ways in which practitioners implicated police for not providing—or connecting the child or youth with—appropriate supports, while simultaneously failing to consider the ways in which they too, as mental health service providers, were not necessarily supporting the children’s distress and addressing the safety concerns (Sestoft *et al.*, 2014). In other words, for caregivers like Tara, connecting her daughter to mental health services would have meant being connected to the very supports provided by practitioners like Mark, Angela, and Lucy. This is a contradiction that signals a gap in the existing service system—implicating police while failing to recognize that reliance on police services may be occurring because of ways the child and youth mental health system is organized and ill-equipped to provide adequate crisis support to young people and their families. Although police reliance was perceived as necessary, encounters with police were fraught with concerns about the criminalization of children and youth.

### Laying Charges—Caught Between Systems (Not Working Together)

Across both the practitioner and caregiver interviews, calls to police for mental health support raised concerns about the criminalization of children and youth through verbal and physical threats, and in particular, police decisions and charging practices. Examples of the concerns about charging practices are best described by practitioners Jill, Karen, and Angela.

Jill: After several occasions of them [responding officers] picking him [youth] up, taking him to the hospital, and then him being released from the hospital, they [police] arranged for a meeting together with him, his mother and the [police] supervisor...to problem-solve around what they were going to do about this situation, because they [police] were telling him that it was wasting their time, you know, taking him to the hospital and then he’s actually fine, and the result was that if he called one more time, he was going to be charged with public mischief.

Karen: 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 about consequences and charges, I think it instills fear...I know there’s been lots of situations where eventually clients [youth], parents, for example, would stop phoning if their kids were coming at them with knives and just say, well, the police won’t get here on time, and if they do, they’re just going to threaten to charge my kid.

Angela: [Describing the experiences of a youth with whom police intervened because of a suicide attempt]...It really stuck with me. It really upset me that 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.

In an effort to understand the charging and arrest rates of youth receiving mental health treatment in community-based settings, Robst and colleagues (2013) note that over time with repeated calls, responding officers may become desensitized to the mental health issues and less tolerant of the young person’s and mental health system’s need for support. In other words, responding officers may be threatening or laying charges because of the belief that, once formally charged, the young person can be “forced” into treatment through the youth justice system. However, these beliefs are misguided, as other research suggests that the youth justice system is ill-equipped to support the mental health needs of its criminally involved youth (Drerup *et al.*, 2008; Moskos *et al.*, 2007; Odgers *et al.*, 2005; Peterson-Badali *et al.*, 2015). Essentially, these outcomes suggest psychiatrically distressed children and youth and their caregivers are passed back and forth and getting caught between the mental health and police systems—caught by the ways the systems are working, or more precisely, not working, together, the result being the criminalization of young people facing mental health crises.

### Calling for De-Policing Crisis Responses in Child and Youth Mental Health

As these outcomes suggest, caregivers and mental health practitioners are turning to police services for similar reasons—because of safety concerns and for support for distressed children and youth. In their mental health practices, practitioners are advising parents to call police, while also, as a system, turning to police for support. Practitioners, caregivers, and presumably responding officers share similar aims, which is to connect the child or youth to appropriate and timely mental health care at the moment of need—at the moment of the immediate crisis. The reliance on police as a necessary ally sheds light on structural issues—in particular, gaps in services and the lack of coordination and collaboration between the police and child and youth mental health systems—the result being the criminalization of distressed children and youth in their encounters with *both* the police and mental health systems. As suggested by these findings, young people’s criminalization involved being passed and caught between the two systems, and having their experiences of distress “criminalized” by being made to feel as though they were doing something wrong when they called police for support. A potential result was unmet expectations and fear of police related to threats of being charged or the actual laying of charges in subsequent calls, thus marking the young person as “criminal.” Reported in an earlier issue of this journal, concerns about being perceived or treated as a criminal are an example of experiences that mark young people’s encounters with police as negative and stigmatizing (Liegghio, *et al.*, 2020).

These outcomes clearly show a need for models of practice that address the structural issues that perpetuate the reliance on police services for mental health support. The goal is ultimately to have distressed young people supported by mental health services. The main issue is the lack of adequate community services (Sloly, 2021). In working with



adults, one approach has police, mental health, and social service systems working together, collaborating to provide a coordinated and integrated community response, not only to address the immediate crisis but also to address underlying factors that may contribute to and propel individuals and families into crisis situations, and offer support (Fisher *et al.*, 2006; Lamanna *et al.*, 2018; Lord & Bjerregaard, 2014; Sestoft *et al.*, 2014). Although we can speculate, based on adults' experiences, that these models may be viable for distressed children and youth, very little is known about their appropriateness for and applicability to young people and their families. Thus, there is a need for further research about young people's experiences of distress and of accessing and using mental health services, including crisis and police services, for support.

Underlying these recommendations for institutional change is a recognition of the need to move away from relying on police services for mental health support (Fisher *et al.*, 2006; Lamanna *et al.*, 2018; Lord & Bjerregaard, 2014; Sestoft *et al.*, 2014; Sloly, 2021). Building on this idea, we call for the de-policing of crisis responses with distressed children and youth. Essentially, de-policing crisis responses means addressing the contradictions: moving away from having a system that inadvertently pushes children and youth, and their families, to rely on police for mental health support to building a coordinated and integrated social service and child and youth mental health system that can respond more effectively to distress, crises, and safety concerns. As suggested by one Ontario-based police service, a strategy for de-policing crisis responses could be extending the authority of 911 emergency dispatchers to screen for safety (the main rationale for police involvement) and, when appropriate, to dispatch a team of mental health workers as first responders, rather than police, fire, or ambulance (Sloly, 2021). Such a strategy expands our current social or societal understanding of emergency services to include mental health workers among first responders.

Moreover, because of ongoing concerns about the inappropriate use of police force, in some instances causing death (Corrigan *et al.*, 2005; Fry *et al.*, 2002; Morabito *et al.*, 2012; Watson *et al.*, 2008), de-policing crisis responses necessitates a critical examination of what it means to rely on "policing," "police officers," and "police services" to ensure personal and public safety. This examination needs to traverse sectors and social institutions, arguing that the work of community safety and well-being falls to all of us within a society. Such an examination is particularly important for communities that have faced and continue to face institutional forms of violence—as in the case of institutional racism encountered by members of Indigenous, Black, and other minority communities (Alberton, *et al.*, 2019; Aymer, 2016; Dukes & Kahn, 2017; Green, 2006; Miller & Vittrup, 2020). Contemporary policing requires an examination of the ways in which "mental health support intersects with other issues like race, culture, health equity and gender" (Sloly, 2021, p. 3). We purport, based on the outcomes of our work, that "age" as a diversity category—a young person's status as a "child"—needs to be added to that list. To conclude, de-policing child and youth mental health would mean building a system of mental health services served by practitioners equipped with the knowledge, skills, tools, and resources to respond to young

peoples' experiences of distress, including when safety may be an issue. In other words, we can no longer rely on the rationale that "safety concerns" necessitate police involvement, given all we know about the harms occurring due to the reliance of the mental health system on police services for mental health support. We need to expand our understanding of safety and well-being to include community approaches.

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#### CONFLICT OF INTEREST DISCLOSURES

The authors declare that there are no conflicts of interest.

#### AUTHOR AFFILIATIONS

\* Associate Professor, School of Social Work, York University, Toronto, ON, Canada; † Research Associate, School of Social Work, York University, Toronto, ON, Canada; Research Associate, Shifting Ways; ‡ Assistant Professor, Department of Criminology, Faculty of School of Social Sciences, University of Ottawa, Ottawa, ON, Canada; § BSW, Research Assistant, School of Social Work, York University, Toronto, ON, Canada.

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# Ten years after: Enduring questions and celebrating answers about situation tables and CSWB

Norman E. Taylor\*

In early February 2011, about 25 diverse local professionals sat down together for the first time in a shopping mall community room in Prince Albert, Saskatchewan. Later dubbed “the original gamechangers,” they began cautiously that day to develop a new process of collaboration. They engaged with one another in a multi-lens triage intended to bring immediate and urgently needed service connections to individuals and families facing compound risk factors that, while not yet at the incident or even crisis level, could be readily recognized as heading swiftly and inevitably in that direction. Adapted from a similar process underway in Scotland, this marked the official launch of the Prince Albert Hub, an informal innovation in collaborative practice that would inspire well over 100 similar community efforts over the decade to come. The original “hub” label soon yielded to a new name, the Situation Table, more widely accepted in other provinces. Today, it is still recognized under both names and on both sides of the Canada–United States border. I will in this paper refer to it as the Situation Table or, simply, the Table.

I begin by recognizing that from time to time, questions about the Situation Table will continue to be raised, as they would for any high-profile innovation, in various circles, including mainstream media, fringe media, social media, and most importantly, among sector-specific policy, practice, and academia communities. Most often, these discussions are well intentioned, aiming to advance and improve continuing innovation and systemic reform in all aspects of community safety, well-being, and social equity. At times, for reasons unknown to me, some of these discussions have also given rise to misinformed assumptions and false characterizations about what the roles, functions, and practices of the Situation Table actually entail. In this brief commentary, I offer my personal and professional observations as a brief recap of some of the most salient characteristics that have defined the Situation Table from the start—and throughout its multiple adoptions—and which might more accurately position the Table amid broader Community Safety and Well-Being (CSWB) ambitions.

In the interest of full disclosure, I have been involved with this innovation from the very beginning, including in our initial on-site observations in Scotland, and earlier, in authoring the emerging provincial strategy that provided the ideal context for whole-of-system experimentation. I also continue, among my other professional activities, to provide advisory and learning support to assist adopting communities in achieving the all-important fidelity at their Tables, ever mindful of my own decade of intense and productive deliberations with privacy officials across the entire system. All of these efforts have been undertaken across Canada and in the United States, together with my business partners, and with other advisory colleagues, senior policy officials, and front-line practitioners from every sector of the human services.

It is not my purpose in this paper to explain in depth the theory and practice of the Table. Such information is widely available and better addressed in another time and place. Rather, this paper derives from my deep respect and admiration for the originators in Prince Albert, and for all the others who have since invested their time, learning and passion in the mobilization, support, and operations of their own community Tables. As we collectively reach this one-decade milestone, it seems to me important to revisit some of the framing truths, and to dispel some of the most lingering myths, about this innovative practice that was conceived and designed to bring immediate support to those who need it most and to inform and lead us all towards lasting, yet still too elusive, systemic reform.

## What’s It All About?

The Table is sometimes inaccurately described as a “police program” or a “crime reduction model.” It is not, and it was never conceived as such. The original architects of the model took early steps to distinguish the Table as a multi-sector collaboration aimed at achieving immediate and safer outcomes for persons, families, and communities experiencing what they came to define as *acutely elevated risk* (AER), as viewed across a range of disciplines and their

**Correspondence to:** Norman E. Taylor, Community Safety Knowledge Alliance, 120 Sonnenschein Way – Main, Saskatoon, SK S7M 0W2, Canada.  
**E-mail:** ntaylor@cskacanada.ca

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respective risk indicators. At the same time, the Table was recognized as a valuable new source of insights into those places where the system was chronically failing to meet the needs of those it is intended to serve. This is also the same combined thinking that ultimately led to the CSWB language that has since taken on strong roots across Canada, and which gave rise to this Journal.

Criminal involvement is just one among the more than 100 risk factors that may form a basis for introducing a situation to a Table, and it is just one among many bases for the subsequent interventions designed and mobilized to reduce composite risk, and to connect people to immediate and essential supports. That said, it can sometimes be among the more prevalent factors listed in the Risk Tracking Database (RTD). The RTD is a somewhat standardized method used at most Tables for capturing and analyzing the strictly de-identified information about the nature of composite risk presenting, and the respective roles of collaborating partners. Experience has consistently shown, however, that criminality is almost never a single or even primary indicator of acute risk in Table situations. More common are such leading or combining factors as victimization, mental health issues, absent parenting, substance use, inadequate housing, chronic school absence, negative peers or environments, to name a few.

Some media reports have correctly identified that police will bring a proportionately higher number of situations to the Tables, averaging in the range of 60% to 80%, depending on the community involved. This is due in equal parts to the 24/7 nature of policing and to the high exposure many police officers will regularly have to persons and/or families in varied forms of distress. Others have also noted that the police are highly represented in the risk tracking data as a frequent “assisting agency” in Table interventions. However, these references often fail to note the significant fact that this is very different from being the “lead agency.” Typically, police are under-represented as the lead agency in Table-driven interventions (i.e., often in fewer than 10% of the interventions). This is a vital distinction in that it reflects the important role of the Table in facilitating responses that remain outside of the criminal justice system. If not for the collaborative triage and response made available by the Table, far too often a criminal justice response would occur simply by default.

Through careful discipline under the widely adopted *four-filter* progressive conversations used at many Tables, the informal collaborations are designed to yield more effective, more sustainable, more equitable, more supportive, and non-punitive responses.

Some reports have alleged that the Tables may be used as a basis for detecting and targeting criminal involvement and mounting police action in response. Well-trained Tables and their Chairs will ensure constant vigilance to avoid such situations should they be introduced at the Table. If, upon a brief de-identified introduction to the Table, an immediate police response is indicated (or any other punitive or mandated response, such as an immediate child protection action), the Table will quickly recognize that the situation does not meet the criteria to advance at the Table. In such situations, a unilateral or bilateral response may result, away from and altogether apart from the Table process, and with no further information ever introduced or discussed at the Table.

Table participants must recognize that not all situations can be mitigated by collaborative, risk-based intervention, and in particular, if situations have already advanced beyond AER and are essentially presenting at the “incident,” “emergency,” “crisis,” or “threat” level.

Sadly, there will always be situations in the community that will have already moved too far downstream, beyond the reach of supportive and preventive interventions. In response to such situations, our individual systems are well-equipped to take immediate, decisive, and appropriate action where it is required. In response to such situations—a child in immediate danger, a gun on the kitchen table, a knife in a school locker, an intoxicated person about to freeze on the street—the options are very limited, are typically perceived as more punitive to those involved and, often, are only temporarily and marginally effective as a result. To paraphrase a common sentiment among those responding to and facing such limited options: “*If only we got here yesterday, or even last week.*” Such is the essential ambition of the Table: preventing tragedy wherever it can be achieved, even knowing it will not always be able to do so.

### The Case for the Evidence

Throughout the past decade, there has been considerable discussion about the “evidence-based” nature of the Situation Table. Critics may point out that Tables have not been subjected to the Random Control Trial (RCT) evaluation. Much of this criticism originates from the field of Criminology, where RCT is widely recognized as the gold standard of evidence-based policing (EBP) practice. The early architects and most progressive adopters gave deep consideration to the available range of measures and methods for evaluation, and have taken an early and sustained view that Tables are not particularly conducive to RCT and certain other forms of quantitative evaluation for three primary reasons:

First, the Table has never been a program or a structure, and it is definitely not “a crime prevention program,” as discussed above. It is a structured informal conversation at which the evidence-based practices of all Table-active sectors apply at all times, along with all individualized standards of care, conduct, and research excellence. The Table provides a unique opportunity to examine situations through multiple lenses simultaneously, and simply to mobilize every sector that has an immediate—and supportive—contribution to make, with actors always operating within the bounds of their own respective disciplines.

Second, to attempt an RCT on the Table itself, as just one methodological example among many, could risk violating the careful privacy provisions embedded not only in the four-filter process of the Tables, but in the very nature of the complex situations they address. Early discussions with privacy experts consistently pushed back hard against any role in “follow-up study” at or by the Table itself. There are boundless opportunities for evidence-based practice and evaluation in every strand and at every stage of the care path, and each of these paths can and must continue to operate within its own strict disciplines and ethical frameworks. At the same time, it is worth noting there is overwhelming and recurring evidence in the Canadian and global literature, and in the ongoing research that guides each of these separate strands, that consistently confirms, documents, and supports



the vital importance of interdisciplinary collaboration to improve outcomes. It was an extensive multi-disciplinary study into this evidence that originally gave provincial authorities in Saskatchewan the confidence to embrace their whole-of-government commitment. This body of evidence has continued to grow, through such broad communities as the global Law Enforcement Public Health (LEPH) community, the World Health Organization, international EBP collaboratives, mental health and substance use communities of practice, educators, Indigenous community knowledge, and many more sources, reinforcing similar confidence in every jurisdiction that has since embraced the original concepts behind the Tables.

Third, to make any real attempt at a control group study might be to presume that a selection of situations of AER could be a) recognized in advance; and b) left unattended such that they do not receive the benefit of a collaborative Table response, in order to draw a comparative sample against those situations that do. This was rejected very early as a completely abstract and frankly absurd idea, and it would still be regarded as an irresponsible and unethical proposition by most well-informed Table practitioners.

Ultimately, the decision will always rest with community leaders whether to adopt and/or to sustain the local investment of energies that go into a Situation Table, and hopefully also to gather and make meaningful use of the anonymous risk-tracking data in service of more equitable CSWB outcomes and systemic reform. As such, most Tables across Canada have been subjected to rigorous and continuing forms of evaluation at the local level, usually (and ideally) across multiple dimensions and indicators of health and well-being, derived from the participation of a full range of human service sectors and community representatives. Several such studies have been published or produced as local and provincial or state-level government reports. Others have been published as research studies, using both qualitative and quantitative methods, and ranging from lived experience studies to economic analyses.

### A Duty of Care, But Let's First Do No Harm

Ultimately, keeping in mind that the Table is merely a “conversation” and neither a program nor an institution, the strongest evidence will continue to resonate from the broad range of extant literature on the value of and urgent need for collaboration among sectors and service providers. The most reliable source of “evaluation data” on this collaboration has and continues to be the community of well-qualified professionals from all sectors. Most have consistently expressed the value the Table holds for them in their own work, as an effective and responsible mechanism to achieve better and more frequent collaboration, at the Table and beyond, allowing them to more effectively mobilize and achieve essential connections to service and compassionate support for clients facing composite risk, many of whom have been otherwise and too often failed by the fragmented nature of our complex systems.

Many of these same committed practitioners will tell you that it is never easy to operate differently, as the Table calls for them to do once or twice a week. Institutionalized patterns and siloed cultures can be very confining, and

rewards often flow more freely to those who simply reinforce them. Thus, it takes a lot of mutual support at the Table to help one another navigate the careful balance between doing no harm to the privacy of individuals and families and recognizing there is a shared duty of care in complex situations of acutely elevated risk, which if and when they can be seen, must be acted upon.

Would-be critics of the Situation Table might take a page from the compassionate experience of these Table practitioners. If we truly want the health, human services, and criminal justice systems to learn how to function better, to overcome the inequities of systemic racism and classism, and to fill the empty spaces of healing and support left by well-intentioned but fragmented service provision, it may be incumbent on all of us to extend a similar duty of care, and just maybe a bit more due respect, to those very professionals who, for ten years now, have been seeking and acting responsibly on better ways.

If you're among those few who are simply chasing a controversy of your own making, I might recommend you first read through a decade of inquests, death reviews, and similar incident reports available from every health, social, and justice sector. We are all very familiar, of course, with those tragic use-of-force situations that still arise too often in police responses, many of which have resulted from other upstream system *failures-to-connect*. We are also shocked when we learn of inequitable and dehumanizing treatment in hospitals, clinics, or out on community sidewalks that have led to tragic outcomes in the absence of sufficient supports. And please, don't even get me started on the recurrence of very avoidable tragedies arising from inadequately supported situations of intimate partner violence, domestic violence, sexual, gender, and hate-based violence, and child negligence, exploitation, and abuse.

So common in many of these reviews will be after-the-fact discoveries of *who did not know what they needed to know* in order to make a difference. Even more shocking is how often the discoveries will be about what *too many already did know*. Those, who were somehow impeded in their ability to reach outside of their own professional scope, and to reach across to the *others who also knew*, and to responsibly mobilize collective supports to those who desperately needed them. Those, who might have *gotten there yesterday, or even last week*. Those, who might have taken but who did not take the collective, real time, supportive action necessary to ensure that the failures in our systems might, this time, do no harm.

There hides a story that still deserves to be told.

Meanwhile, after a decade of their real and widespread innovations in CSWB, I invite you to join me in saluting those who continue to change the game, through their courageous efforts and evident successes at Situation Tables, and in a host of other collaborative initiatives across our nations.

### CONFLICT OF INTEREST DISCLOSURES

The author has continuing business interests that include providing advisory services to communities, police services and related human service agencies.

### AUTHOR AFFILIATIONS

\* Community Safety Knowledge Alliance, Saskatoon, Saskatchewan, Canada.



# Leadership approaches in law enforcement: A sergeant's methods of achieving compliance with racial profiling policy from the front line

Paul B. Rinkoff\*

## ABSTRACT

This research aims to fill a void in the extant policy implementation literature that has overlooked the leadership contribution of sergeants to the successful adoption of policy decisions by front-line police officers. Using a qualitative approach and a sociological institutionalism perspective, and focusing on the racial profiling policy of a large North American municipal police organization, 17 sergeants representing 17 divisions (precincts) were interviewed. This research does not aim to assess the efficacy of the selected policy but, rather, examines leadership and supervisory perspectives relating to implementation and compliance. The findings demonstrate the methods used by sergeants to influence and achieve the compliance of front-line police officers with the racial profiling policy. Methods include auditing, being present, training, encouraging, rewarding, and disciplining. To explain these methods, it is theorized that sergeants blend two leadership approaches to ensure front-line officers conform to the racial profiling policy: an authoritative leadership approach and a supportive leadership approach. This study emphasizes the leadership contributions of sergeants when attempting to implement perceived controversial or unpopular policy—in this case, racial profiling policy—in a police organization and contains implications for law enforcement leaders, oversight committees, policy writers, and all government legislators who oversee public safety and security.

**Key Words** Supervision; policy; police; policy implementation.

## INTRODUCTION

Since the seminal writings of Lipsky (1980), which focused on the administrative discretion of “street-level bureaucrats,” researchers have sought to explain the failure of front-line workers to commit and respond to explicit policy decisions provided by and implemented from the “top” (Brunetto & Farr-Wharton, 2005; Ford, 1999; Howlett & Ramesh, 2003; May & Winter, 2009; Riccucci et al., 2005; Young, 2000). For government officials and public sector leaders, this issue remains critical because the commitment and responses of “street-level implementers” continues to be thought of as necessary when attempting to achieve desirable policy outcomes (Ewalt & Jennings, 2004).

Comparatively, police organizations have been charged with “implementation failures” inherent to the unpredictable and conflicting commitment and responses of front-line officers to policy decisions—especially those that are

perceived controversial (Skogan, 2008). Resonant in policing scholarship is the finding that general resistance to policy implementation is common and fierce (Buerger, 2002; Phillips, 2015; Skogan, 2008; Stanko, 2007; Warren & Tomaskovic-Devey, 2009). One explanation for this phenomenon relies on the influence of external and internal factors that exist in a police organization that can facilitate or hinder front-line officers conforming to policy decisions (Rinkoff, 2018). Internal factors stem from a police organization's unique authoritative structure and composition: one that is hierarchical, professionalized, centralized, and differentiated from others by common frames of reference, common language, and assumptions—forming a unique culture and contributing to a unique sociological perspective among police officers (Schein, 1993). This monolithic conceptualization of “police culture” (see Banton, 1964; Cain, 1973; Rubinstein, 1973; Skolnick, 1966; Westley, 1970) has long been acknowledged as a significant contributor to the

**Correspondence to:** Paul B. Rinkoff, PhD, Policy Studies, Ryerson University, Policy Studies, Ryerson University, Toronto, ON M5B 2K3, Canada.  
**E-mail:** [prinkoff@ryerson.ca](mailto:prinkoff@ryerson.ca)

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informal norms and values that shape the everyday decisions and practices of police officers (Loftus, 2010). On the other hand, there is a growing argument that the depiction of a singular, universal culture that unites police officers and ascribes “normal” attitudes and outlooks may be overstated (Paoline, 2003; Paoline et al., 2000). Instead, changes in the composition of police organizations and philosophies over the past three decades, such as professionalization, bringing increasing standards of education, more racialized and female officers, more officers from different social and cultural backgrounds, and other developments in policing services (a shift to community policing models and a customer-service orientation) (Loftus, 2010) have led a number of scholars to argue that police culture should be conceptualized in the plural. The advantage of the rearmost view acknowledges the variable and contextual quality of relations that exist between the police and the public, which has the potential to impact the compliance choices of police officers and, in doing so, influence the methods used by sergeants to control such activities at the street level (Brown & Benedict, 2002; O’Connor, 2008; Tyler, 2005).

Not only is it important to understand how the environmental and structural factors of police organizations impact choices of front-line officers to conform to policy, but it is equally important that we continue to grow our understanding of the level of influence, if any, that front-line supervisors have on these choices. This study further explores this latter area of inquiry, seeking answers in the unique occupational environment of police officers, in an attempt to confirm, as supported by the literature, that front-line supervisors—in a law enforcement context—are capable of influencing front-line compliance with policy decisions.

### The Role of Sergeants in Police Organizations

The literature shows strong support for the ability of front-line supervisors, namely sergeants, to leverage occupational culture, in particular aspects of rank and structure, to achieve policy goals. This is primarily due to the inherently top-down managerial style of police organizations—one that remains militaristic and bureaucratic (Chan, 1997). Sergeants act as a facilitating layer of management and are relied upon to influence the administration of new and existing policy at the street level (Engel 2001; Skogan, 2008). This influence has been deemed critical for achieving the successful implementation of, and compliance with, new or reformed policy (Britz & Payne, 1994; Charles et al., 1992; Ingram & Weidner, 2011; Phillips, 2015; Skogan, 2008; Skogan & Hartnett, 1997). Based on these findings, it is unsurprising that Engel and Worden (2003, p. 133) have proclaimed sergeants “the most proximate and perhaps most potent bureaucratic force” in police organizations, when it comes to policy implementation and compliance at the front line.

### How Do Sergeants Lead?

Front-line police work is unique and creates challenges for sergeants especially when assessing and achieving conformity (Ingram & Weidner, 2011). Johnson (2015) suggests that three issues complicate the supervision of front-line officers. First, the complexity, work task ambiguity, and subjectivity of police officer responses to citizen needs make it problematic for sergeants to provide consistent and effective feedback.

Second, police officers are constantly juggling conflicting goals and performing duties of a contradictory nature, rendering it difficult for sergeants to supply specific guidance to officers on how best to execute their responsibilities. Third, due to the larger number of police officers relative to sergeants and the general low visibility of officer assignments, it is not possible to acquire consistent firsthand knowledge of how officers are performing.

Additional leadership challenges for sergeants stem from front-line officers’ ability to exercise a high degree of discretion both in their choice of self-initiated activities during “unassigned time” (Famega et al., 2005) and in their judgements related to how, when, and to whom they apply internal policy or legislation (selective enforcement) (Wortley, 2003). Chan (1996) also emphasizes the sizable amount of discretion that characterizes front-line policing and suggests that these working conditions, combined with low visibility and minimal supervision, are a recipe for police practices that tend to bypass or defy legal procedures and formal policies. Compounding this phenomenon is the anomalous relationship that exists between front-line officers and their supervisors—one often defined by uncertainty, suspicion, cynicism, and distrust stemming from the potential for scrutiny and punitive outcomes when the officers are found to be failing to conform to departmental policy or the law (Johnson, 2015; Paoline, 2003). These challenges underscore how important it is for sergeants to adopt a leadership approach that effectively ensures front-line officers conform to unpopular policy decisions.

Engel and Worden (2003) help inform our understanding of the leadership approaches and methods used by sergeants at the front line to achieve policy objectives. In their work, they introduce two leadership models: the “command model” and the “exchange or bargaining model.” In the command model, supervisory influence relies on formal authority to achieve compliance with rules and procedures. Alternatively, in the exchange or bargaining model, the capacity to achieve compliance is proportionate to the rewards offered to subordinates. These two models allow us to further explore the complexities of conformity and leadership in a police organization and assist us when unpacking the broader environment or “institution” in which a sergeant operates. These types of application and analysis are essential since the operational environment of a sergeant is not static, nor does a sergeant lead or influence, make decisions, or provide direction to front-line officers from within a vacuum.

### The Significance of Examining Racial Profiling Policy

Racial profiling has been characterized as the most recent expression of hostility that defines the historical and problematic relationship between the police and racialized communities (Glover, 2007; Russell, 2001; Smith, 2007; Weitzer & Tuch, 2002, 2004). Its association with abusive policing practices (Gross & Livingston, 2002; Ramirez et al., 2000; Tanovich, 2006) has led to the popular term “Driving while Black” (Harris, 1997, p. 546) and an emphasis on “Black crime,” “Black criminality” (Tator & Henry, 2006, p. 20), and “Blackness as an indicator of criminal tendencies” (Carter Jr., 2004, p. 20).

Amid tenacious advocacy from politicians, legal and civil rights groups, academics, journalists, and activists,

many police organizations across North America have implemented policies designed to prohibit racial profiling. These implementations are critical given that “racial profiling policies” have been reported to promote more racially equitable policing and improve relations between police officers and racialized communities (Miller, 2013).

In the case of the racial profiling policy (the policy) under review, its measures were designed to regulate voluntary police–citizen interactions (those outside of detention or arrest) to ensure that they are conducted without bias or discrimination (Ministry of Community Safety & Correctional Services, 2016a). For instance, the policy’s measures require police officers to inform citizens of the reasons for any voluntary interaction and their legal rights, provide “receipts” to citizens after any such interaction, and participate in enhanced diversity training (Ministry of Community Safety & Correctional Services, 2016b).

Despite this policy’s best intentions, many rank-and-file officers have suggested that its “unpopular” implementation comes at a great cost to public safety, instilling perceived controversy regarding its practice among officers (Gillis, 2015). This observation is consistent with other implementations of racial profiling policies by police organizations in North America (Fridell et al., 2001; Klinger, 2004). It is the perceived controversy of this policy held by some front-line officers that hinders the policy environment and provides us an opportunity to further inform our understanding of how sergeants—acting as a facilitating layer of management (Skogan, 2008)—direct, control, and secure compliance (Iannone et al., 2009) in ways that may be critical for achieving planned outcomes.

## METHODS

A qualitative research methodology was used, allowing a variety of opportunities for real-life experiences to inform policy-making and policy decisions (Graham & McDermott, 2006). In addition, the current study relied on a sociological institutionalism perspective—often employed in research involving specialized “organizational fields” in the public sector—aiming to produce a “detailed history of the institutionalization of specific ideas or norms in organizational settings” and “thick descriptions of subtle and dynamic processes, which are not usually easily apprehended by their subjects” (Lowndes & Roberts, 2013, p. 33).

To further our understanding of the leadership contributions of sergeants, we examined the key methods used by sergeants to influence and achieve conformity of front-line police officers to the policy. Seventeen sergeants from a large North American municipal police service (greater than 5,000 sworn officers), each representing a different division (precinct), were interviewed. Interviews ranged in length from approximately 45 minutes to two hours. The number of sergeants interviewed in this research is supported in the literature. On the higher side, Creswell (2013) suggests that a well-saturated theory can be achieved after 20 to 30 interviews amid several visits to the field. On the lower side, Guest et al. (2006) suggest thematic saturation may be reached in as few as 12 interviews when the data is rich, in-depth, homogeneous, and accurate. These sample sizes are further supported by consensus theory, which

postulates that small samples are sufficient to provide suitable information within a specific cultural context if participants possess some expertise related to the area of inquiry (Romney et al., 1986).

A survey questionnaire was also administered to the participants to supplement the data collected from the interviews. Additional data collected included demographic data, work experience, leadership style, communication style, policy knowledge, and other self-reported beliefs, attitudes, and behaviours. The use of this questionnaire is supported by Neuman and Robson (2012), who suggest that measurement and analysis of additional variables allow for additional testing of hypotheses, the inference of any temporal order, and the confirmation or denial of data collected during interviews with participants.

The interviews in this study were semi-structured and conducted face-to-face with participants. Advantages of face-to-face interviews include “high response rates and the longest questionnaires” (Neuman & Robson, 2012, p. 176) as well as richer and more detailed qualitative data (Berg & Lune, 2012). The data-recording procedures and the interview and observational protocols included note-taking, audio-recording, full transcription, and coding using QSR International’s NVivo 11.4.3 Software (NVivo Qualitative Data Analysis Software, 2017). The coding process facilitated the conceptual abstraction of data and its reintegration as theory (Holton, 2010). Thematic analysis permitted the extraction of concepts from the raw data, which were developed in terms of their properties and dimensions into key themes for inclusion in the findings (Braun and Clarke, 2006; Corbin & Strauss, 2008).

## Selection of Participants

The literature distinguishes patrol sergeants, termed “street sergeants,” from administrative sergeants, termed “station house sergeants” (Van Maanen, 1983). Patrol sergeants spend their time in the field directly monitoring officers. Administrative sergeants are more likely to remain inside a police building and engage in administrative tasks that do not include direct and regular monitoring of officers in the field. In order to ensure that all participants had experienced the process under investigation and were able to contribute to theory construction, this research sampled patrol sergeants only—a data collection method referred to as theoretical sampling (Corbin & Strauss, 2008) or purposive sampling (Miles et al., 2014). The divisional cross-representation of sergeants ensured that the interviewers got a sense of the varying factors, if any, that may influence a sergeant’s capacity to achieve compliance, and any differing degrees of resistance or conformity to the policy under examination from front-line officers.

## RESULTS

### Sergeant Demographics

Of the 17 participants interviewed, 88.2% were male and 11.8% were female. In terms of their age, the majority of the study participants were 35 to 44 (47.1%) years of age and 45 to 54 years of age (41.2%), which is to be expected, given that promotion to the rank of sergeant generally occurs after officers have been on the job for a decade or more. Participants



also reported relatively high education levels, with 35.3% reporting completing some university and 54.3% reporting holding a university degree or college diploma. This is also expected, given that completed post-secondary education is considered an important attribute of officers who wish to apply for promotion to the rank of sergeant.

The self-reported ethnicity of the participants was South Asian and Caucasian. Some participants preferred not to answer the questions about ethnicity and age, which may have led to underreporting the true number of racialized sergeants who participated in this study. Therefore, it is possible that the sample of sergeants was more ethnically diverse than what was reported. The majority of participants had between 16 and 20 years (52.9%) of policing experience and 1 to 5 years (64.7%) of supervisory experience. Only four participants (23.5%) had 11 or more years of supervisory experience. Lower levels of supervisory experience are expected as many officers over the past few years have been newly promoted to sergeant, likely replacing the retiring baby boomer generation.

### Analysis of the Methods used by Sergeants to Achieve Conformity

The thematic analysis relied on both the “prevalence” and “keyness” of a theme for inclusion in the findings (Braun & Clarke, 2006). It is also important to acknowledge that thematic saturation (Holton, 2010) was detected as early as the thirteenth qualitative interview. Data from the interview and supplemental questionnaire showed empirical support for the methods used by sergeants to achieve compliance of front-line officers with the policy. These methods were: (1) auditing; (2) being present; (3) training; (4) encouraging; (5) rewarding; and (6) disciplining.

#### Auditing

Participants reported that reviewing interactions captured on audio or video files, radio transmissions, and related records is one way to discover non-conforming behaviours. Consequently, auditing activities motivate officers to conform to the policy. This finding is consistent with the literature, which suggests that sergeants may positively influence the compliance behaviours of police officers by regularly reviewing their activities (Buerger, 2002; Ingram & Weidner, 2011; Schafer & Martinelli, 2008; Stanko, 2007). As one participant stated:

Anytime an officer puts over [broadcasts on the police radio] I'm stopping to investigate one [person]. There are procedures in place: that they activate the camera, activate their microphone, and do everything they can to make sure the investigation takes place in front of the, uh, recording system. I'll make mental note of that stop, I will go back in a day or two to review. If I couldn't attend myself, I will review the video, see how they did, see how their approach was, see what they got out of it, was it within the legislation?

#### Being Present

Participants indicated that they are also likely to discover non-conforming behaviours of officers when at hand, intervening

when necessary, and offering guidance. Participants asserted that the presence of sergeants at radio calls motivates their officers to conform to the policy. This finding accords with the previous scholarship, which reports that “active” supervisors, who spend more time in the field overseeing their officers, will have a positive (conforming) impact on the behaviour of their officers (Engel, 2000). One respondent disclosed:

I have to make sure as a supervisor that they're not stopping anybody, uh, for no reason. Um, that they're not profiling, uh, so, and by doing that, it's about being out there and watching to see what they do.

#### Training

Participants conveyed that if officers are properly trained to understand the requirements of the policy and how to apply it on the road, they are more likely to conform to it. The participants advised that they increase their officers' familiarity with the policy by personally reviewing it with them and by developing in-house training initiatives. This finding is also supported by the scholarship, which suggests that proper training can have a positive impact on the activities of police officers (Bradstreet, 1997). As one respondent explained:

We did a bunch of scenarios, “what-if” situations, and we talked about it as they became more familiar with it. It was almost like a light bulb went off and some of them, like okay this really isn't a big deal, we're still doing what we normally do, you just have to articulate, you know what I mean, articulate why you're doing it a little bit more and they realized it wasn't a huge deal.

#### Encouraging

Participants explained that if they spoke with front-line officers in motivational ways and provided examples of the benefits of conforming to the policy, they observed that their officers were more driven to follow the rules. Participants described how they would offer their officers “protection” from unjustified allegations from either the public or management in exchange for conforming behaviours. This finding aligns with the literature, which demonstrates that “supportive sergeants” make their officers feel more reassured when executing their duties and less likely to face discipline if they make a mistake (Engel, 2001). As one respondent illustrates:

I was honest, I said, “this [the policy] is not gonna make our job any easier, that's the truth. I will be lying to you and I would lose credibility if I was to say it's going to make the job easier or better...I understand that, but the reason why we have to learn it, and the reason why you have to understand it, and the reason why you have to still value it as a tool, is...a circumstance may arise, where you consciously, and your police instincts are gonna put you in a position where you're gonna have to get somebody's, ask somebody their name right and if you're in that position you need to know what to do.”

### Rewarding

Participants admitted that they will reward police officers either formally (for instance, a letter in their personnel file) or informally (for instance, via peer recognition, preferred assignment, or approved time off) when they demonstrate conforming behaviours. Participants reported that the act of rewarding encourages similar behaviours in other officers. This finding aligns with the scholarship, which suggests that rewards given by sergeants to officers are an effective means to get them to follow directives (Engel & Worden, 2003). In the words of one respondent:

I could speak to the detective, the detective sergeant, "hey that was great work by officer A, that's great work." Maybe that detective sergeant that hasn't even spoken to that officer, actually goes up and says, "you know I really appreciate it"...that means a lot to a worker, a handshake, more than a lousy 4 hours or 8 hours [paid reward]. Sometimes a "thanks, that's a good job" you know, to a real police officer that's a big deal.

### Disciplining

Participants conveyed that one of their roles is to hold officers accountable and discipline officers when they do not conform to policy in formal ways (including documentation in their personnel file, reduction in their pay, demotion, or loss of their job) or in informal ways (such as warnings, embarrassment in front of their peers, undesirable assignments, or refusal of time off). This finding is consistent with the literature, which suggests that in many bureaucratic organizations, administrators punish employees in cases when they fail to comply with orders (Redlinger, 1994). As one officer noted:

It all comes down to the severity of what they've done... But at the end of the day, that's a risk that has to be identified quickly and stomped on...It all depends on the officer and their history. Is there a history of this? Then maybe it would have to result to putting it to paper. Is this a one-off situation, where maybe I'm speaking to and explaining, going over procedure, going over, this is what you did, let's watch the video, what were you thinking here? You know, something like that. But if you have a person that had a history of non-compliance of different types of things, you have to deal with it more seriously because it's only going to grow.

The above findings demonstrate support for the analytical model presented below in Figure 1, illustrating the methods used by sergeants to achieve compliance of front-line officers with the policy.

## DISCUSSION

The "command model" and the "exchange or bargaining model" of leadership developed by Engel and Worden (2003) complement the above findings, and have the ability to further our understanding of them. With appropriate integration, it is theorized that sergeants select methods that are used to achieve the compliance of front-line officers with the policy

by blending the payoffs of two leadership approaches: authoritative and supportive leadership.

### The Authoritative Leadership Approach

The effectiveness of an authoritative leadership approach is supported by the work of Engel and Worden (2003), who, in proposing a "command model of supervisory influence," theorize that the actions and decisions of front-line officers are restricted through the application of a sergeant's formal authority. In this study, the methods used by sergeants that align with an authoritative leadership approach include: "auditing," "being present," and "disciplining." For instance, the findings suggest that auditing by sergeants regulates the amount of discretion front-line officers enjoy when interacting with members of the public. This is particularly important because the literature suggests that officers' abilities to exercise a high degree of discretion in their choice of self-initiated activities (for instance, which members of the public officers choose to investigate) is problematic for achieving conformity (Chan, 1996; Famega et al., 2005; Van Maanen, 1983). The problem of front-line officer discretion is further magnified when officers are able to exercise considerable judgment related to how, when, and to whom they apply rules and regulations (Wortley, 2003). As one participant stated:

We have a compliance check that we do every single day... watching a video, depending on what its title, like criminal...provincial offences, we will watch those...everything is being recorded...to ensure that they're [police officers] being professional.

Nevertheless, it is important to point out that an authoritative leadership approach may deemphasize the importance of seeking community feedback and approval, deprioritize community relations, and discourage new initiatives that depart from aggressive law enforcement tactics (Engel, 2001). These purported trends, combined with the inadequacies of the top-down command structure abstracted from the literature, suggest that an authoritative leadership approach, when used by sergeants exclusively, may not prevent front-line officers from failing to conform to the policy. Therefore, it may be beneficial for sergeants to supplement their methods with a supportive leadership approach for the reasons discussed below.

### The Supportive Leadership Approach

A supportive leadership approach agrees with Engel and Worden's (2003) "exchange or bargaining model of supervisory influence," which postulates that the actions and decisions of front-line officers are proportionate to the support and rewards offered. Rewards might consist of protection from internal discipline, but may also include small favours, as was noted in this study's findings. In addition, a supportive leadership approach may be more conducive to the contextual and subjective front-line environments that officers encounter (Johnson, 2015), enabling sergeants to modify the type of support they provide to the specific needs of their officers. In this study, it is proposed that the methods used by sergeants that align with a supportive leadership approach include: "rewarding," "training," and "encouraging." For instance, rewarding may be considered

a supportive leadership approach because it motivates front-line officers to conform to the policy in the absence of direct supervision. According to one participant:

A lot of benefit comes from simply having your supervisor walk by you in and amongst your peers and go, “really good job on that, keep up the good work.” It’s a 10-second piece of a day that has a ripple effect not only on the officer continuing the work in that ethical, professional, whatever the law, policy, manner, but it has a ripple effect on others that are listening to it.

In this case, rewarding influences front-line officers to make decisions that surpass policy compliance expectations for a grander purpose: to seek recognition from peers, superiors, and the public in situations that do not require the physical presence of a supervisor. This is significant because sergeants cannot be present at all times and supervise all front-line activities (Kappeler et al., 1994). Therefore, a supportive leadership approach is compelling because it encourages officers to conform to policies without explicit orders from sergeants or their direct presence.

However, it is important to recognize that a supportive leadership approach used in isolation may be unsuited to achieve adequate levels of compliance with policy decisions. This is in large part due to the lack of emphasis that this approach places on holding officers accountable for their actions when they do not conform to directives (Engel, 2001). This shortcoming, conveyed in the literature and in the findings of this study, offers a compelling case for sergeants to combine this approach with the authoritative leadership approach discussed above.

In sum, to achieve the compliance of front-line officers with the policy, it is proposed that sergeants adopt the methods identified in this study: (1) auditing, (2) being present, (3) training, (4) encouraging, (5) rewarding, and (6) disciplining and, in doing so, benefit from the payoffs of two leadership approaches: authoritative and supportive. Importantly, these two leadership approaches are not duelling or mutually exclusive and can be combined in effective ways to achieve greater levels of compliance from front-line officers.

Figure 1 illustrates the integration of the two leadership approaches, with the six methods used by sergeants to achieve compliance of front-line officers with the policy.

### Policy Implications

The findings support a number of policy implications for law enforcement leaders, oversight committees, policy-writers, and all government legislators who oversee public safety and security. First, it must be recognized that sergeants do not lead policy implementations from within a vacuum. On the contrary, in a police organization, particularly at the front lines, there is a conflux of environmental and cultural factors that may facilitate or hinder a sergeant’s capacity to ensure front-line officers conform to policy decisions. These factors are often contextual and may vary across the police organization from one police division to another. For instance, Sparrow et al. (1990) and Cain (1973) refer to the unique social, political, legal, and organizational contexts that differ among officers and that may operate to shape the



**FIGURE 1** Analytical model illustrating the leadership approaches and methods used by sergeants to achieve the compliance of front-line officers with the racial profiling policy

culture. Similarly Reiner (2010, pp. 116–117) suggests that an officer’s cultural experience is “neither monolithic, universal, nor unchanging” and embodies the distinctive problems that operate in an officer’s environment. Consequently, what might represent the ideal implementation environment for one sergeant may be different from the ideal environment for another. Therefore, the leadership approaches and the methods used by sergeants, particularly when attempting to implement policy that is perceived to be controversial, should take into account the variable nature of the front-line environment, contextualizing directives when necessary to reduce the likelihood of policy failure.

Second, it is important to recognize that sergeants are integral for communicating and translating new policies into action (Skogan, 2008). Moreover, it is clear from the literature that sergeants are “powerful in the change equation” and can contribute to the legitimacy of a new policy or program (Brunetto & Farr-Wharton, 2005, p. 226). Accordingly, police leaders and executives ought to consult sergeants at the outset of the development of a policy so that new or unpopular implementations are less likely to experience resistance when delivered to the front line.

Third, in relation to racial profiling policies, the findings demonstrate that when sergeants are present during a police–citizen interaction, front-line officers are more likely to conform to policy decisions. Therefore, to improve levels of compliance, racial profiling policies should clearly outline when the presence of a sergeant is necessary. Mandating the presence of a sergeant may ensure an increase in compliance from front-line officers when compliance is expected to be, or has historically been, low or in other perceived controversial policy environments. This is further supported by the research of Bradstreet (1997), who concludes with certainty that it is the sergeant who is best positioned to provide objective assessments of policy outcomes administered at the front line.



## CONCLUSION

This study demonstrates additional support for the critical leadership contributions of sergeants when attempting to implement perceived controversial or unpopular policy in a police organization. The leadership approaches and methods presented in this study should be examined by sergeants, leaders in law enforcement, and policy-writers so that they may further their understanding of the challenging policy environments which operate at the front lines of police organizations and improve compliance with policy decisions when and where it matters the most.

## CONFLICT OF INTEREST DISCLOSURES

The author acknowledges his dual identity as researcher and policing professional and declares that there are no financial conflicts of interest.

## AUTHOR AFFILIATIONS

\* Policy Studies, Ryerson University, Toronto, Ontario, Canada.

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