People in Crisis: Understanding the Impact of a Mental Health Response Unit on Police Culture

By

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Abstract

The fatal Canadian police interactions involving Sammy Yatim, Robert Dziekanski, and Paul Boyd played a major role in developing and implementing mental health units (MHUs). Based on interview and direct observation data, this thesis examines the impact of a Canadian MHU on police culture. I argue that there are a number of possible cultures that can emerge within police organizations. This thesis demonstrates the pervasiveness of the perception of danger and the resulting camaraderie amongst MHU members. Specifically, I evaluate the perception of danger held amongst MHU members, their conceptions of partnership, and the importance of defending and assisting colleagues. Herein, I also argue that this MHU gives rise to an emerging service-based conceptualization of police culture. Here, I recognize the fluidity of police culture by examining the service-focused nature of the MHU, the application of discretion, and the measurement of success and emotional commitment amongst MHU members.
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Introduction

The fatal police interactions involving Sammy Yatim, Robert Dziekanski, and Paul Boyd represent several instances where Canadian police agencies failed to effectively respond to persons in crisis\(^1\) (hereinafter PIC) in the community. Canadian police organizations are tasked with responding to PIC throughout the community on a daily basis as a result of a lack of community services and a reduction in government spending for mental health support (Teplin, 2000). As Lurigio, Smith, and Harris (2008) note, the deinstitutionalization movement throughout the 1950s and 1960s has led to an increase in contacts between PIC and police organizations. As a result, Dorothy Cotton (2004) describes frontline police officers as “de facto mental health providers” as they are on the frontlines responding to those in crisis (135). This has also led to what Abramson (1972) famously decried the ‘criminalization’ of the mentally ill. This refers to PIC being “processed through the criminal justice system instead of the mental health system” (Lurigio, 2013, pp. 763). The vast majority of interactions between the police and PIC, however, end without violence (Coleman & Cotton, 2014). Nonetheless, a number of Canadian police organizations have acknowledged the challenges associated with responding to the complex needs of this vulnerable population.

Due to the nature of their occupational environment, police are authorized to intervene and apprehend PIC. Many jurisdictions throughout Canada and the United States have legislation extending such powers to frontline police officers (Bittner, 1967). In Ontario, for example, police officers are authorized under section 17 of the Ontario Mental Health Act to apprehend PIC if

\(^1\) I use the term persons in crisis (PIC) to refer to any person in the community who appears to be suffering from either mental illness or any substance abuse related disorder. This often involves individuals who have stopped taking their medications, or who are experiencing a situational mental health crisis (e.g., difficult financial situations, stress from lack of employment, experiencing the loss of a family member, etc.).
they pose a danger to themselves or others in the community (“Mental Health Act”, 1990). Acknowledging the ineffectiveness of frontline police officers’ responses to PIC—and in order to more effectively respond to the complex needs of PIC—a number of police agencies in both Canada and the United States have developed and implemented specialized mental health units (hereinafter MHU). Although police organizations are heavily criticized for their responses to PIC, these MHUs represent an effort on behalf of the police to more effectively serve clients suffering from either mental illness or substance abuse related disorders. These speciality units can take a number of different forms but often involve partnerships between mental health agencies (including hospitals) and police organizations. The aim of a MHU is to more effectively respond to the complex needs of PIC by involving mental health professionals with knowledge of de-escalation strategies, medications, and signs and symptoms of mental illness.

These MHUs also represent an emerging culture within police organizations. Police culture, generally speaking, refers to a distinct system of informal internal control within police organizations that guides police officers’ conduct through the identification and preservation of general attitudes/beliefs about the job (Chan, 1997; Goldsmith, 1990; McCarthy, 2013; Paoline, 2003). In other words, police culture specifically distinguishes between the formal rules of the organization and what, in reality, guides police officer behaviour in practice (i.e., frontline policing). The academic literature juxtaposes two competing conceptualizations of police culture. One suggests police culture is static and operates similarly across police organizations and police officers (Crank, 2014; Loftus, 2010; Skolnick, 1966). The other, however, suggests police culture is dynamic and subject to both spatial and temporal development (Chan, 1997; Paoline, 2003; Terrill & Paoline, 2015).
In this thesis, I argue there are a multiplicity of possible police cultures within a given police organization. My aim is to present a conceptualization of police culture that acknowledges the pervasiveness of certain characteristics of an overarching police culture (i.e., applicable to the organization and its members)—namely the perception of danger and the camaraderie amongst police members—but one that also recognizes its fluidity and potential for change. Specifically, I ask how MHU members (both police officers and mental health professionals) challenge or reproduce characteristics of traditional conceptualizations of police culture. Most notably, I argue this MHU represents an emerging service-based conceptualization of police culture within this particular police organization, thus challenging traditional claims that policing is inherently focused on crime-enforcement. As Peter Manning (1977) professes, the role of the police in society is both complex and multifaceted. As a result, the police no longer fulfill only one responsibility but rather are tasked with a multitude of responsibilities ranging from crime enforcement initiatives to service-based initiatives. While certain characteristics of traditional conceptualizations of police culture certainly continue to persevere, claiming police culture is static and not susceptible to change is irresponsible. The culture of the police organization evolves with the changing responsibilities thrust upon the police organization—including responding to PIC in the community.

The responsibility to respond to PIC—largely as a result of the structural failures throughout society (i.e., the reduction in mental health resources)—has also brought into question the legitimacy of police organizations. The legitimacy of police organizations is a widely studied area within the policing literature. A number of scholars including Tom Tyler and Jeffrey Fagan (2008), Andrew Goldsmith (2005), and Steve Herbert (2006) argue public perceptions of legitimacy determine the success of a given police organization. In other words, if
the police organization is perceived as legitimate the public is more likely to cooperate with the police and help make the police organization more effective. As Reiner (2000), in my view, correctly argues, in order to have trust and confidence in the police organization, the police require a mix of ‘soft’ and ‘enforcement’ based initiatives. Combining these initiatives portrays an image of police who are committed to both serving the community and protecting the community from danger. Hawdon, Ryan, and Griffin (2003) further note that the public must trust the police based on the following four dimensions: priorities, competency, dependability, and respect. In terms of responding to PIC, then, the public must trust that the police have made it a priority to respond to such cases, are competent in those responses, and can be relied upon to provide an effective and respectful service to PIC. Goldsmith (2005) elaborates and suggests that police legitimacy is also dependent on answerability, meaning the police organization must be held accountable for their responses to PIC. In an earlier piece, Goldsmith (1996) identified a number of issues surrounding police accountability. Most notably, he claims that true accountability cannot be achieved when police organizations are tasked with investigating fellow members (Goldsmith, 1996).

Perceptions of legitimacy must evolve with the evolving mandate of the police. The public must evaluate the legitimacy of the police based on their responses to PIC in order to determine if they are an effective institution to respond to the complex needs of this vulnerable population. Throughout the academic literature, scholars have agreed upon the importance of the quality of the interactions between the police and the citizenry (Goldsmith, 2005; Harkin, 2015; Hawdon et al., 2003; Herbert, 2006; Kochel, 2010; Tyler & Fagan, 2008). This is what Tom Tyler refers to as procedural justice theory (often referred to as PJT), which refers to the police demonstrating fairness in their interactions with the citizenry (Harkin, 2015). In turn, this
perception of legitimacy will help police obtain public cooperation and, in theory, allow the police to deliver a higher level of service to the public (Tyler & Fagan, 2008). As Tyler (2011) posits: “the primary issue shaping people’s reactions to personal encounters with the police is whether or not the police exercise their authority in fair ways” (257). In terms of responses to mental illness, then, the police must demonstrate fair procedures and obtain trust from the public in order to be perceived as a legitimate institution to respond to PIC. Due to the early stages of MHUs in Canada, it is inappropriate to claim that these units are perceived as legitimate. The question of whether the police ought to be responding to PIC in the first place is still up for debate. Nonetheless, since the police are tasked with responding to PIC, deploying specialized MHUs are in the best interests of both the public and the police organization.

As Crank and Langworthy (1992) argue, rapid response systems embody the perceived legitimacy of the public’s inherent reliance on the police. The public expect the police to respond to emergency calls for service—regardless of what those calls may entail. As a result of the expectation of the police to respond to PIC, it is important to understand whether their responses are perceived as legitimate. It is reasonable to suspect that prior to the development and implementation of MHUs, the public perceived police responses to PIC as illegitimate. This may be a result of the lack of training police officers receive regarding mental illness (Bittner, 1967; Borum, Deane, Steadman, & Morrissey, 1998; Hartford, Carey, & Mendonca, 2006; Cooper, McLearen, & Zapf, 2004; Cotton, 2004; Godfredson, Thomas, Ogloff, & Luebbers, 2011; Hails & Borum, 2003; LaGrange, 2003; Senior, Noga, & Shaw, 2014; Sellers, Sullivan, Veysey, & Shane, 2005), or the negative interactions police have had with PIC in the past. The police often assume PIC are more prone to violence and believe they may need to respond more aggressively, which explains the academic literatures’ consensus regarding the notion that those suffering from
mental illness are disproportionately victims of violence at the hands of the police (Coleman & Cotton, 2014; Watson, Corrigan, & Ottati, 2004). This perception of illegitimacy will be compounded by negative interactions between the police and PIC—including the aforementioned cases involving Yatim, Dziekanski, and Boyd. In particular, the impact of the media in shaping public attitudes about the police is widely noted throughout the academic literature (Chermak, McGarrell, & Gruenewald, 2006; Dowler, 2003). As Hawdon and colleagues (2003) and Goldsmith (2005), among others, argue, experiences with the police play an integral role in determining their perceived legitimacy. Understanding the quality of the interaction between the police and their clients (in this case study, PIC) plays a role in determining their perception of legitimacy. As Hawdon and colleagues (2003) suggest, even hearing stories about how the police responded to PIC, for example, can play a role in determining the legitimacy of the police in a given community.

While the academic literature acknowledges the dynamic nature of police culture, to date no study exists that examines the impact of a specialized MHU on police culture. It is only recently that Canadian police organizations have implemented specialized MHUs to respond to the criticisms they have endured regarding their traditional responses to PIC. Following a review of the pertinent academic literature related to police culture, police discretion, and policing and mental illness, chapter two examines the pervasiveness of two key characteristics of police culture—the perception of danger and the resulting camaraderie. This chapter recognizes the pervasiveness of these characteristics of the overarching culture of police organizations. Chapter three, however, acknowledges the fluidity of police culture. I reject the notion that police culture inherently focuses on crime-enforcement initiatives. Instead, I argue the MHU represents an emerging service-based conceptualization of police culture. The MHU represents this particular
police organization’s response to PIC, and as such, reveals the fluidity of police culture. Claiming police culture is static and unchanging ignores the expanding mandate of the police, thus conceptualizations of police culture ought to recognize its fluidity and potential for change.

Methodology

The data for this thesis was collected over the course of nine months with a police organization in a major urban city in Canada. This city is considered by many to be a working-class city with a population between 250,000 and 750,000. The data was collected with a MHU represented by a formal partnership between the police organization and a local hospital. This unit is a primary response MHU as it responds directly to 9-1-1 emergency calls for service. This particular MHU is comprised of four police officers (3 male, 1 female) and four civilian mental health professionals (2 male, 2 female). The mental health professionals are employed by a local hospital and are seconded to this particular police organization. The police officers belonging to this MHU received speciality training with regards to mental illness (forty hours of Crisis Intervention Training) and were considered experienced (or ‘veteran’) officers within this particular police service.

The unit has the ability to respond to any calls for service, but prioritize, and are specifically trained to respond to any calls related to mental illness or substance abuse related disorders. The majority of calls for service come from uniformed patrol units seeking the assistance of the MHU, however the police dispatch system has begun directly dispatching the MHU in known cases involving mental illness and/or substance abuse related disorders. Two

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2 I have an ethical responsibility to protect both the identity of the police organization and the participants in this study. As such, some of the information regarding the description of the city and its demographics are adjusted.
separate research ethics boards—the Carleton University Research Ethics Board and the research ethics board for the hospital involved in this study—provided clearance to conduct the research for this thesis. For a more detailed and thorough review of the methodology please refer to Appendix A.

At the time this research was being conducted, this MHU represented the only specialized mental health response unit in Canada. As such, this project is an extreme case study (Flyvbjerg, 2006). Similar units exist throughout the United States, however in Canada, this police organization was the first to develop and implement a primary response MHU. This study consists of twelve in-depth, semi-structured interviews and thirty hours of direct observation (i.e., ride-alongs) with this particular MHU. Each member of the MHU was interviewed (four police officers, four mental health professionals, and one staff sergeant) and ranged in age from 35 to 52 (median age = 43). Interviews were also conducted with a senior police official, a use of force instructor, and the civilian manager of the mental health professionals. Of all the participants in the study, eight identified as male and four identified as female.

Detailed field notes were recorded throughout the course of the ride-alongs, and each interview was transcribed. This resulted in one hundred and ninety-six pages of raw data requiring analysis. Each file was added to QSR NVivo and was thematically analyzed. A detailed codebook including fifty-six codes was created and used to analyze the interview transcripts and ride-along field notes. Excerpts from each file were coded to a specific thematic code and was reviewed through secondary cycle coding. Primary cycle coding, according to Tracy (2013), is used to decipher the essence of the data. I used secondary-cycle coding to organize the data more effectively and develop more specific codes (Tracy, 2013).
This project employed inductive reasoning, meaning the analysis examined specific observations to make broader theoretical generalizations (Charmaz, 2008). It is imperative to emphasize that this project does not seek to make any statistical inferences. Instead, I seek to generalize the data to other cases that represent similar theoretical conditions (Yin, 1998). In other words, inferences can be made from the results of this project to other police organizations with both similar demographics and similar specialized MHUs. Flyvbjerg (2006) elaborates and claims that generalization is overrated in social science research and even non-generalizable studies produce knowledge in a given field or society. Furthermore, as Flyvbjerg (2006) demonstrates, knowledge derived from case-study research is central to knowledge production since “human behaviour cannot be meaningfully understood as simply the rule-governed acts found at the lowest levels of the learning process” (Flyvbjerg, 2006, pp. 6). In this study, I used both interviews and direct observation in an attempt to triangulate the data to render my claims more valid (Denzin, 2012; Flick, 2004). In support of Warren (2002) and Yin (1998), Denzin (2012) maintains that triangulation (the use of multiple methodologies) “reflects an attempt to secure an in-depth understanding of the phenomenon in question” (Denzin, 2012, pp. 82).

The section below will review the academic literature relating to police culture, police discretion, and policing mental illness. Chapter two evaluates the pervasiveness of two characteristics of traditional accounts of police culture—the perception of danger and the resulting camaraderie. The final chapter, however, acknowledges the fluidity of police culture and shows the service-based culture resulting from the MHU.
Literature Review

Police Culture

Police culture has been the subject of a plethora of academic research since the 1960s. The seminal work of James Q. Wilson (1968) on the styles of policing introduced the idea of a distinct culture found within police organizations. Wilson (1968) examined police organizations in eight American communities and his account suggests there are three styles of policing—the watchman, the legalistic, and the service styles. The watchman style of policing is encompassed by an emphasis on maintaining order in the community and through the extensive exercise of discretion (see the ‘Police Discretion’ section below) (Wilson, 1968). Police organizations that embody the legalistic style of policing, on the other hand, demonstrate a strict adherence to criminal law violations (Wilson, 1968). Organizations within this typology defer to formal methods to respond to criminality, leading to a reduction in the application of police officer discretion. Finally, the service style of policing stresses the importance of community service rather than law enforcement (Wilson, 1968).

As a result of Wilson’s (1968) Varieties of Police Behavior, various conceptualizations of police culture have emerged from the academic literature. Generally speaking, police culture refers to a distinct system of (informal) internal control within police organizations that guides police officers’ conduct through the identification and preservation of general attitudes/beliefs about the job (Chan, 1997; Goldsmith, 1990; McCarthy, 2013; Paoline, 2003). In other words, police culture specifically distinguishes between the formal rules of the organization and what, in reality, guides officer behaviour in practice (i.e., frontline policing).

Numerous debates surface throughout the academic literature regarding police culture. Arguably the most extensive debate is whether one distinct culture can be identified or whether
police culture is subject to change. The former posits a monolithic culture, arguing that there are inherent characteristics embedded within the police culture that can be uniformly identified across police officers and police organizations (Crank, 2014; Loftus, 2010; Skolnick, 1966). In contrast, the latter suggests that police culture is subject to temporal change and development, citing variations in the ways in which officers understand their occupation, role, and the citizenry (Chan, 1997; Paoline, 2003; Terrill & Paoline, 2015). The aim of this section is to review the academic literature as it pertains to police culture. The traditional conceptualization of police culture will be reviewed first, followed by a review of emerging conceptualizations of police culture.

Traditional Police Culture

Goldsmith (1990) relies on the work of Wilson (1968) and Skolnick (1966) to acknowledge the pervasiveness of characteristics of traditional police culture. The dominant elements of the traditional police culture include: the perception of danger in policing (Cullen, Link, Travis, & Lemming, 1983; Waddington, 1999), the bond of solidarity amongst police officers (i.e., camaraderie) (Chan, 1996; Chan, Devery, & Doran, 2003; Kleinig, 2001; Paoline, 2003), ‘machoism’ or a sense of mission (Manning, 1977; Reiner, 2000; Waddington, 1999), and cynicism (Caplan, 2003; Neiderhoffer, 1967). What follows is a review of the literature pertaining to each of these characteristics of traditional conceptualizations of police culture.

Police officers are subjected to a considerable amount of danger throughout the course of their careers. As alluded to in the introduction, the expanding mandate of the police requires frontline officers to respond to a variety of calls for service throughout the community. Police officers acknowledge the potential danger associated with frontline police duties, and stress that...
any call for service can subject officers to danger. The perception of danger is a key characteristic of traditional accounts of police culture. This perception of danger, however, may be unfounded according to the academic literature. Despite the fact that the academic literature consistently argues that being exposed to danger is rare as a police officer, traditional conceptualizations of police culture argue the perception of danger is a major element of police culture (Chan, 1997; Paoline, 2003). As Brandl and Stroshine (2003) contend, serious injuries and deaths amongst police officers are extremely rare. Similarly, Cullen and colleagues (1983) found that police officers understood their role to be dangerous only on occasion, yet this perception of danger was clearly established throughout this particular police service. Paoline, Myers, and Worden (2000) elaborate and claim that perceptions of danger are often disproportionate to the actual risks associated with policing—a finding supported by Cullen and his colleagues (1983). Resulting from this (arguably unfounded) perception of danger is the camaraderie police members build with one another.

The camaraderie amongst officers is persistently found within both traditional and contemporary conceptualizations of police culture. This camaraderie allegedly requires officers to defend and assist one another, to maintain secrecy throughout external investigations, and to hold negative views of superiors (Chan, 1997; Goldsmith, 1990; Kleinig, 2001; Paoline, 2003; Paoline, 2004; Reiner, 2000). As previously mentioned, policing is understood as a dangerous occupation—a view heavily supported by frontline police officers (Westley, 1970). As a result of the potential danger inherent in policing, it is in the best interests of all members to defend and assist fellow officers throughout the course of their day-to-day duties. Officers who fail to defend or assist their colleagues are subjected to social isolation and danger throughout the course of their careers.
Another element of camaraderie requires officers maintain secrecy throughout the course of external investigations. Janet Chan (1997) investigated this characteristic of police culture in her study of the New South Wales police department in Australia. In this account, Chan (1997) asserts that officers invoke the ‘blue wall of silence’ (Kleinig, 2001), perpetuating cases of police misconduct including racism, ignorance of minority cultures, insensitivities to traditions, prejudicial beliefs, and a reluctance to use professional interpreters (Chan, 1997). Westley (1970) also argues that secrecy and loyalty are dominant characteristics of police officers as a result of their aforementioned dangerous work environment. Other scholars such as Skolnick (1966), Wilson (1968), Bittner (1970), Goldsmith (1990), and Paoline (2003) have also come to similar conclusions regarding the expectation of maintaining secrecy throughout external investigations. Failing to cooperate with external investigations offers an additional avenue through which officers can display their loyalty to one another, further reinforcing their camaraderie.

To maintain their camaraderie, frontline police officers often hold extensively negative views of their superiors. Goldsmith (1990) asserts that police culture originally developed as a result of the negative perceptions associated with formal control exerted over frontline police officers by senior management. Senior officers, it is argued, run a militaristic-bureaucratic system built upon the premise that any transgression from the formal organizational codes of conduct will be scrutinized and punished (Goldsmith, 1990). Therefore, frontline officers fear unpredictable and punitive oversight and believe senior officers often set expectations too high for ‘ordinary’ police work (Paoline, 2003; Paoline, 2004). Paoline (2003) argues senior police officials only recognize frontline officers if they have done something wrong and are often only rewarded for strict law-enforcement activities (i.e., writing tickets and making arrests). Furthermore, he claims officers develop a mentality of ‘laying-low’ (also referred to as ‘covering
your ass’) and embrace the crime-fighting style of policing as a result of living in fear of administrative discipline (Paoline, 2003). Embracing the crime-fighter image becomes a necessary tool of survival within police organizations given the fact that frontline officers are recognized for assimilating into the role that management recognizes as the official mandate of the organization (Paoline, 2003).

Bittner (1970) and Brown (1988) both postulate that police officers’ state-sanctioned authority to use coercive force is the main factor that differentiates police from ordinary citizens. Maintaining and displaying the coercive authority afforded to police officers by the state is another dominant characteristic of traditional police culture. In their study of police organizations in Indianapolis, Indiana, and St. Petersburg, Terrill, Paoline, and Manning (2003) suggest that frontline officers who embraces traditional accounts of police culture are more likely to invoke their coercive authority than officers with non-traditional cultural attitudes. Paoline (2003) elaborates and argues that because the police are afforded such significant coercive powers, they feel they are expected to continuously create, display, and maintain authority over the citizenry. Furthermore, as Goldsmith (1990) and Liebling (2000) argue, police officers are more likely to inappropriately invoke their coercive authority as a result of their discretionary powers.

The coercive authority afforded to police officers aligns with their traditional role of ‘crime-fighting’. Traditional conceptualizations of police culture claim policing is inherently focused on crime-fighting initiatives, and officers are often concerned with making arrests and issuing citations (Paoline, & Terrill, 2005; Paoline, 2003; Paoline 2004; Waddington, 1999). As Paoline (2004) argues: “Traditional police culture research suggests that officers cope with the ambiguities of their role in society by focusing exclusively on crime-fighting activities, as
service, order maintenance, and community policing efforts have historically not been regarded as real police work” (209). This characteristic of traditional accounts of police culture is further evidenced by the numerous studies conducted regarding the militarization of police (Balko, 2013; Fernandez, 2008; Kraska & Kappeler 1997; Kraska, 2007). This refers to “the process whereby civilian police increasingly draw from, and pattern themselves around, the tenets of militarism and the military model” (Kraska, 2007, pp. 503). These studies embody the crime-fighting image supported by traditional conceptualizations of police culture by demonstrating the perceived need of a ‘militarized’ police service to ‘fight’ crime. As a result of their focus on crime-fighting initiatives, police officers develop cynical attitudes. This is another key characteristic found within traditional accounts of police culture.

Traditional conceptualizations of police culture stress the pervasiveness of cynicism amongst sworn police members. This cynicism can take a number of different forms, including cynicism towards the police organization (including senior management), the judiciary, the citizenry, and the government. Many officers note that they are often exposed to the worst days of people’s lives, and often develop cynical attitudes as a result of their work environment. This internalization of cynicism exaggerates the importance and value of camaraderie. Police officers emphasize the importance of sticking together and maintaining their camaraderie since “the remainder of the population…cannot possibly understand the (under)world, and, therefore, cannot legitimately evaluate the contribution of the police” (Waddington, 1999, pp. 299). This often leads to social isolation, where police officers often avoid participating in social activities that take place outside of the police organization.

Traditional conceptualizations of police culture suggest that police officers, as a result of their occupational environment, often isolate themselves from social activities outside of the
police organization (Franklin, 2005; Waddington, 1999; Woody, 2005). Instead, it is argued they often rely on one another to firmly establish the camaraderie previously alluded to. Lindsay and Shelley (2009) argue that this social isolation and camaraderie impacts the consumption of alcohol amongst police members—a noted concern throughout the academic literature (Ménard & Arter, 2013; Richmond, Wodak, Kehoe, & Heather, 1998; Swatt, Gibson, & Piquero, 2007).

As Paoline (2003) argues the occupational environment and the unique powers of the police (i.e., their coercive authority) separate police from “non-police” and exacerbates this social isolation. Police officers’ suspiciousness also plays a role in contributing to officers’ social isolation, and as Paoline (2003) indicates: “due to this separation between the police and the public, officers tend to identify and socialize exclusively with other officers” (203).

As a result of the aforementioned cynical attitudes amongst police officers and the perception of danger inherent in policing, suspiciousness towards the citizenry is a widely noted characteristic of traditional conceptualizations of police culture. As Paoline (2003) argues, danger has had a significant impact on police officers, requiring them to continuously maintain a feeling of suspiciousness and mistrust towards people they encounter in their day-to-day duties as frontline officers. McAra and McVie (2005) conducted a study in Edinburgh to better understand the interactions between children and youth and frontline police officers. Using McConville, Sanders and Leng’s (1991) conceptualization of suspiciousness (i.e., keeping the wrong company, being out of the ordinary, and displaying a lack of cooperation), McAra and McVie (2005) suggest that suspiciousness remains a key element of police culture in contemporary police organizations. Similarly, Weitzer (1999) found a high prevalence of African-Americans being stopped by police in Washington, DC as a result of ‘appearing suspicious’. Finally, Stroshine, Alpert, and Dunham (2008) examined police decision making in
Georgia and Florida and identified 11 key categories of police suspiciousness, including time and place, appearance, information, and behaviour, among others. These in-depth studies demonstrate the pervasiveness of suspiciousness amongst frontline police officers as a result of their cynical attitudes towards the citizenry.

Traditional account of police culture focus on the perception of danger amongst police officers, their camaraderie, ‘machoism’ or a sense of mission, and cynicism. In her study of Police Community Support Officers (PCSOs) in northern England, Cosgrove (2015) acknowledges the resiliency of characteristics of traditional police culture and argues that PCSOs embody these characteristics to increase the likelihood of becoming ‘real police officers’. While these characteristics of police culture are widely noted throughout the academic literature, there is an emerging body of literature that suggests police culture is subject to spatial and temporal development. This will be the focus of the following section.

*Changing Police Culture*

Emerging academic literature seeks to challenge the notion that police culture is monolithic by arguing it is subject to spatial and temporal development. Eugene Paoline (2003), for example, suggests that there are at least two separate police cultures within police organizations. The first refers to the occupational environment, reflecting the relationships that police officers and organizations develop and maintain with the general public. The second refers to the organizational environment, reflecting the relationships that frontline officers develop and maintain with superior officers. Paoline (2003) identifies two defining outcomes as a result of these two distinct policing environments: social isolation and group loyalty. The fact that police officers are consistently exposed to danger and occupy a unique position in society (given their
coercive authority), officers often separate themselves from non-police, leading to isolation from social activities outside the police organization (Paoline, 2003). Secondly, group loyalty emerges as a defining characteristic of police work due to the fact that officers are continuously dependent on one another as a result of the danger of the job and the uncertainty and anxiety surrounding oversight (Paoline, 2003). Furthermore, new members to the police organization must display loyalty and respect towards their colleagues before being accepted into the ‘group’ of seasoned officers (Paoline, 2003).

While Paoline (2003) recognizes the pervasiveness of these dominant elements of police culture, he critiques scholars who suggest that these elements are not subject to change: “While some authors have pointed out the possibility of cultural variation, the academic field has yet to incorporate such complications into the prevailing view of culture” (Paoline, 2003, pp. 204). Paoline (2003) asserts that police culture is subject to change as a result of organizational mandates. Because each community is unique, police organizations will adopt unique policing strategies and prioritize certain initiatives over others (e.g., drug crime, mental illness, prostitution, etc.). In other words, unique occupational environments develop in response to community needs, which produces unique elements of police culture that vary between police organizations. If management in a particular police organization prioritizes community service initiatives over law enforcement initiatives, it is reasonable to expect deviations from traditional conceptualizations of police culture (Paoline, 2003).

Secondly, scholars have argued that police culture is subject to change as a result of officer rank. A key study in this area was conducted by Reuss-Ianni (1983) who offered competing conceptualizations of police culture between frontline police officers and senior police officials. This study highlights the importance of changes in social and political forces,
including: competition for resources, political leadership emphasizing accountability and productivity, increased minority groups in policing, higher salaries for police officers, and higher expectations as a result of a more educated police service (Reuss-Ianni, 1983). This study demonstrates the fragmentation of police culture within police organizations as a result of social and political forces that evolve over time (Reuss-Ianni, 1983). Her study is similar to the work of Farkas and Manning (1997) who differentiate between lower participants, middle managers, and top command within police organizations and correctional institutions as a result of different concerns, orientations, values, norms, and sentiments (Farkas & Manning, 1997).

Additionally, Paoline (2003) identifies individual officer attitudes as a source of development for police culture. Since discretion plays an integral role in policing, it is essential to understand the numerous individual police officer styles and their impact on police culture. This area of research suggests that not all police officers view their occupational environment through the same lens. Typology studies often identify a number of different ‘types’ or ‘styles’ of police officers (Reiner, 1978; Wilson, 1968). The assertion that multiple typologies of police officers exist suggests that police culture is subject to temporal and spatial development. Individual officers hold unique worldviews, educational experiences, life experiences, and expectations of policing which creates an environment of constant change and thus impacts police culture on a regular basis (Paoline, 2003). This research emphasizes the importance of individual officer styles and explores the way in which officers learn the ‘art’ or the ‘craft’ of policing.

Goldsmith (1990) and Paoline (2003) elaborate on Wilson’s (1968) assertion that police officers are members of a ‘craft’. This assertion posits that officers must learn the ‘craft’ of policing once they are introduced into the police organization (Chan et al., 2003; Goldsmith,
As opposed to being taught about police culture during police training, the culture is learned through apprenticeship—an area Chan and colleagues (2003) and Paoline (2003) suggest is integral to the development of new recruits. It is through this ‘apprenticeship’ that police culture is transmitted throughout generations of police officers.

Field training officers (FTOs) play an important role in teaching new recruits about police culture (Chan et al., 2003; Goldsmith, 1990; Paoline, 2003). It is argued that classroom training is often replaced by experiences in frontline policing duties and the influence of FTOs on new recruits is believed to have a significant impact on police behaviour (Chan et al., 2003; Goldsmith, 1990; Paoline, 2003). As Chan and colleagues (2003) argue, FTOs rarely establish relationships or lines of communication with the police academy and the process of selecting and identifying FTOs within a police organization is suspicious: “FTOs generally had no direct dealings with the academy...[furthermore] there was no formal procedure for selecting FTOs” (Chan et al., 2003, pp. 147-148). This research further indicates that FTOs play a vital role in not only transmitting, but also determining, the elements of police culture to teach new recruits (Chan et al., 2003; Goldsmith, 1990; Paoline, 2003). This demonstrates that the development and transmission of elements of police culture can be widely dependent on FTOs—highlighting the importance of individual officer styles. Whether FTOs subscribe to traditional or modern viewpoints of policing will impact how new recruits reproduce or challenge traditional characteristics of police culture.

Additionally, Campeau (2015) argues that police culture has undergone significant changes as a result of increased oversight of police agencies and individual officers. This oversight refers to increased accountability and public visibility of police officers (Campeau, 2015). Her Canadian case-study finds that the prevalence of ‘maintaining secrecy’ and upholding
the ‘blue wall of silence’—one of the most often cited elements of traditional police culture—has diminished in recent years as a result of increased police oversight: “Having your fellow officer’s back physically when confronted with danger in the line of duty seems to be a given, but…this does not always translate seamlessly into covering or supporting one another within headquarters or when faced with discipline” (Campeau, 2015, pp. 680). Interestingly, Campeau (2015) posits that officers attempt to avoid crime-fighting initiatives in an effort to avoid scrutiny given the substantial increase in police visibility. As a result of avoiding crime-fighting initiatives, officers in this study inadvertently laid-low to avoid undue attention. This demonstrates how police culture remains dynamic; officers must adapt to new occupational and organizational environments by embodying some characteristics of traditional police culture while dismissing others:

Additionally, if scholars continue to approach the study of police culture with an eye for the ‘core characteristics’, the answer to whether these persist is likely to remain affirmative: we can confirm the ideal type every time. But when situational contingencies are summoned by actors, a far more nuanced cultural picture can emerge. Police may draw on more or less solidarity depending on the contextual circumstances at hand, or, alternatively, may supplant this resource all together in favour of others that are more suitable to the condition (Campeau, 2015, pp. 683).

Manning (1977) argues that increased expectations of police organizations create a mandate that is nearly impossible to achieve. As a result of these increased expectations, a number of police organizations have developed partnerships with community organizations to
develop long-term solutions to crime and social disorder (O’Neill & McCarthy, 2014). Traditional accounts of police culture would suggest that police organizations would be hesitant to share their authority with other organizations (Bittner, 1967; Paoline, 2003). O’Neill and McCarthy (2014), however, challenge that assertion by arguing that police organizations defer power to their community partners and believe these partnerships are both valuable and enjoyable. These studies demonstrate the fluidity of police culture through partnerships with community organizations.

Emerging conceptualizations of police culture suggest it is dynamic and susceptible to change through a number of different factors. Scholars posit that mandates vary between police organizations, demonstrating the variance of police culture at an organizational level (Goldsmith, 1990; Paoline, 2003). As Reuss-Ianni (1983) and Farkas and Manning (1997) argue, police culture is also subject to change as a result of officer ranks, noting the cultural variation between frontline police officers and senior police officials. Additionally, scholars have noted the role of individual officer attitudes on police culture (Paoline, 2004). Chan and colleagues (2003), Goldsmith (1990), and Paoline (2003) also acknowledge the important role FTOs play in determining police culture. Depending on the FTO, new recruits can learn varying conceptualizations of police culture. Campeau (2015) highlights the evolution of police culture as a result of increased oversight and visibility of police in the community. Finally, as a result of their complex and ever-changing role, police organizations have challenged traditional conceptualizations of police culture through their partnerships with community organizations. These studies demonstrate a number of ways police culture can be conceptualized and challenge the notion that police culture is monolithic. The following section will review the literature pertaining to police discretion, which is heavily influenced by police culture.
Police Discretion

Police discretion refers to the amount of freedom officers are granted in making decisions while on duty (e.g., making an arrest, issuing a warning, ignoring minor violations, etc.) (Chan et al., 2003; Goldstein, 1960). Frontline police officers are granted a tremendous amount of discretion throughout the course of their patrol. The amount of freedom in their decision-making is compounded by the fact that police officers lack supervisory oversight while fulfilling frontline policing duties. Frontline officers feel more comfortable exercising their discretionary powers since the threat of internal sanctions or discipline is significantly reduced as a result of the lack of supervisory oversight. Goldsmith (1990) argues that the discretionary powers of the police derive from legislative failures to regulate the decision-making powers of the police. As the academic literature consistently indicates, external rules are often ineffective at regulating police behaviour as a result of the importance of police culture and the fact that officers wish to retain their discretionary powers (Mastrofski, 2004; Nowacki, 2015; Wortley, 2003).

The academic literature consistently finds that the invocation of police officer discretion is heavily influenced by police culture (Chan et al., 2003; Goldsmith, 1990). As previously mentioned, police culture refers to the informal rules that guides police officer conduct in practice (Chan, 1997; Goldsmith, 1990; McCarthy, 2013; Paoline, 2003). Frontline police officers invoke their discretion depending on a variety of the aforementioned elements of police culture. If, for example, an organization prioritizes crime-enforcement initiatives, it is reasonable to expect frontline police officers to limit their use of discretion and apply the law more vigorously. Discretion may also be dependent on individual officer attitudes, as evidenced by Mastrofski and Parks (1990) who witnessed a police officer issue a citation for public intoxication to a cooperative teenager, but decided not to issue a citation for the same infraction.
to a disruptive teenager. During the debriefing, the officer was quoted as saying “I was in no mood to take his shit” (Mastrofski & Parks, 1990, pp. 483). As Mastrofski and Parks (1990) posit, “police work is at least as much cognitive work as it is action” (pp. 477), referring to the fact that police work requires a certain level of unrestricted decision making.

Typology studies of frontline police officers offer an additional lens through which to analyze the invocation of police discretion. Police officers utilize their discretionary powers depending on their individual policing style. As previously mentioned, Wilson (1968) posits there are three dominant styles of policing: the watchman, the legalistic, and the service styles. As Wilson (1968) suggests, the watchman style of policing emphasizes maintaining order in the community—accomplishing this task through the invocation of police officer discretion. Officers who subscribe to this style of policing exercise a considerable amount of discretion in order to maintain order in the community, rather than relying on strict enforcement of the criminal law. The legalistic style of policing, however, promotes the enforcement of the criminal law in order to maintain order (Wilson, 1968). Under this style of policing, frontline officers restrict their use of discretion. Finally, the service style of policing emphasizes the importance of community service rather than law enforcement. The service style of policing emphasizes the invocation of discretion in order to develop and maintain positive relationships with the community.

Similar conclusions can be drawn from other typology studies of police. Reiner (1978), for example, identifies six major styles of police officers, which impact the invocation of discretion: the bobby, the uniform carrier, the new centurion, the social worker, the professional, and the federation activist (Reiner, 1978). The bobby is concerned primarily with peace-keeping, thus officers embodying the bobby style of policing are more likely to make extensive use of their discretionary powers (Reiner, 1978). The uniform carrier is more concerned with their
employment and holds inherently cynical views about the police and the public (Reiner, 1978). This type of officer supports the camaraderie involved in policing and is likely to enforce the criminal law to protect fellow officers, and utilize discretion to avoid unnecessary additional work. Police officers who subscribe to the new centurion style of policing are likely to limit their exercise of discretion and focus primarily on enforcing the criminal law since they view their role primarily as a crime-fighter (Reiner, 1978). Social workers, on the other hand, are likely to make considerable use of discretionary powers in order to assist the public (Reiner, 1978). The professional would invoke their discretionary powers only if those actions would be supported by the organizational mandate (Reiner, 1978). As Reiner (1978) posits, ‘professionals’ rise quickly through the ranks, therefore these officers would be most concerned with appeasing senior police officials to increase their chances of promotion. Finally, the federation activists are heavily committed to the police union; therefore these officers are likely to exercise discretion depending on the dominant viewpoint of the police union (Reiner, 1978).

A number of scholars have problematized police discretion by arguing that it hinders opportunities to hold frontline police officers accountable and enhances opportunities for police misconduct through the inappropriate enforcement of police authority (Goldstein, 1960; Mastrofski, 2004; Miller, 2015; Tieger, 1971). Tieger (1971), for example, posits that police discretion—which is not subject to review—negatively impacts specific segments of the population: “For the poor, the Black, the culturally deviant, and the politically-activist minorities, constitutional protections are easily rendered meaningless by the capricious exercise of unreviewable discretion by the policeman on the beat” (Tieger, 1971, pp. 718-719). Miller (2015) expands on Tieger’s (1971) assertion by claiming police discretion produces harms concentrated primarily in communities who are subjected to “intensive and invasive policing”
Mastrofski (2004) posits that police discretion leads to racial bias, allows police officers to ignore community-policing initiatives, and supports an environment whereby police officers can refuse to make legally required arrests (e.g., in cases of domestic violence).

One of the most oft-cited criticisms of police discretion is the inability of the public to hold police officers accountable for their decisions while on patrol (Goldstein, 1960; Miller, 2015; Reiner, 2000; Tieger, 1971). As Goldstein (1960) argues, discretionary decisions must be rendered visible and subjected to scrutiny. This assertion is further supported by recent research pertaining to police discretion: “These highly discretionary policy decisions are, for the most part, opaque to public scrutiny” (Miller, 2015, pp. 522). Changing the regulations surrounding police discretion is a complex process. In his study of police attitudes of positive arrest policies—requiring officers to make an arrest under certain circumstances—Rowe (2007) found that officers had reservations regarding these policies because it limited their independent decision-making abilities while on patrol. As Mastrofski (2004) claims, changing regulations or policies surrounding police officer discretion must come from within the police organization. Wortley (2003) and Nowacki (2015) draw similar conclusions, stating that controlling police behaviour requires a policy discussion within the police organization, as police officers are more likely to accept changes from within their existing command structure.

While the discretionary powers of the police can be concerning, Liebling (2000) and Wortley (2003) are among a group of scholars who highlight discretion as a necessary tool to maintain an effective and efficient police organization. Without these discretionary powers, Liebling (2000) argues, the police would be required to utilize a formal response in all situations—regardless of how minor or petty the violation. This would inevitably lead to further strains on the criminal justice system (including the correctional system and the judiciary), an
issue consistently identified throughout both the Canadian and American academic literature. For Liebling (2000), rules ought to be used as a resource. Comparing the discretionary powers of the police and correctional officers, she argues both occupations require flexibility in determining appropriate responses in order to maintain social order within their given environments (Liebling, 2000).

Furthermore, restricting the discretionary powers of the police could negatively impact their perception of legitimacy amongst the communities they serve. As Reiner (2000) proclaims, trust and confidence in the police requires a mix of ‘soft’ service initiatives and ‘hard’ enforcement initiatives. The responsibility rests with the police to strengthen their relationship with underprivileged communities—a responsibility that can be met only if police exercise discretion through mixing soft initiatives and enforcement initiatives (Goldsmith, 2005; Reiner, 2000). Revoking the discretionary powers of the police, it is argued, can lead to a reliance on ‘hard’ enforcement initiatives, thus jeopardizing their perception of legitimacy (Goldsmith, 2005; Reiner, 2000). As previously mentioned, when the police are perceived as legitimate the public is more likely to have more trust in their police organizations and will cooperate and assist the police throughout the course of their investigations (Goldsmith, 2005; Hawdon et al., 2003; Herbert, 2006; Kochel, 2010; Tyler & Fagan, 2008). In order to gain their trust, the police must exercise their use of discretion to respond to the needs of the communities they serve. Effectively exercising their discretionary powers can benefit both the criminal justice system (i.e., the police organization, the judicial system, and the correctional system) and the communities the police serve. The following section will review the literature regarding police interactions with people suffering from mental illness.
Policing and Mental Health

Police organizations in a number of Western democracies have shifted from enforcement-based to community-based models of policing (Chan, 1997; Hawdon et al., 2003; Palmiotto & Unnithan, 2011; Seagrave, 1997). According to Palmiotto and Unnithan (2011), community policing is a philosophy that promotes partnerships between citizens and police organizations. Furthermore, these partnerships “must work together to identify, prioritize and solve contemporary problems” within the community, with the overall goal to improve “the overall quality of life in the area” (Palmiotto & Unnithan, 2011, pp. 176). An integral element of policing—in both enforcement based and community based response models—is responding to PIC. Many academic studies have identified that frontline police officers acknowledge that responding to PIC is a significant part of their job (Borum et al., 1998; Hartford et al., 2006; Cooper et al., 2004; Cotton, 2004; Godfredson et al., 2011; LaGrange, 2003; Sellers et al., 2005; Senior et al., 2014). Borum and colleagues (1998) characterise this increased attention to responding to PIC as the ‘quiet revolution’ in policing.

Interacting with PIC is quite common for police officers (Borum et al., 1998). General estimates throughout the academic literature estimate that 7% of all police calls for service require an interaction with an individual in crisis (Cotton, 2004; Cowell, Broner, & Dupont, 2004; Hails & Borum, 2003; Sellers et al., 2005). In a Canadian study involving three major police service organizations, Cotton (2004) reports that 92% of police officers have encountered at least one call for service involving a PIC, with 84% reporting more than one interaction. In addition, Cotton (2004) describes frontline police officers as “de facto mental health providers” as they are on the frontlines responding to those in crisis (135). Their status as de facto mental health providers is exacerbated by the lack of services and programming available in the
community (Cooper et al., 2004; Cotton, 2004; Godfredson et al., 2011; Hartford et al., 2006; Senior et al., 2014). This issue is continually compounded by government spending reductions in programs and services and has led to significant increases in arrest rates for PIC (Cooper et al., 2004; Cotton, 2004; Godfredson et al., 2011; Hartford et al., 2006; Senior et al., 2014). Scholars refer to this issue as the criminalization of the mentally ill, as individuals suffering from mental illness make up a large percentage of those in the correctional system (Abramson, 1972; Cooper et al., 2004; Cotton, 2004; Godfredson et al., 2011; Hartford et al., 2006; Senior et al., 2014).

Cotton (2004) and Godfredson and colleagues (2011) have recognized that the police are in a precarious position as they must respond to PIC, but must also balance law enforcement and order maintenance responsibilities. Many officers report a frustration with community mental health services, and one officer noticed that PIC pose very low safety risks to the public: “Less emphasis should be placed on protecting the public from the mentally ill” (Cotton, 2004, pp. 143). In addition, police have found it increasingly difficult to recognize signs, symptoms, and behaviours of mental illness (Godfredson et al., 2011) and believe a multi-agency approach (i.e., involving mental health professionals) would be more beneficial (Godfredson et al., 2011; Senior et al., 2014).

Numerous academic studies also discuss the level of discretion afforded to individual officers in regards to interacting with PIC (Cooper et al., 2004; Cotton, 2004; Senior et al., 2014). Officers have the freedom to decide from a wide variety of options when dealing with PIC (i.e., arrest, hospitalize, or do nothing) (Cooper et al., 2004). Furthermore, as Cotton (2004) demonstrates, there is no agreement on the best method to handle these cases. Many organizations do not have formal policies in place, and programs are only developed in major cities. Bittner (1967), however, claims there are two approaches for police-based responses to
PIC. Firstly, police can receive court orders to locate, apprehend, and convey individuals to hospitals (Bittner, 1967). Or, secondly, police officers are often authorized by statute to apprehend and convey individuals in crisis to hospitals for treatment.

Several academic studies argue that police officers are reluctant to apprehend PIC for a variety of reasons (Bittner, 1967; Hartford et al., 2006; Sellers et al., 2005). Many officers stated that they would only refer PIC to hospital if there was a significant chance other issues would develop (i.e., physical harm, danger to life, property or public places) (Bittner, 1967). Cooper and colleagues (2004) found that officers became frustrated with hospital referrals, which is exemplified in the following response by an American police officer: “It is too much of a hassle to get someone involuntarily committed” (Cooper et al., 2004, pp. 304). Other frustrations result from tedious paperwork, waiting for crisis staff, and gaining support from mental health agencies (Bittner, 1967; Borum et al., 1998; Godfredson et al., 2011). Sellers and colleagues (2005) argue that multi-agency approaches and more communication between police service organizations and mental health professionals would help alleviate frustrations resulting from referring PIC to hospital care. Furthermore, as Bittner (1967) indicates, frontline police officers will often transfer patients to family members, family physicians, or other people who agree to monitor the person. These agreements often require the police officer to have rapport with the community—highlighting the importance of police legitimacy and individual officer discretion (Bittner, 1967).

Bittner (1967) also suggested several attitudinal and organizational factors that help explain why police officers are reluctant to refer. Firstly, police often know the same amount of information about mental health as the general public; because they are not experts in psychopathology, they want to avoid embarrassment for referring someone who does not need to be referred (Bittner, 1967). Secondly, police confront social issues more than any other agent in
society, thus all they try to do is ‘hit their numbers’ (i.e., obtaining a certain number of arrests to satisfy their superiors) (Bittner, 1967). Thirdly, police believed that dealing with the mentally ill was not part of their job since it did not align with the dominant view of policing (i.e., crime fighting) (Bittner, 1967). Instead, according to Bittner (1967), officers were more interested in conducting the ‘masculine business’ of policing. Finally, police often complain that referring an individual in crisis is a tedious, cumbersome, and uncertain task (Bittner, 1967). Police officers are worried about long waiting times, answering frustrating questions, getting rejected by a psychiatrist, and not bringing closure to the incident within a reasonable time and with a reasonable effort (Bittner, 1967).

In contrast, however, Bittner (1967) identified five circumstances where emergency apprehensions are most likely to occur. The first circumstance is if there is evidence to suggest that an individual has attempted or is currently attempting suicide (Bittner, 1967). These incidents do not require any other indicators of mental disorder, and the individual will always be referred to the hospital (Bittner, 1967). The second circumstance is if the individual is demonstrating signs of serious psychological disorder alongside distortions of physical appearance (i.e., injuries, seizures, urinary incontinence, odd posturing, nudity, extreme dirtiness, etc.) (Bittner, 1967). The third circumstance where an emergency apprehension is made is when there are signs of serious psychological disorder being expressed in agitated forms (especially if accompanied by violence) (Bittner, 1967). Furthermore, the violence or threat of violence must be real (i.e., the individual must be able to actually inflict harm on somebody else or themselves) and the individual must be unresponsive to pacification attempts (Bittner, 1967). The fourth circumstance is when people appear to be disoriented or create a nuisance in a public place. In these circumstances, the police will often try to help them get back to their ‘normal habitat’, and
when this fails the officers will apprehend the individual. The fifth and final circumstance where an emergency apprehension is made is when the police receive information from an individual with an instrumental relationship to the person suffering from a crisis situation (Bittner, 1967). The assumption under these circumstances is that the caregiver has already exhausted all of their options before having to call the police (Bittner, 1967).

Since Bittner’s (1967) study, more sophisticated discussions surrounding police-based responses to PIC have emerged. Throughout the academic literature, three models of response are generally agreed upon. The police-based specialized police response models are represented by officers who have special mental health training, act as first-response units (responding to 9-1-1 calls), and are liaisons to the formal mental health system (Borum et al., 1998; Godfredson et al., 2011; Hails & Borum, 2003; Hartford et al., 2006; Sellers et al., 2005). Police-based specialized mental health response models, on the other hand, include mental health professionals who are employed by the police service to provide on-site and telephone consultations to officers in the field (Borum et al., 1998; Godfredson et al., 2011; Hails & Borum, 2003; Hartford et al., 2006; Sellers et al., 2005). Finally, mental-health based specialized mental health response models include partnerships that are developed between the police and mental health professionals to create a specialized unit (e.g., a mobile mental health crisis team) within the police organization (Borum et al., 1998; Godfredson et al., 2011; Hails & Borum, 2003; Hartford et al., 2006; Sellers et al., 2005).

Another popular response that has been used more widely in policing throughout the past decade is diversion. Diversion refers to the process where alternatives to criminal sanctions are made available to PIC that have come into contact with law enforcement (Hartford et al., 2006). The academic literature highlights two competing types of diversion programs that are relevant
to responding to those in crisis: pre-booking and post-booking programs (Cowell et al., 2004; Lattimore, Broner, Sherman, Frisman, & Shafer, 2003). Pre-booking programs occur at the point of contact with the police before formal charges, and these programs require specialized training and crisis center support (Cowell et al., 2004; Lattimore et al., 2003;). These programs target individuals based on behaviours indicating that criminal justice events or potential mental health events may follow (Cowell et al., 2004; Lattimore et al., 2003). Post-booking programs, on the other hand, identify and divert offenders after they have been charged (Cowell et al., 2004; Lattimore et al., 2003). Diversion staff members work with prosecutors, defense attorneys, the courts, and other various stakeholders to develop and implement a specialized treatment plan (Cowell et al., 2004; Lattimore et al., 2003).

One of the most important factors to consider when discussing police-based responses to PIC is the amount of training officers receive. The academic literature consistently argues that police officers do not feel adequately trained to respond to the needs of PIC (Bittner, 1967; Borum et al., 1998; Cooper et al., 2004; Cotton, 2004; Godfredson et al., 2011; Hails & Borum, 2003; Hartford et al., 2006; LaGrange, 2003; Sellers et al., 2005 Senior et al., 2014). In addition, Senior and colleagues (2014) report that officers felt there were little or no opportunities to update or learn new skills once they are operational (i.e., in the field responding to PIC). Hails and Borum (2003) found that the average training hours for responding to PIC was 6.5 hours—and this training also covered substance abuse, other mental disabilities, and managing disorderly/unruly suspects. The Police Executive Research Forum recommends a minimum of 16 hours of training be dedicated to responding to PIC before officers can be considered adequately prepared to respond to these complex incidents (Hails & Borum, 2003). Officers who belong to specialized units—who received a considerable amount of training—felt the most prepared to
handle incidents involving PIC (Borum et al., 1998). In the second chapter (below), I examine the pervasiveness of two key elements of traditional accounts of police culture—both the perception of danger and the resulting camaraderie.
The Pervasiveness of Danger and Camaraderie in Police Culture

The academic literature acknowledges the pervasiveness of certain characteristics of traditional accounts of police culture. These studies cite the dominant masculinity throughout police organizations (Chan, Doran, & Marel, 2010; McCarthy, 2013; O’Connor Shelley, Schaefer Morabito, & Tobin-Gurley, 2011; Prokos & Pradavic, 2002), the focus on crime-enforcement initiatives (Paoline, 2003; Terrill, Paoline, & Manning, 2003; Waddington, 1999), and the cynical attitudes of sworn police members (Caplan, 2003; Neiderhoffer, 1967), among others. As previously mentioned, police culture is dynamic and subject to both spatial and temporal development. There are, however, certain characteristics of traditional accounts of police culture that continue to dominate police organizations. In this study, for example, each of the police officers and mental health professionals who were interviewed identified the potential danger involved with police work—especially in the context of responding to PIC. Each interviewee stressed the potential volatility of the individuals they interact with on a daily basis. One officer elaborates: “The individuals we are dealing with are so unpredictable. It can flip from [a] casual conversation to an instantaneous flip side and now that person is becoming assaultive”.

As a result of the dangers associated with police work, police officers often develop camaraderie with other members of the police organization. As previously mentioned, camaraderie is a key element of traditional accounts of police culture. Sworn police members often rely on this camaraderie to ensure they are safe throughout the course of their careers. In other words, this camaraderie ensures fellow members protect and defend and assist one another while in the field. This camaraderie was widely noted throughout this study as both the police
officers and the mental health professionals highlighted the importance of trusting relationships in order to effectively and safely respond to PIC.

In this chapter, I demonstrate the pervasiveness of two characteristics of traditional accounts of police culture: both the conception of danger in police work, and the resulting camaraderie. The first section examines the perceived danger associated with police work that was reported in this study, including how police officers are trained, how they understand their role, the impact of unreliable/incomplete information when responding to calls for service, the importance of sharing both police and medical information, their use of force options and training, and the impact of the media in perpetuating their exposure to danger. The second section of this chapter examines the camaraderie that was reported in this study, including how MHU members understood the importance of partnership, and the highlighted importance of defending and assisting one another in the field. It is important to identify the strength of these characteristics of the overarching police culture, as they were not solely limited to the police officers in the study. Instead, they permeated throughout the MHU and also became routinely internalized by the civilian mental health professionals.
Conceptions of danger in police work are widely noted throughout the academic literature (Cullen, Link, Travis, & Lemming, 1983; Waddington, 1999). This characteristic of traditional police culture was confirmed in this study, with each police officer and mental health professional noting the unpredictability and volatility of PIC. This perception of danger begins at recruit training for many police officers. From their training, police officers are taught to identify threat cues and to remain vigilant in an unpredictable and volatile environment (Alpert, MacDonald, & Dunham, 2005). One officer argues: “That’s the thing that we’re taught and we’re trained to look for. You know, we’re always on guard”. When reviewing the training curriculum for the Royal Canadian Mounted Police (RCMP), for example, a large percentage of training for new recruits is associated with skills required for preventing or managing dangerous situations. A total of 249 hours is dedicated to training potential officers on skills relating to driving (65 hours), firearms (64 hours), fitness and lifestyle (45 hours)—including managing both physical and mental health as a result of the dangers of police work—and defensive tactics (75 hours) (Royal Canadian Mounted Police, 2013). In addition, the literature refers to potential candidates as ‘troops’ further emphasizing the idea of a militarized police service dedicated to responding to the inherent dangers present in the community.

The ways in which police understand their role is a key factor in determining their perception of danger. Each officer in this study, for example, stressed that his or her foremost responsibility is protecting the public from the dangers present in the community. This is
consistent with Dunham and Alpert’s (2010) study that identifies the police as the institution responsible for protecting the public from danger. As one officer observes: “We have a job to do, you know? We’ve got to protect the public”. This exemplifies the officers’ instinctive perception of danger that is inherent in the community. Furthermore, it demonstrates that police officers continue to understand their role as one that requires them to protect the public from these inevitable dangers. As one officer explains, safety is always prioritized within the police organization:

IV: Can you discuss the responsibilities of the police officers on the MHU?

RP: Obviously to make sure that our partner is safe…that’s always our number one priority—to make sure that we’re safe—my partner and myself. And then going out and helping people in the community in their own surroundings.

As previously mentioned, this mentality amongst police officers is introduced in recruit training and is reinforced throughout the police officer’s career, becoming a dominant characteristic of an overarching police culture as it permeates throughout the entire police organization. This mentality is problematic as police officers often develop cynical attitudes and often anticipate the worst from the communities they serve. As my research demonstrates, however, police officers believe this mentality is needed as a result of the aforementioned volatility and unpredictability of the situations police officers are exposed to throughout the course of their patrol. Peter Manning (1977) argues that the expanding mandate of the police causes stress at both an organizational and occupational level. He claims the police are often
evaluated based on an impossible or difficult to achieve mandate (Manning, 1977). As a result of this expanding mandate, the police are tasked with responding to a variety of situations—each presenting unique challenges that could jeopardize their safety. The police officers in this study acknowledge the fact that any call for service can be dangerous (whether violent or not) and, as a result, they must take preventative action (i.e., being cognizant of danger) to ensure they are prepared to respond appropriately.

To illustrate this point, during one of the ride-alongs, the MHU responded to an individual in crisis who believed he was the target of a planned assassination. Before entering the residence, the police officer asked the individual if there was anything in his apartment that could expose the officer and the mental health professional to danger. Once he was satisfied that the residence was safe to enter, the police officer and mental health professional engaged in a friendly and calm conversation with the individual. While the mental health professional was engaging in conversation with the client, the police officer identified potential weapons (e.g., scissors, saws, and razors) and moved them to a place where nobody would have immediate access to them. When the police officer started asking questions, the mental health professional also began identifying potential weapons and moving them to ensure their safety. These actions clearly demonstrate the perceived potential for danger in any situation—regardless of the demeanour of the client. Even though the client was calm and respectful throughout the interaction, the police officer and mental health professional were cognizant of potential danger and both engaged in preventative action to ensure their safety throughout the interaction. As one officer explained in their interview, the mental health professionals have developed a similar mindset from working with the police: “I find that our specific mental health professionals are very good in terms of officer safety principles”. This demonstrates that the perception of danger
is not solely held by police officers but rather permeates throughout the police organization and becomes routinely internalized even by their civilian partners.

Because they understand their main priority as protecting the public, the police are required to provide an immediate response to a wide variety of calls for service that may expose them to danger. When the police are asked to respond to a call for service, they often rely solely on information that is provided by the public and then relayed through a 9-1-1 dispatcher. As Peter Manning (1992) argues, the police are entirely dependent on the public for information pertaining to emergency calls for service. While information technologies have improved drastically within police services (i.e., the ability to track calls and locate callers), the police still rely on information from the public, which can be either incomplete or inaccurate (Manning, 1992). Perceptions of danger are often exacerbated due to the police receiving incomplete or inaccurate information. The potential for receiving unreliable information creates a sense of fear amongst police officers (and their civilian partners in this case study) and perpetuates their perception of danger: “It’s just you and you don’t know what you’re walking up to”. This uncertainty causes police officers to be suspicious and to maintain an edge (Paoline, 2003) in the interests of protecting their safety and the safety of the public. As a use of force instructor illustrates, uncertainty exposes police officers to incredibly dangerous situations, which, they suggest, is why police officers remain suspicious and guarded especially with incomplete or inaccurate information:

If you’re in a bedroom and a person is laying in their bed and all of a sudden they jump up at you and you’re 10 feet away, if you don’t have something in your hand, you’re going to get hurt. There is no way that you can catch up and react quick
enough. It’s impossible. Absolutely impossible. It’s physiologically, physically impossible to react in time. That’s why if there’s a potential for violence and your gun or another weapon is not in your hand, you might as well not even have it there. You will not have time to react. Absolutely not.

This is where the practical benefit of the MHU is most evident. Bringing police officers and mental health professionals together allows for greater exchanges of information (both police information and health related information), which increases the quality of interactions between the police and PIC. As previously discussed, the quality of the interactions between the police and the citizenry plays an important role in determining the perception of police legitimacy (Goldsmith, 2005; Harkin, 2015; Hawdon et al., 2003; Herbert, 2006; Kochel, 2010; Tyler & Fagan, 2008). The opportunity to share information improves the quality of the interaction between the MHU and the citizenry, and thus in theory provides an opportunity to enhance the MHU’s perception of legitimacy. Each of the police officers and mental health professionals interviewed in this study stressed the importance of reliable information before responding to a call for service. As one police officer states: “We’re trying to get the job done and we’re trying to look after each other and we’re all trying to be safe while we provide service to an individual”. This demonstrates the importance of reliable information to safely and effectively respond to PIC, and insinuates that incomplete or inaccurate information exacerbates perceptions of danger amongst police officers. Again demonstrating the permeation of the perception of danger throughout the police organization, one mental health professional elaborates on the importance of information sharing before responding to a PIC:
So in an acute crisis, you have that crisis release of information. I need to tell the officer everything to keep that client safe and keep him safe and keep me safe. So when we’re going to a call, I’m telling him as much as he needs to know so we can go in safely. And he’s running them and he’s telling me as much of his criminal history as possible. And so we’re sharing that freely because we’re about to walk into it and if he’s kept something back that I don’t know and visa versa, you know, things can go south. We have that ability in an acute crisis to share information freely for everybody’s safety. You don’t want to leave any box unchecked and any stone unturned.

To illustrate, during one of the ride-alongs the MHU responded to a call for service involving a man who was suffering from depression. Before interacting with this individual, the police officer and the mental health professional discussed previous interactions between the client and the police and the mental health system. Once they were satisfied they were entering the situation with as much information as possible, the officer and the mental health professional responded and engaged in a friendly discussion with the individual in crisis. The individual was appreciative of the support offered by the MHU—and was impressed and comforted by the fact that the officer and the mental health professional took the time to become aware of his previous issues. After the call, the police officer and the mental health professional recorded detailed notes regarding the interaction and stressed the importance of these notes for any further interactions between this individual and the police (or the mental health system). Both the officer and the mental health professional stressed the importance of being well informed prior to responding to
calls for service and suggested that although the required paperwork can be strenuous, it is essential to assist the MHU fulfill their duties safely and effectively.

A number of academic studies have argued that the authority to use force is the main factor that distinguishes police from non-police (Bittner, 1970; Klockars, 1985; Waddington, 1999). This authority to use force is a product of the role the police play in society (i.e., protecting the public) and is used as a tool to respond to the dangers associated with policing. Since the perception of danger is so deeply rooted in the overarching police culture, officers often rely on their use of force options to protect themselves and the public. Discussing the challenges associated with the MHU, one officer acknowledges the inevitability of dangerous situations requiring a forceful response:

Now we’re in, generally speaking, the worst days of everybody’s life and statistically speaking, something is going to go wrong at some point. I’ve been lucky that I haven’t had anything like that happen yet, but it’s going to. It’s going to happen. I know it’s going to happen. So, knowing that that’s going to happen… is my biggest concern out of all of it.

This excerpt further demonstrates the embedded perception of danger that is deeply rooted within the overarching police culture. This officer presents a cynical perspective of policing by implying that pursuing a career in policing predetermines exposure to danger. Furthermore, this exposure to danger can—and inescapably will—require officers to use force at some point in their career. As one officer evinces: “Nobody wakes up in the morning wanting to hurt
somebody”. This officer does explain, however, that because the police are exposed to danger on a daily basis, using force may be required in certain circumstances:

If that lady continues to be violent, she may attack me. I need to be prepared at that higher level. I may have to bend her arm, I may have to punch her, but I can justify those things. I don’t want to, I’m going to try to talk to her. But if it happens to go that way, it’s because she escalated it, not me. I’m responsible for my own safety, as well as everybody else and I must use appropriate levels of force, once she escalates. I’m not paid to be a punching bag.

This officer stresses the importance of determining the appropriate response to PIC on a case-by-case basis and argues that police use of force is exercised only as a result of the behaviours of the client. Elaborating on using force to fulfill their responsibility of protecting the public, a senior police official notes: “Bottom line is we want to avoid using force all the time. It comes with our position and it comes with our responsibilities and we make no apology for that—that is our job.” This police official reiterates that the police are responsible for protecting the public and are given a variety of options to achieve that responsibility—including using force.

Furthermore, under standard police protocol with this police organization, a minimum of two uniformed officers are required to respond to calls for service involving PIC. The unique nature of the MHU sees one uniformed police officer and one civilian mental health professional responding to calls for service involving PIC. As a result of the perceived dangers associated with responding to PIC, the police organization in this study ensured that all civilian mental
health professionals were provided basic use of force training. As one senior police official explains:

They [the mental health professionals] had to go through all the officer’s use of force options. They fought, they fired on our range. So they used all their weapons, they got pepper sprayed—because they had to know what they were getting into in the fact that their officer might be incapacitated where they might have to use their firearm. So, um, that was very new to us. [City name] has never done civilian based training so to pair them up like that, it was quite unique. Now, we can’t say they’re certified in anyway, but they’re familiar with how to use the equipment. So what we’re looking at right now is sort of a one-year recertification of going back out and doing the same thing again but in a condensed form. So it would just be one day, basically you and your partner out there using the pistol, baton, pepper spray—things like that.

The fact that the police organization ensured the civilian mental health professionals were provided with basic use of force training clearly illustrates the perceived dangers associated with responding to PIC. As the officer quoted above observes, there is a concern that the police officer on the MHU may be incapacitated thus requiring the mental health professional to be adequately prepared to respond using force. As one mental health professional posits, there is a sense of security associated with being trained to respond using force if required—further demonstrating the perception of danger associated with responding to PIC:
We go through the use of force training. So let’s suppose—they say we do that once a year to be qualified. So we’ve shot, we’ve done the whole gambit. If [name of police officer] is knocked unconscious because the guy takes a swing at him and knocks him down and I need to take the gun to make sure at least that that gun is not going to be used against us by that individual, and again if I have to defend us because the guy is coming at us with butcher knives and [name of police officer] is down, I’ve been trained to use the gun. And the pepper spray and the Taser as well. It’s one of those things that you hope you never have to use it, but you’re trained to use it. And again, I’d rather have it and not need it than not have it and need it. So the training is a mandatory part of what we have to do, but I’m praying I never have to use it.

Finally, each officer stressed the important role the media plays in determining the levels of danger that frontline police officers are exposed to throughout the course of their patrols. As a number of studies have indicated, the news media play a crucial role in shaping public attitudes about the police (Chermak, McGarrell, & Gruenewald, 2005; Dowler, 2002; Rosenbaum, Schuck, Costello, Hawkins, & Ring, 2005; Weitzer & Tuch, 2005). As Dowler (2003) asserts: “The mass media play an important role in the construction of criminality and the criminal justice system” (pp. 109). The academic literature regarding the media’s influence on shaping public attitudes regarding the police is fragmented. Some studies propose the news media depict the police positively, focusing on heroism and effectiveness (Mawby, 1999), while others argue the police are presented as aggressive, incompetent, and inefficient (Surette, 1998). Other scholars have acknowledged the complex and symbiotic relationship between the police and the
media, arguing both agencies often rely on each other for survival (Guffey, 1992). The police rely on the media when they require public assistance to solve crime, whereas the media rely on the police for information to fulfill society’s fascination with crime and criminality (Dowler, 2003; Guffey, 1992).

As discussed in the introduction, the perception of legitimacy of the police plays a crucial role in determining assistance from the public and the public’s cooperation with the police (Tyler & Fagan, 2008). This perception of legitimacy is heavily influenced by media coverage surrounding police interactions with PIC. The police officers in this study stressed the fact that the media continue to place the police in a precarious position by focusing solely on their negative interactions with PIC. The officers express frustration regarding the ways in which the media depict the police—specifically in regards to how they respond to PIC—and claim this exposes them to more danger throughout the course of their patrol because the public develops a fear of the police. As opposed to viewing the police as an organization designed to protect the public, the media sell the idea that police expose the citizenry to more danger as a result of their negative responses to PIC. As a result, the legitimacy of the police is questioned, resulting in the citizenry becoming less likely to assist or cooperate with the police. This exacerbates the ‘us versus them’ mentality between police officers and ordinary citizens, and establishes feelings of fear and distrust towards police organizations.

If the legitimacy of the police is questioned as a result of the media’s overreliance on negative interactions between the police and PIC, it immediately exposes frontline officers (and their civilian partners in this case study) to more danger. One officer states that the police are always going to be fighting a losing battle with the media and suggests the media are only concerned with selling stories as opposed to reporting the reality of everyday police work:
But that [positive interaction] doesn’t sell. And that doesn’t have somebody sitting on the edge of their seat at home going ‘oh my gosh, the police are rotten people’, right? We’re fighting a losing battle. We know we’ll never win that battle. So you just accept it. You know?

One of the mental health professionals elaborates and claims the media only focus on the one negative interaction while ignoring the vast majority of successful calls for service: “For one bad [interaction], there are a million good [interactions]”. Another officer expressed a great deal of frustration towards the media, claiming everything the police are scrutinized for is sensationalized for the purposes of selling newspapers, when in reality “98.5% of the time it doesn’t even get past talking”. One officer discussed the importance of growing a ‘thick skin’ as a police officer because the media will always perpetuate the ‘us versus them’ mentality and continue to perpetuate police officers’ perception of danger:

Helping that lady doesn’t sell newspapers. And that’s the unfortunate part. But that’s the way it is. You grow a thick skin. And you do your job. You do the right thing—the way you’re taught and trained and you just do it. As long as you know in your heart what you’re doing is proper, you do it.

The ‘us versus them’ mentality that develops within the overarching culture of the police organization is problematic. It inevitably exacerbates frontline officers’ perception of danger as they view the citizenry as potential threats to their safety. This is not to suggest that the media ought to exclusively focus on positive policing stories. The media play a critical role in holding
public institutions accountable and must continue to do so. The overreliance, however, on publishing stories that undermine police legitimacy and criticize their responses to PIC expose police officers to greater levels of danger throughout the course of their patrols. The perceived danger associated with policing and the ‘us versus them’ mentality leads to the development of camaraderie within the police organization, which will be the focus of the following section.

‘There are no lone wolves here’: Camaraderie and Police Culture

The perception of danger amongst frontline police officers causes police members to develop strong bonds of camaraderie. This camaraderie is identified throughout the academic literature as a consistent characteristic of traditional accounts of police culture. As discussed in the literature review section, the camaraderie between members of the police organization can produce a number of problematic consequences, including maintaining secrecy throughout external investigations and holding negative views of superiors (Chan, 1997; Goldsmith, 1990; Kleinig, 2001; Paoline, 2003; Paoline, 2004; Reiner, 2000). Perceptions of danger accentuate the importance of camaraderie within police organizations, which can then lead to further social isolation and thus intensify the ‘us versus them’ mentality noted above. While camaraderie is viewed as an integral element to maintaining officer safety while on duty, there is a growing body of research that suggests police officers identify camaraderie as a mechanism to cope with the stress of police work (Chan, 2007; Lindsay & Shelley, 2009; Reiner, 2000). The strong relationships that members of police organizations develop with one another relieve some of the stress associated with police work, as they often rely on their colleagues for support throughout their careers.
This MHU offers a unique opportunity to examine the camaraderie within police organizations. Many studies in this area examine the camaraderie between police officers, however in this study it became clear that these bonds of solidarity extended to the officers’ civilian counterparts. As one senior police official explained: “I have to see if this person can work with a police officer, right? And let me tell you, that is the hardest qualification”. This officer highlighted the importance of camaraderie and how partnerships can potentially threaten their environment of solidarity. In order to protect this environment, it was important to identify mental health professionals who would be able to seamlessly enter the police organization and not threaten the existing camaraderie. As one mental health professional states: “You can’t work here if you don’t fit in. Which is unfortunate”. In this section, I will demonstrate how camaraderie permeates throughout this particular MHU by examining conceptions of partnerships and the importance of defending and assisting one another.

Conceptions of Partnership

The academic literature indicates the importance of partnership amongst sworn police members (Chan, 1997; Reuss-Ianni, 1983). Each police officer in this study emphasized that they consider the mental health professionals as their partner. Despite feeling that they were responsible for their safety while on duty, each officer stressed the importance of relying on their civilian partner to ensure they are able to safely and effectively fulfill their responsibilities. As one officer notes: “Policing is always a team effort”, noting the irrelevance of whether their partner is a fellow police officer or a civilian mental health professional. Furthermore, each officer observed the importance of relying on their partner in order to maintain a safe working
environment: “If you don’t consider them a partner, things can go south real fast. We trust each other and work off each other, that’s for sure”. As one mental health professional elaborates:

You develop this camaraderie that that’s your partner and you know what, if somebody is having a bad day at home, we talk about that first. Get that out of the way so we can move on with our day. You don’t want to carry any baggage during the day. This—you have to have your focus sharp. So it’s very much like any police-to-police partnership. You want to make sure you trust your partner implicitly. You want to know what his skill set is and you want to know where his weaknesses are so you can compliment that and so we want to play off each other.

One police officer elaborated and claimed that they must rely on their partner while on duty to ensure everybody is safe:

Absolutely. They are our partner. They are our right hand. We’ll go to scenarios and situations that are very dynamic and often we can be, depending on where that call is coming from, be the first ones on scene. So we have to make sure that the relationship is good and I can count on my partner to, if need be, assist so we can both make sure we’re safe and that individual is safe.

During one of the ride-alongs with the MHU, I observed the police officer and the mental health professional engage in a conversation regarding family, vacations, dating, drinking, and stories from previous shifts. This type of exchange was common throughout the ride-alongs I
was invited to participate in and it immediately became clear that the police officers and mental health professionals felt extremely comfortable with one another. In addition, one officer endorsed the importance of using humour amongst colleagues to cope with the stresses of the police work involved with the MHU: “If you take shit too seriously, you’ll get into trouble”. While it is outside the scope of this thesis to address the emotional impact of policing within the MHU, it is interesting to note their reliance on the use of (at times, vulgar) humour to cope with the stresses associated with this position. The officers and the mental health professionals “laugh a lot and have a good time”, however, during each ride-along, both the police officers and mental health professionals emphasized the importance of having ‘good’ partners in order to use humour as a coping mechanism: “We’re not a quiet bunch, that’s for sure”. According to Kuhlman (1988) vulgar humour is used to cope with the stresses associated with emergency service positions. Rowe and Regehr (2010) elaborate and argue that emergency service personnel require the use of humour to cope with the stresses associated with their occupational environment.

Each police officer emphasized the significance of the fact that all of the mental health professionals on the MHU had existing relationships with this particular police organization for a number of years, making the sense of partnership within the MHU seamless. One mental health professional also discussed the importance of selecting the appropriate individuals to work on the MHU: “We have the right people here. We all have a passion to do this job and we all have the right teamwork”. This particular individual highlighted the importance of working towards the same goal (i.e., effectively serving those with mental illness in the community) for developing strong partnerships. Another mental health professional elaborated and claimed that taking pride in providing excellent service to the community strengthens the conception of partnership
between police officers and mental health professionals: “Everybody gets along and we have a lot of fun together. We’re strong, we’re proud of the work we do, so I think that really brings the team together”. As opposed to identifying complications regarding the perceived contradictory roles within the MHU (i.e., criminal enforcement versus health), the police officers and mental health professionals stressed that the partnership is strong due to the fact that both agents are working toward the same goal.

One mental health professional experienced first-hand the benefits of being considered an equal partner to the police while on duty: “Yeah, they refer to me as their partner. If anybody or any clients or whatever—if there hasn’t been a warm welcome, yeah they’ve been ‘don’t talk to my partner that way, give [name] some respect’”. One officer stressed the important and required camaraderie in policing, and that both members of the MHU must be viewed equally: “You understand that you’re part of us, we’re not just sitting here driving you to do your job. We’re not just bodyguards sitting out in the car waiting for you. It’s a partnership”. This officer identifies the importance of buying into the overarching culture of camaraderie in policing, indicating that the mental health professionals must become a part of the police organization and understand the importance of treating their colleagues as partners. This conception of partnership is equally as important for the communities the MHU serves. As one officer states: “I depend on a lot of what they see because I don’t have the expertise—I’m not an expert. I definitely have the experience, but I’m not an expert in mental health”. The police officer depends on the mental health professionals for their knowledge and expertise regarding mental illness, whereas the mental health professionals rely on the police officers for safety and protection. As a senior police official elaborates: “We do not want to train police officers to be diagnosing anybody. That is not their function and that is not their role”. This individual identifies the fact that this is
a mutually beneficial partnership that reflects a higher and more comprehensive level of service to the community—namely those who are suffering from mental illness or who are experiencing a form of crisis. This camaraderie, then, is essential in order to ensure an effective response to PIC. In this case study, both sworn and civilian members of the police organization internalized this conception of camaraderie, and as such, each member developed a mentality of defending and assisting one another. This will be the focus of the following section.

‘The cavalry is coming’: Defending and Assisting Colleagues

Defending and assisting your fellow colleagues is a staple characteristic of traditional accounts of police culture. Janet Chan (1997) describes the negative externalities that are produced as a result of defending and assisting fellow colleagues by examining the invocation of the ‘blue wall of silence’ (Kleinig, 2001). As Kleinig (2001) posits, the ‘blue wall of silence’ refers to police officers refusing to cooperate with external investigations, often perpetuating cases of police misconduct (i.e., racism, ignorance of minority cultures, insensitiveness to traditions, prejudicial beliefs, and a reluctance to use professional interpreters) (Chan, 1997). This particular example of defending and assisting one another was not replicated in this study, as officers rejected the notion that they would ‘cover-up’ misconduct perpetrated by fellow colleagues:

Don’t mess up and don’t expect your buddies to lie. Because the days of lying for each other are gone. I’ll tell you that right now. It’s no longer. So the idea of ratting your buddy out—people know before that, yeah Joe Blow screwed up. If I’m going to be asked I’m going to tell the truth. So the air I think is there because
investigators are so well trained that they obtain the truth regardless through good investigative techniques.

This officer explains that ‘covering’ for your fellow officer is unlikely in today’s policing environment due to the fact that officers are more likely to get caught lying through enhanced investigative techniques. Instead, the results from this case study indicate that police officers defend and assist each other while on duty and more informally, act as mental health support outlets for their colleagues. As Holly Campeau (2015), in my view, correctly notes:

Having your fellow officer’s back physically when confronted with danger in the line of duty seems to be a given, but…this does not always translate seamlessly into covering or supporting one another within the headquarters or when faced with discipline (680).

Defending and assisting one another physically while on duty appears to be a requirement of frontline police officers. It is a characteristic very deeply rooted within the overarching culture of police organizations and is perpetuated by the aforementioned perceptions of danger and conceptions of partnership inherent amongst police officers. As previously mentioned, these cultural characteristics are engrained in the mindset of police officers once they begin recruit training and become reinforced and internalized throughout the course of their careers. In this case study, for example, during a ride-along one officer acknowledged the importance of responding to 10-78 calls (officer requiring immediate assistance). Supporting traditional conceptualizations of police culture and noting the importance of defending and assisting fellow
officers, this officer remarks: “I’m doing whatever it takes to get there as soon as possible”. This officer considered 10-78 calls a priority, further demonstrating the notion that defending and assisting fellow officers is an embedded characteristic of the overarching police culture.

On another ride-along, the two MHUs met at a local coffee shop for a break and were discussing calls from previous shifts. One of the officers discussed a call where a uniformed patrol officer requested assistance after becoming involved in a physical altercation with a man. Another speciality unit (also comprised of a police officer and a civilian) within this particular police organization heard the call for assistance but failed to respond because they believed it did not meet the mandate of their particular unit. Expressing anger towards the situation, the MHU officer remarked: “There is no excuse. You know you’re a fucking cop. You go and help because one day you might need assistance. You never turn your back”. Their perception of danger and the deeply rooted camaraderie inherent in policing establishes certain expectations for all officers within the police organization. Regardless of their responsibilities, police officers expect their colleagues to prioritize and respond to any calls where a fellow officer may be in danger.

One police officer elaborates and claims that defending and assisting fellow colleagues is culturally engrained in this particular police organization and has intensified by incorporating civilian mental health professionals in the MHU:

I do find that our specific mental health professionals are very good in terms of officer safety principles and in terms of backing—worst comes to worst, they’re on the radio. And if a mental health professional ever gets on a radio and says ‘hey we need some help here’ the cavalry is coming. We did that once. We bring more people so we don’t have to hurt people. If he gets loose and starts attacking people
I’m going to have to hurt him. One of the mental health professionals got on the radio and said ‘can we get units to 123 Fake Street’ and the waves just keep coming. Everybody is coming. The staff sergeant came. Everybody came. And that’s—so that’s good. Our guys—we’re—we have a very good culture of that within the [city name] police service and I think it’s extended to them.

Not only do police officers prioritize responses to assist fellow officers, but the MHU has also extended those responsibilities to defending and assisting their civilian counterparts. As one mental health professional explains: “They drop everything and come and help us. They’ve got my back”. It is here where the strength of this characteristic of police culture is unmistakeable. Defending and assisting colleagues not only persists amongst sworn police members, but it also permeates throughout the police organization and extends to civilian members. The expectation, however, is that the mental health professionals will also defend and assist their police counterparts. A MHU officer elaborates: “We’re partners. We each have a job to do. We have each other’s back”. Frontline police officers internalize this mentality and its strength must be acknowledged through its ability to impact the behaviours and attitudes of civilian mental health professionals working within a policing environment.

When discussing the benefits of the MHU, each officer and mental health professional eagerly identified supporting those in crisis as a major benefit. As one mental health professional reports:

You left the city a little bit better than when you found it, you know? Like, when bad things could have happened they didn’t happen because we had the right people
with the right skill sets and the right seats on the bus doing the right job. And that’s very rewarding.

While these benefits were widely noted throughout this case study, it became apparent that there were other justifications and benefits associated with the MHU. For example, as one officer explains: “[The MHU] *keeps the guys where they need to be*—*it keeps boots on the street, which is what you need*”. This officer alludes to the benefit of ensuring frontline patrol officers are not occupied responding to calls involving PIC, but rather are available to fulfill their other responsibilities including protecting the public from danger and having the ability to defend and assist one another in the field. The civilian mental health professionals reiterated this goal, and as one observed: “*Our goal is to reduce the amount of time that uniformed officers are dealing with people in a mental health crisis. Um, we’re trying to reduce the amount of time police are spending in the emergency room*”. As one senior police official reports, the aim with the MHU was to ensure police officers were able to fulfill their responsibilities more *effectively* and *efficiently*:

The bottom line of what we started—and it may sound very basic—the issue was ‘*how do we get police officers out of the emergency room and not being tied up with arrests of persons in crisis for extended periods of time*’? That was the bottom line driver. How do we get police officers back on the road to do more calls for service?
As these excerpts demonstrate, the intended consequence of the MHU was to relieve police officers as much as possible from the strenuous process of apprehending a PIC under the Mental Health Act (1990). Interestingly, however, while this unit relieves frontline patrol officers from being occupied with calls for service involving PIC, it also ensures there are more frontline officers available to defend and assist fellow colleagues. As one officer argues, getting ‘buy-in’ from other police members was difficult until the benefits of the MHU were communicated: “Maybe [some] don’t believe in it but it’s getting boots back on the street so [they] like it because they’re keeping guys here who can help. So I think the buy in has been huge”. Because more officers are available to support their colleagues or fulfill their ‘primary’ function (i.e., protecting the public), officers were eager to accept the MHU. This further demonstrates the importance of defending and assisting one another. This unit created an opportunity to ensure that more officers would be available to defend and assist one another, should the need arise. This case study joins an emerging body of literature that suggests police officers not only rely on one another to defend them in the field, but also to assist them cope with the mental related stresses of police work (Chan, 2007; Lindsay & Shelley, 2009; Reiner, 2000).

Examining the emotional impact of responding to PIC is outside the scope of this current project. Understanding how police officers cope with the stresses of responding to PIC, however, provides an opportunity to develop a more in-depth understanding of police culture. As previously mentioned, physically defending fellow members of the police organization appears to be a requirement of frontline policing duties. Furthermore, as this case study suggests, ‘covering up’ for your fellow colleagues throughout external investigations is no longer an inherent characteristic of police culture. Instead, the data from this case study suggest that defending and assisting fellow colleagues is no longer limited solely to the physical aspects of
police work. What emerged throughout the course of this study is that members of the police organization (both sworn and civilian members) rely on one another to cope with the psychological aspects of police work. As one mental health professional suggests: “There have been a number of tough situations and I rely on my partner and my partner relies on me”.

The calls for service that the MHU responds to have the potential to cause vicarious trauma for the police officers and civilian mental health professionals involved. Throughout the interviews, each participant noted the difficult situations that they may be exposed to on a daily basis. The following excerpt from an interview with one mental health professional puts these experiences into perspective:

IV: Without naming names, could you give me an example of a particularly difficult situation you have encountered in your time with the MHU?

RP: Yep, well there’s been a few. There was one call we went on and they just reported a man who had jumped from the 17th floor. And so there were hysterical people on the phone so the officer I was with said maybe we can go over and assist with this. And a lot of officers were with the body where it had landed and everything and it was a big apartment building and everything and so we went upstairs to the 17th floor and there were these people standing in the hallway. I said what’s going on because it was herself and a 21-year-old son and a 16-year-old daughter and she says well my husband just jumped off the 17th floor. So we just wound up being the first people attending and so what you have to worry about at that point now, is I’m thinking oh my god, what are we going to do? This might be
a homicide—we go into the apartment and we don’t know it’s a suicide—we presume it’s a suicide but you don’t know it isn’t a homicide. [Name of police officer] took the son off and I went off with the mom and the step-daughter and just you know, when somebody has just jumped off the 17th floor right in front of them what do you say? How do you answer that? That to me was one of the hardest calls to be on. Because it was brand new ground for me to be in that situation. And it was just sad. It was sad seeing the impact on the wife and the daughter, you know, why would he do this and it was just so sad to see. It was just huge. It was just so so so sad. And then trying to say the right things, the encouraging things. But that was one of the hardest. Just that—when you see the true devastation of mental illness on people. True true devastation. That’s the dark side that you see. The impact on the family—but yeah it was sad. I mean there have been many others but that was one that I struggled a bit on. There have been a few. And obviously it wasn’t a call but when [name of police officer] shot himself. I mean that was my darkest day here. It is sad. It’s sad. However, you know. That’s what we’re here to prevent, right? You do your best to prevent it and you can’t do much more than that, right?

This mental health professional identifies the trauma that members of the MHU can experience on any given day. In this particular situation, the mental health professional discussed the difficulties associated with responding to mental health crises as they occur in the community. Another mental health professional explains that there have been a number of difficult calls that required an immediate response, and suggests that ordinary citizens should not be subjected to
these experiences. Members of the MHU can experience these calls on a daily basis, and require support:

Hmm, difficult situation. The guy who was on the train track who was literally cut in two. He laid down and the train severed his upper torso from the rest of his body. My first call was a guy who jumped from an 8th floor. Another call was a lady who jumped from the 11th floor. And seeing the remains of that, that’s vivid. 17 year old who hung herself. So, yeah—but that’s the nature of the beast right? Again, stuff that other people shouldn’t see.

One senior police official suggested that it takes a special kind of police officer to be exposed to these types of events and stressed the importance of monitoring the officers on the MHU: “Let’s not kid each other—it takes a very special kind of officer and we need to watch our officers very carefully”. When asked how they cope with the stresses involved with police work specific to the MHU, each participant identified the importance of relying on their partners and making themselves available to support their partners when required. As one officer explains: “If something is bothering me I talk to my partner. If something is bothering me, they’re going to come up and say ‘is something wrong’”. As another officer elaborates, the members of the MHU prefer informal means to help one another cope with the emotional impact of this work:

Um, see we talk. Obviously I can’t get into specifics, but [a number] of people have come up to me and said ‘do you have a minute, like that really affected me can you
talk to me”? I’ve had people call me at home. We take care of each other informally.

Discussing the importance of assisting fellow colleagues, one police officer highlighted the importance of making sure coworkers go home safely: “It’s making sure that at the end of the day, you can go home and you don’t bring your workload home with you. And making sure your coworkers have gone home safely”. Going home safely no longer only means physically returning home safe. A mental health professional elaborates and discusses the issue of stigma in seeking formal support: “I don’t think any of us have any concerns about stigma. We’re stigma advocates”. The culture of the organization appears to foster an environment whereby both police officers and mental health professionals rely on each other to help cope with the mental aspect of policing. As one mental health professional notes:

Everybody has that desire to be here realizing that things can go squirrely sometimes but we have that inner fortitude that we’ve dealt with these things over and over again and you know what, we build each other up as a team and we support each other. If [name of mental health professional] needs a day off tomorrow and he calls and I’ve not got anything planned, I’ll fill in for him and he’ll pay me back next week.

Additionally, one police officer stresses the importance of group support systems, suggesting the police officers are able to rely on the knowledge and experience of their civilian partners when it comes to mental wellness and coping strategies: “Certainly support systems
within our group—talking to [name of mental health professionals] or something like that if something is bothering you. They can offer you their advice and support if you need to”. This is a unique characteristic of police culture given the specific level of expertise that is made available to the police officers on the MHU. Dispelling the idea that frontline officers hold negative views of superior officers, one senior police official even mentioned the changing culture of police organizations to be more cognizant of mental illness:

I have been very open to all my teams that my door is always open. Uh, they have my personal cell phone number, so if anything even happens after hours, or on a weekend, they know to call me and I’m there for them anytime. And that’s something that I’m totally dedicated to this program and to them. You know? I would always be there for that.

As another police officer suggests, the culture of the organization has changed to reflect an understanding of mental illness, not only in practice, but also in policy:

So everyone deals with it differently and that’s why from the supervisory level, I can walk upstairs and talk to Inspector [name] if I need to and the door is open. And that is the image that they want to portray and that is the policy that they have implemented. So I don’t think this is an unsafe environment. I’ll summarize it that way.

This challenges the notion that frontline police officers hold negative views of their superiors—once considered a pillar of traditional conceptualizations of police culture. The data demonstrates
that the mental wellness of police members (and their civilian partners) is prioritized and that defending and assisting fellow colleagues is a strong characteristic of police culture that remains stable across officer ranks.

These examples illustrate the important role each member of the MHU plays in assisting one another cope with the stresses of police work. Furthermore, it offers an additional perspective of the cultural characteristic of defending and assisting fellow colleagues within traditional conceptualizations of police culture. In the past, emphasis was placed mainly on physically defending one another and maintaining secrecy throughout the course of external investigations. Physically defending fellow colleagues appears to be a given throughout the police organization, while maintaining secrecy or ‘covering up’ for your partner throughout external investigations remains a contested characteristic of police culture. The data from this case study clearly demonstrate the importance of defending and assisting one another, however it now also entails providing mental support for fellow colleagues. The following section argues that this case study represents an emerging conceptualization of police culture; one based primarily on service-based initiatives rather than strict crime-enforcement initiatives. First, I use MHU members’ understanding of their role to demonstrate how these officers and mental health professionals are dedicated to providing a service to PIC rather than relying on crime-enforcement techniques. In the second section, I examine how this particular MHU measures success and argue that the service-focused culture of the MHU is strengthened as a result of members’ emotional commitment to their clients.
An Emerging Service-Based Conceptualization of Police Culture

More recent studies cite variance in the ways in which police culture is understood, conceptualized, and transmitted (Chan, 1997; Farkas & Manning, 1997; Paoline, 2003; Reuss-Ianni, 1983). These studies challenge the assertion that police culture is monolithic, instead suggesting it is subject to spatial and/or temporal development (Chan, 1997; Paoline, 2003). Various understandings of police culture can emerge as a result of political affiliation (Wilson, 1968; Zhao, He, & Lovrich, 2006), individual officer attitudes (Decker, 1981; Paoline, 2004; Paoline, Myers, & Worden, 2000), organizational mandate (Gultekin, 2014), and/or increased oversight (Campeau, 2015). As a result, more nuanced and complex understandings of police culture have emerged from the academic literature, considering a growing number of different factors that had been ignored in previous studies.

This chapter acknowledges the fluidity of police culture and suggests that the nature of this MHU gives rise to a unique culture within this particular police organization. I acknowledge studies that have argued that cultural attitudes become internalized amongst members of the police organization and become reflected in practice (Crank, 2014; Paoline, 2003; Terrill et al., 2003). In particular, I argue here that members of the MHU internalize an attitude of service rather than crime fighting, and this attitude is reflected in practice. As such, this MHU gives rise to an emerging service-based conceptualization of police culture within this particular police organization. In the first section of this chapter, I demonstrate how MHU members understand their role as providing a service to PIC, rather than relying on strict crime enforcement initiatives. In the second section, I examine how members of the MHU measure their successes and demonstrate their emotional commitment to their clients to perpetuate this culture of service.
We're not a force, we're a service

“So, over the last 35 years, a huge change in attitude in terms of responding to persons in crisis. Many years ago as a call for service: this is not our work. We arrest bad guys. We do criminal stuff. We don’t do this. For us years ago, this was just an inconvenience. This was just something that took us away from our mandate, which was to arrest bad guys.”

Senior Police Official

As previously mentioned, a number of police organizations throughout both Canada and the United States have adopted community policing initiatives. Community policing is a philosophy that promotes partnerships between the citizenry and police organizations with a goal of identifying, prioritizing, and addressing community issues (Palmiotto & Unnithan, 2011). As Paoline (2004) suggests, traditional accounts of police culture reject notions of community policing as it “may impede their efforts to fight street crime” (211). Furthermore, Paoline (2003) argues that community policing efforts have historically been rejected on the basis that it does not involve ‘real’ police work. Instead of relying inherently on crime-enforcement initiatives, police organizations have shifted their organizational focus to community policing initiatives, which “assumes a need for greater accountability of police, greater public share in decision-making, and greater concern for civil rights and liberties” (Friedmann, 1992, pp. 4). As Goldstein (1987) posits: “it is accepted that the functions of the police inevitably involve more than just enforcing the law, and that some of these non-law enforcement functions are extremely important” (6). The MHU in this study, I argue, recognizes the inevitably complex role of the police and supports the emerging service-based conceptualization of police culture.

A senior police official suggested that the ways in which police respond to PIC in the community has evolved. Responding to PIC has always been a responsibility of frontline police officers (Borum et al., 1998; LaGrange, 2003); however, in the past police organizations viewed
this responsibility as tedious and inconvenient. The time and effort it took to respond to PIC meant frontline police officers were retreating from their primary focus or organizational mandate (i.e., crime enforcement). In today’s policing climate, it is irresponsible and inaccurate to limit our understanding of the police role to strict crime enforcement initiatives. As the mandate of the police continues to expand, police officers have often been considered ‘social workers with a badge’ or ‘social cops’—referring to the service related responsibilities now thrust upon police officers. These responsibilities, according to one officer, are thrust upon the police as a result of structural issues in society: “I just get tired of the policing industry being the whipping boys and girls for society’s mistakes”. For this officer, requiring a police response to PIC represents a broader social failure to effectively treat and respond to these individuals. Nevertheless, the fact that police officers are required to respond to PIC exacerbates this idea of ‘social’ cops. One police officer in this study, for example, suggested this is reflected in the recruitment and hiring policies of Canadian police organizations: “Back then the hiring and recruiting process was all about what sports you played and how big you were. Today, emphasis is placed on things like community involvement, volunteer experiences, and education”. This aligns with the academic literature regarding the professionalization of police organizations (Fielding, 1988), which places an emphasis on recruiting and hiring police officers to fulfill a plethora of various responsibilities—not solely criminal enforcement initiatives.

Throughout the interviews, each police officer recognized the important change in language between the police force and the police service. For each officer in this study, the change in language signalled a revolution in policing and immediately modernized the mandate and expectations of the police. A use of force instructor noted the difficulties associated with referring to the police as a service: “I believe it’s less respectful of the police. Less authority of
the police. We’re more of a public servant than a public guardian, in my mind”. This sentiment was not held amongst the MHU police officers, each of whom suggested that the role of the police has changed specifically in regards to how police respond to PIC:

Since I’ve been here—we’re not a force. We’re a service. We’re professional and we understand the needs because the needs have changed. The officers that we have here, that I’m working with, know the service we have to provide. We have a job to do, you know? We have laws that we have to uphold, we’ve got to protect the public, but you don’t have to do that with a fist up in the air and demand it. And that hasn’t been the way for years.

While one officer discusses the challenges associated with the changing mandate of the police, the MHU officers argue that policing is a complex and dynamic environment where change must be expected and acknowledged. As one senior police official suggests, the fluid policing climate requires unique and creative solutions to a multitude of possible issues—including their response to PIC. As such, police organizations require the assistance of a number of agencies to help improve policies and procedures and ensure the police are working with community agencies to address community problems:

If I say this is our policy because we are the police and this is our training because we are the police and this is how we are going to handle this because we are the police, well that is only one perspective. So what we have done is we have broadened the table. I think there are about 20-25 people who sit at the table, but
they all bring their disciplines and their professionalism to the table to look at our policies and our response and make sure we are doing it right. And to provide ideas for us.

It is for this reason that I find the assertion that police culture is static and not susceptible to change both dangerous and irresponsible. This assertion limits our understanding of the multitude of possible cultures within police organizations and does not consider emerging issues or the changing responsibilities of the police. I acknowledge the pervasiveness of characteristics of an overarching culture (i.e., the aforementioned perceptions of danger and camaraderie), however I argue in favour of a conceptualization of police culture that takes into account the unique cultural elements of specialized units. My conceptualization of police culture acknowledges the fluidity of both the role of the police and the resulting cultural characteristics. The unique nature of the MHU in this case study provides an opportunity to better understand how traditional characteristics of police culture are challenged or reproduced as a result of a newly implemented service-focused police unit (as will be discussed below). Furthermore, the MHU provides an opportunity for policing scholars to expand their understanding of police culture. Theories of police culture must take into account the effects of emerging speciality units, the new responsibilities of police organizations, and other factors that have the potential to challenge or reproduce dominant characteristics of police culture. In this study, for example, I found the MHU challenges the notion that policing is focused primarily on criminal enforcement. Instead, I argue that the MHU represents an emerging service-based conceptualization of police culture.
‘Service’ and Police Discretion

As previously mentioned, the police officers in this study understood their role as one that requires them to protect the public from danger. Protecting the public from danger, however, does not automatically entail a criminal enforcement response. In the context of this case study, the police perceived their role as protecting the public from the dangers of mental illness and substance abuse. The MHU officers invoke their authority through both the Police Services Act (“Police Services Act, 1990) and the Mental Health Act (“Mental Health Act”, 1990) to provide effective service to ensure PIC are neither harming themselves nor others. As one police officer suggests: “This unit is about taking those individuals that are in crisis and giving them and getting them to the quality care that they need. That’s what this unit is about”. In order to provide this effective service, each police officer reported that they often invoke their discretionary powers to ignore criminal violations. When discussing balancing criminal enforcement and health-related needs, one police officer suggested that discretion is invoked on a case-by-case basis: “No, it’s not [difficult to balance]. You know, we’re given discretion. And discretion is we don’t have to lay a charge if we don’t feel the need. So what’s the best course of action?”.

As the academic literature suggests, police culture becomes internalized as a set of attitudes/beliefs about the job and thus influences the behaviour of police officers (Crank, 2014; Paoline, 2003; Terril et al., 2003). In other words, police culture informs attitudes amongst police officers and these attitudes, in turn, influence their decision-making process (i.e., their invocation of discretion regarding, in this case study, PIC). Throughout the interviews, MHU members identified how an attitude of service, rather than criminal enforcement, permeated throughout the MHU. As one senior police official noted, a goal of the MHU is “trying to get people to stay out
of the judicial process. That is very much a focus”. Another officer elaborates, suggesting that the invocation of discretion is essential because even though some calls may require a criminal response, it may not be the most appropriate solution: “It’s about finding the best solution at the time to get the individual we’re dealing with the right help. That’s the key. The right help”. The idea of providing an effective service to PIC supersedes the idea of strict criminal enforcement. The following excerpt from a ride-along field note exemplifies the service-focus culture within the MHU:

The second call we responded to was in relation to a male party who had stolen a bottle of quick start from a local store and huffed it. He also had a history of being involved with crystal meth and crack-cocaine. He had—allegedly—ingested some of the quick start (and perhaps hydrogen peroxide) and had doused himself in the quick start in order to kill his roommate and himself. He believed he was possessed by demons and claimed he saw spirits and was hearing voices. One notable observation was the amount of discretion afforded to the police officer. Criminal charges were possible given that this individual had stolen quick start from a local store, ingested prohibited narcotics, and threatened his roommate. The officer, however, made specific note that he “wasn’t worried” about the quick start and was only concerned for the clients’ well being. When discussing the call with a fellow patrol officer, the MHU officer noted: “the bottle of quick start is only evidence if we are pursuing criminal charges. Just dumpster it”.


In the response above, the police officer and mental health professional agreed that pursuing criminal charges would be an ineffective solution for that particular individual in crisis. What this individual needed was to be connected to a physician and various community services to address his mental illness and addictions-related issues. A senior police official, however, identifies a fundamental tension within the MHU as a result of the potential conflicting viewpoints (criminal enforcement vs. health) while on patrol:

Some of the challenges—I mean they have been very few—there is always the issue of dealing with people who are in fact in crisis as a result of a drug addiction and in fact in order to support their addiction they have to break the law in some capacity. So then there’s the issue of enforcement of the law, health care and harm reduction strategies all kind of merging together at one point. So that’s where we do see some fundamental tensions, because sometimes we do end up making arrests and laying criminal charges when it is in fact an addictions issue where they break the law in order to support their addiction. So that’s where some of the tensions have come from.

Each officer and mental health professional discussed the possibility of invoking the criminal process if that were the most appropriate solution for that individual: “Sometimes going the criminal route may be the best course, you know we’ll charge that individual and get some conditions put on and we’ll have some court mandated, maybe a court mandated psychological assessment. That’s an option”. As one police officer suggests, this unit works towards the same
goal (i.e., providing effective service to PIC), but the police officers and mental health professionals have different viewpoints:

In the world of a hammer, everything is a nail, right? In the world of the mental health professional, everybody has emotional issues. They’re thinking in the helping profession. It’s approach and avoidance. They’re the approach and try to help. I’m in the avoidance of harm. That’s what policing is. We’re in the stop business. We’re not in the going business. We’re in the stopping robbers, stopping suicides, stopping this, stopping that.

While it is clear that the police and the mental health professionals have conflicting views, the aim of this unit more broadly is to provide effective service to those in crisis and to reduce the reliance on the criminal justice process. As one police officer notes, pursuing criminal charges and invoking the judicial process can “sometimes push them into that tailspin”. One mental health professional elaborates and suggests it can exacerbate mental illness and addiction-related issues: “My life was shit and look at it now”. While the discretionary powers of the police are heavily criticized throughout the academic literature (Goldstein, 1960; Mastrofski, 2004; Miller, 2015; Rowe, 2007; Tieger, 1971), in this case study it was clear that MHU officers invoked their discretion to provide a more effective and holistic response to PIC. As one officer suggests, the fact that criminal violations are present does not automatically require a criminal response:
Depending on the amount of drugs they had on their person—let’s say they got the help they need, and they’re going to get put into some type of rehab. We have that discretion to put in our report, you know I did see some crystal meth, put it in for destruction and now he’s on his road to recovery.

This officer stressed the importance of determining the response on a case-by-case basis and suggested that clients seeking assistance were more likely to avoid the criminal justice process. One senior police officer elaborates and argues that the discretionary powers of the police are enforced on an individual basis. In other words, each officer has been given discretionary powers to determine the most effective course of action (in conjunction with the expertise of the mental health professional):

RP: I think they would really have to dig deep into the actual call to see is there a true mental health component or is this purely substance? And do we have to act on the criminal aspect or do we have to act on the mental health aspect of it? They would address both, but do we act on both? That’s the key, right?

IV: And that’s where officer discretion comes into effect, I guess?

RP: Totally. I can’t speak for those officers out there, I know that it’s up to their discretion for what they do.
The mental health professionals in this study were also appreciative of the additional discretionary consideration police officers give to PIC: “My assumption is that when it’s with a mental health professional, the police officer will use more discretion—you know, to actually prevent it from happening rather than arresting the person”. One mental health professional discusses the required invocation of officer discretion, noting the importance of ignoring criminal violations to ensure the safety of the clients:

We’ve had probably—over the course of the program we’ve had maybe 2 people arrested in that time for large amounts. And I don’t think that’s even why we went there in the first place, they just happened to have large amounts of substance on them. And we say to them—we ask them if you’re using any substances we don’t care. We’re not here for the criminal thing, we’re here for the mental health piece and we want to make sure you’re safe, so just tell us what you used and what’s going on.

The MHU depends on the honesty of the client in order to ensure his/her safety. If clients fear criminal repercussions, it may place them in more dangerous situations. This highlights the importance of providing an effective service to PIC through police officers invoking their discretionary powers. Another mental health professional discussed the service-oriented attitude of police officers on the MHU: “They usually say ‘we’re here to support you’. So, you know, if you’re afraid of letting the mental health professional know what you’ve been using, it’s a non-issue. Let’s get you the help you need, get you into treatment—whatever”.
Another mental health professional elaborates and suggests that the police officers are more willing to invoke their discretion to avoid the criminal justice process because these clients are vulnerable and are oftentimes at the mercy of illicit drug dealers to fuel their addiction: “Absolutely our guys are pretty good and frequently we’ll say we don’t care about the drugs we’re just here to ensure you’re safe. I mean, ultimately we can’t stop you from using drugs and these people aren’t dealers. They’re the ones who are buying the drugs from the dealers. So, it’s a little bit different that way”. This contradicts assertions that police officers are focused primarily on criminal enforcement. This culture of service is embedded within the mindset of police officers belonging to the MHU, which is demonstrated through their practical application of police officer discretion. Where criminal violations may be present, officers belonging to the MHU invoke their discretion in order to more effectively serve their clientele. Not only is this culture of service evident through their practical application of discretion, but it is also demonstrated through how MHU members measure their success and through the emotional commitment each member of the MHU displays towards their clients.

Success and Emotional Commitment

Each officer and mental health professional in this study stressed the importance of providing effective assistance to individuals in crisis as a determining factor of whether they felt ‘successful’ as a member of the MHU. This is in stark contrast to the ways in which ‘success’ is measured in traditional conceptualizations of police culture. In these studies, success is determined largely by statistics (i.e., arrest numbers, number of citations issued, etc.) (Coleman, 2008; Kelling, 1996). This is to be expected if the organizational mandate identifies with strict
crime-enforcement initiatives. In this case study, however, MHU members expressed a different method of measuring success. Because this unit embodies a service-oriented culture of policing, the officers and mental health professionals suggested measuring the success of the unit is difficult to quantify. One police officer, for example, identified the differences between measuring success for patrol officers and for the MHU:

RP: I think success on patrol is statistically based—you can have lots of tickets, you can have x amount of arrests. And that can just be taken in by someone in management—let’s just check out your stats. You’ve issued this many tickets and you’ve arrested this many people—you’re successful. Which, to me doesn’t necessarily mean you’re a good police officer because we also have discretion and a lot of times instead of issuing that ticket, just taking that guy aside and saying listen what you did—that works too. You can educate them. But that is not calculated. Where here, we get a lot of feedback from patrol. You know, ‘thanks, you relieved us, we didn’t have to go to the hospital’. So you actually hear it.

IV: So how do you measure success as a member of the MHU?

RP: Um, to me success is, we go to a call, we help that person. Whether it be going to hospital, offering them resources. I wouldn’t go by the stats—‘we’ve diverted 15 people’. I think you’d have to go call to call. Was this person satisfied? Was the family satisfied? And if you can get that and nobody got hurt, I think that’s successful. Not necessarily something that you can keep track of.
This culture of *service* requires a new method for measuring success. Under previous conceptualizations of police culture, measuring the success of patrol officers through the collection and analysis of statistical data proved to be a valuable tool—especially when criminal enforcement was the main priority. With the shift to a service-oriented focus, however, the ways in which police organizations evaluate their members must also be adjusted. As one police officer notes: “I would hope my success in this unit would be—for every call that I respond to, that I would hopefully aid somebody and help somebody in some sort of way”. As this police officer suggests, because this unit was developed to more effectively serve PIC, the ways in which police officers and mental health professionals are evaluated should align with the specific mandate of the unit. It is not beneficial to quantify data regarding the MHUs interactions with PIC given that their mandate is service-focused rather than enforcement-focused. Instead, it is more valuable to measure their success by determining if their clients have experienced both effective and efficient *service*. Another officer notes that he personally measures his success by getting fellow officers to buy into the value of the MHU: “I would say that would be it. Getting the buy-in. I think that’s where my success is—getting the guys to buy-in”.

While it is possible to quantify the number of diversions from the criminal justice system, the officers and mental health professionals stressed that they feel successful when they are able to provide an effective level of service to an individual in crisis. This measurement of success contradicts traditional conceptualizations of police culture because this unit was developed and implemented to *serve a different function*. The police organization identified a weakness in their ability to effectively respond to PIC and implemented a specific *service-oriented* unit to address this concern. This culture of *service* has promulgated throughout the MHU and is reflected by the ways in which the organization measures the success of the MHU members. As one senior
mental health professional posits: “To me, it’s all about the individuals we see and being client centered and making sure they get the best care they can possibly get in the community when things are not going well in their life”. This excerpt suggests that the MHU challenges dominant conceptualizations of police culture by stressing effective service-based responses to PIC, rather than relying on criminalizing the mentally ill (Abramson, 1972). This cultural change is reflected in how police officers and mental health professionals measure their success.

Discussing why the MHU has been deemed successful by police management, a senior police official reiterated the commitment of the police organization to provide more effective service to PIC:

First is the quality of our people. We selected the right people and we got the right mental health professionals and they know their mission and they know their mandate and they know their authorities and they know what we are trying to do in helping people. So that’s our people. We are backed by sound policy. We are supported by excellent training. We got great supervisors and we got the accountability measures. So people, policy, training, supervision and accountability—if those 5 things are looked after then you’re going to build a solid program. And the other thing that makes this a success is that we have built this on permanent funding. So it is not precarious in nature. It is stable, it is supported and it is sustainable. And that is going to make this a success.

Interestingly, this officer highlights the importance of building the MHU on permanent funding. For the police organization, it secures guaranteed funding for the foreseeable future, which is a
clear practical benefit. The fact that the MHU is built on permanent funding also signals a fundamental shift in the culture of this particular police organization—namely the organizational commitment to foster a culture of *service*. This ensures the MHU will remain a key element of the organization, challenging traditional conceptualizations of police culture that suggest police organizations are solely concerned with strict criminal enforcement initiatives. The successes of the MHU are *enhanced* as a result of it being built on permanent funding. This sends a clear message to all members that the MHU exemplifies the type of response (i.e., *service-based*) this police organization intends to maintain with PIC in the community. The MHU establishes the foundation of a culture built upon the premise of providing effective *service* to PIC. Not only are senior police officials committed to the program, but frontline members (both police officers and mental health professionals) are also committed to establishing a culture that focuses primarily on *service* delivery rather than criminal enforcement. The police officers and mental health professionals can build and transmit this culture (including their perceptions of how they measure success as MHU members) more confidently when this unit is firmly established within the organization.

Furthermore, this senior police official acknowledges the importance of selecting the appropriate people to work with the MHU. Selecting the appropriate individuals to represent the MHU is particularly important given the fact that these members will be relied upon to develop and eventually transmit this culture of *service*. Because police culture impacts the behaviour of police officers, it is important to select officers who are committed and *emotionally invested* in providing a high level of service to PIC. Bakker and Heuven (2006) argue that police officers often distance themselves emotionally from their clients in order to cope with the emotional
exhaustion associated with police work. Conversely, in this case study I found MHU members emotionally invest themselves in their work to provide a higher level of service to PIC.

A senior mental health professional emphasized the impact of the MHU on the police organization more broadly, suggesting this unit is mainly concerned about the experiences of the clients:

One thing we want to know is: is this providing better health outcomes for individuals in the community? That’s the one thing we want to measure. The second thing is: is the client having a better experience when they’re in a crisis kind of a situation? And the last thing is: is this a cost-efficient kind of a program? So those are the three things we’re really trying to measure.

For obvious reasons, cost-effectiveness is a significant measure of success for both the police organization and other invested stakeholders. More interestingly, however, this senior mental health professional prioritizes measuring the health outcomes and experiences of the clients served by the MHU. This demonstrates the expectation that MHU members will respond with compassion to PIC—a view not solely held by this senior mental health professional. Another mental health professional described the necessary characteristics of MHU members if they wish to be successful: “Somebody who’s non-judgemental, empathetic, um, instils hope in people that this too shall pass, you may not feel like that now, but it will. Um, good listening skills, and someone who does not jump to conclusions. And an understanding of mental health and crisis”.

This mental health professional elaborates, suggesting empathy is only one characteristic that
ensures members of the MHU experience success. Police officers who wish to work with the MHU require both patrol and life experience to effectively respond to these PIC:

I think the officers that were chosen to do this position are quite empathetic. Um, and they have been on the force for long enough that they have seen crises before coming on to the unit. Um, and you know, with working in crisis comes some life experience. So it’s not like they’re brand new and really haven’t seen a lot. They’ve got some years under their belt. So yeah, it’s a win-win.

While cost-effectiveness was certainly highlighted as a major benefit of this unit throughout this study, its practical community-level benefits were more evident. One senior police officer highlights the importance of cost-savings, but suggests that the service they provide to the community is enough justification for the MHU:

Uh, I think there are many things that I want it to achieve and I think that the group wants it to achieve. I think the fact that—to free up frontline as best as we can, but to service our community as best we can when it comes to mental health and crises in general. Um, to give the community—to no longer give the community those Band-Aid solutions. Right? To actually go out and be able to, um, resolve some of these crises as they’re happening, connecting these people to the appropriate services, to kind of bridge the gaps—that’s what I like to see happen.
This officer explicitly highlights the importance of no longer providing ‘Band-Aid’ solutions to the community. This refers to criminalizing those with mental illness, which this officer suggests often traps these individuals in the ‘revolving door’ of the Canadian criminal justice system. Instead, this unit is focused on ensuring PIC “get the right help”. If each officer and mental health professional is committed to compassionately responding to PIC (e.g., ensuring they “get the right help”), it is more likely that this service-oriented focus may become engrained in the culture of the MHU.

The emotional commitment from each member of the MHU was also noted throughout each stage of data collection in this case study. One police officer, for example, expressed an understanding that individuals may use illicit narcotics to help cope with their mental illness. Instead of expressing frustration that they violate the criminal law, this officer suggests: “You can’t really blame them because if I was having—if I had those kinds of issues, I would probably be doing drugs, too”. This officer identifies that concurrent disorders (mental illness and substance abuse) are challenging to respond to, however the health and safety of the client is always prioritized. Each member of the MHU also emphasized this compassionate attitude when discussing the challenges associated with the MHU. While workload was certainly a major stressor, each officer and mental health professional emphasized the frustration and disappointment they experience when they fail to effectively respond to PIC. This failure can be characterized as losing a PIC to suicide or a PIC refusing medical care. Both of these perceived failures provoked emotional responses during the interviews and throughout the course of the ride-alongs.

The experience of losing a client to suicide proved to be emotionally devastating for a number of members of the MHU. Both the police officers and the mental health professionals
highlighted the fact that they have a ‘frequent flier’ list of PIC—referring to clients they interact with on more than one occasion. As a result, the MHU members have established a rapport with PIC throughout the community. Consequently, losing a client to suicide was characterized as one of the most difficult aspects of the job. As one mental health professional suggests: “It is sad. It’s sad. However, you know—that’s what we’re here to prevent, right? You do your best to prevent it and you can’t do much more than that, right?”. This mental health professional acknowledges the difficulties associated with losing clients to suicide and suggests the police and mental health professionals are doing their best to prevent such tragedies. This mental health professional referred to a specific call for service where a client had died by suicide and suggested that the MHU indirectly failed that client:

The family became the client that day, for me. Because we really were too late. Sadly. We failed that guy in some way, shape, or form. I’m not saying directly, but we failed him. And so now we have new people (family members) who are in crisis.

This exemplifies the emotional commitment this mental health professional displayed towards their work. It also demonstrates the compassion this mental health professional feels towards individuals who are suffering from mental illness. While the devastation of losing a client can be presented as a negative consequence of the MHU, in this instance it can have the opposite effect.

Traditional accounts of police culture suggest police officers often mask their emotional responses throughout the course of their careers (Pogrebin & Poole, 1991). In contrast, members of the MHU embrace these emotional responses, which can be quite beneficial for a service-
oriented unit. The police officers and mental health professionals in this study appeared to be emotionally committed to the work they perform. This instils a culture of compassion towards those who are suffering from mental illness, ideally improving the MHU’s response to their clients. As the mental health professional quoted above notes, the goal of the MHU is to prevent such tragedies from occurring. It is reasonable, therefore, to suspect that those who are more emotionally invested in the lives of their clients will provide a more effective and holistic response to PIC. As Eisenberger, Fasolo, and Davis La-Mastro (1990) argue, employees who are more emotionally invested in their work produce greater outcomes for the organization. The negative consequence produced as a result of this emotional investment is the potential impact on the mental wellness of the MHU members. While it is outside the scope of my thesis to discuss the mental wellness of MHU members, it is essential that police organizations continue to monitor their own members for signs of mental illness.

As one police officer suggests, while losing clients to suicide is emotionally injurious, it presents an opportunity to help family members cope with the tragedy:

IV: What would you say is the most difficult aspect of your job?

RP: You know having lost somebody that you were able to help, but then trying to deal with that and then—I mean and the good thing of that is unfortunately you have lost that person, but hopefully you’re there at that time that you can help the family and friends as well.
Contrary to traditional conceptualizations of police culture, this officer expresses an optimistic (rather than cynical) viewpoint and suggests that assisting family members and friends has become an inherent element of responding to PIC. This officer elaborates and suggests that one of their personal goals as a member of the MHU is to assist family members of individuals suffering from mental illness:

Um, my personal goals are probably to—I mean to help facilitate obviously the person in crisis, but part of that is also to help the families as well. Because a lot of times it is not just the person in crisis that you’re responding to. A lot of times families are involved and you have to support them as well and help support—find them kind of a ground. Because they’re having, also, a lot of hard time dealing with, you know, the outcome of usually the person that is involved.

This further demonstrates the emotional commitment involved with responding to PIC. This is beneficial for both the police organization and the community since members of the MHU appear to be committed to offering a high level of service to PIC. Avoiding the emotional devastation resulting from losing a client to suicide acts as a motivating factor to ensure the MHU provides effective service to those suffering from mental illness. Both the police officers and mental health professionals on the MHU also expressed frustration and disappointment when their clients refused care.

As one mental health professional noted: “People have the right to make bad choices and unfortunately they exercise that right daily”. One police officer summarized the frustration, noting: “You can lead a horse to water, but you can’t make it drink”. Each member observed
that one of the main priorities as a member of the MHU is to connect PIC to community-based support programs. These programs can help address a number of mental health/addictions related issues, including: alcoholism, prescription drug abuse, depression, bipolar disorder, and schizophrenia, among others. As one police officer notes, the most difficult part of the job can be dealing with clients who refuse care:

I would say the most difficult is that sometimes—one person comes to mind that you go and you see them and you try and help them and you try and support them and they’re just not willing to take the support. I mean, you try, try, try and try and then if that person doesn’t want the help, I mean you can’t force it on them. And that becomes difficult especially with the amount of people we deal with that are using drugs now and things like that.

The field note excerpt below puts this frustration into perspective.

*The second call for service we responded to involved a ‘residence check’ where an employee called 9-1-1 reporting a concern about a client. The man was recently separated from his partner and she had taken the child. The client had made some comments including “nobody cares” and “life is not worth living” but the caller noted that he made no specific mention of any plans to self-harm. Regardless, the caller was concerned for his safety. The officer searched the client in the policing database and found he has a long list of prior interactions with police. We arrived at the residence and the officer and the mental health professional knocked on the door and asked to speak with the client. At the beginning, the client was concerned he was in trouble,*
but was reassured that this was just a check-up. The client admitted he was depressed because his partner took his child and he only got the ‘leftovers’. The mental health professional took the lead on the call and offered a number of resources—all of which the client denied. The client noted that 1-800 numbers where people just lend an ear to listen will not be useful and stated “I need someone who has gone through what I have gone through and has been successful. That way they can teach me what they did and how they got through it”. At this point, the expertise of the mental health professional really showed as she was able to recommend the client to a peer-support system where individuals with lived experience come in and present on what they have gone through, their coping mechanisms, and how they got through their times of crisis. The mental health professional gave the client the information for an emergency support line and the peer-support group resource. Once we returned to the vehicle, the officer noted “Hopefully he’ll reach out and get some help for himself one of these days. Unfortunately we can’t force support upon anybody”.

This officer expresses compassion towards the clients the MHU responds to and suggests this compassionate attitude is a consequence of the service-oriented focus of the MHU. A great deal of frustration comes from not being able to ensure clients receive appropriate care. This compassion has significant benefits for the MHU as members become passionate about their work and are committed to improving the lives of the clients they serve. While this compassionate attitude can produce negative emotional responses (i.e., frustration), it can also produce positive emotional responses.

One of the most widely noted benefits of the MHU—from the perspective of both the police officers and the mental health professionals—was the ability to witness improvements in
clients. This further enhances the culture of compassion within the MHU. As one police officer remarks, it is gratifying as a member of the MHU to witness an improvement in the lives of the clients they serve:

You know, we see them at their worst and then sometimes we’ll see them out in the community when they’re doing better and you can actually see a difference that is made when they are on their meds or when they’re following through with a program and they’re dealing with their social workers.

Another police officer elaborates, suggesting that a position with the MHU offers a unique benefit:

Um, the most rewarding is—I would have to say is responding and making a change in someone’s life. Whether it’s from stopping them from dying by suicide or helping them through that crisis. What’s most rewarding for me is being part of that process.

This benefit, as another officer suggests, is specific to the work of the MHU. This officer offers a comparative analysis between the work of the MHU and uniform patrol, suggesting MHU members benefit from the ability to witness improvements in the lives of the clients they serve:

This unit, you get to help more and see results. You get to see the people that you’ve brought to hospital that decide they’re going to take on these programs—say
rehab, or therapy. And you get to see them progress. And a lot of times in patrol, you’re just the front-end. You arrest somebody and bring them to jail, and you don’t really know what happened after that. For instance, a lot of times you won’t go to court for a criminal matter so you never know—I did all this work for this investigation and I didn’t get called to court. There was some type of plea and you never know how things turned out.

This culture of service is strengthened both through the ways in which MHU members measure their success and their internalized attitude of compassion towards PIC. As previously mentioned, the academic literature supports the notion that police culture influences police officer decision-making—particularly how officers invoke their discretionary powers. As evidenced below, this culture of service—exacerbated by how MHU members measure their success and their engrained attitude of compassion—was emphasized throughout the interviews and ride-alongs in this particular case study.

The attitude of providing effective and compassionate service within the MHU was not only reported in interviews and throughout the course of the ride-alongs. This attitude shaped their responses to PIC. In other words, this internalization of an attitude of service—with a compassionate focus—affected how members of the MHU responded to PIC in the community. On one ride-along, the MHU responded to a call for service regarding a male teenager who claimed he was going to harm himself. When the MHU arrived at the residence, the mother of the client greeted both the police officer and the mental health professional with extreme hostility. She had no intention of interacting or cooperating with the MHU members. Regardless, the police officer and mental health professional were able to speak with the client and offer him
support—which he declined. This hostility towards the police did not result in a missed opportunity for the MHU to provide effective service to this particular client. Both the police officer and mental health professional remained committed to serving this individual, regardless of how they were being treated. Once the call was completed, the police officer and mental health professional were discussing the interaction and, although they were frustrated with how they were treated, they both acknowledged that they had responsibilities to fulfill regardless of how they are treated or perceived.

This further exemplifies their commitment to providing effective service rather than demanding compliance and adhering to strict criminal-enforcement techniques. The officer acknowledged that when police officers are greeted with such hostility and animosity, it is easy for them to invoke their discretion to avoid getting involved. Instead, however, this officer emphasized that the MHU serves a different purpose than traditional police-based responses to PIC. Focusing on serving individuals and doing so compassionately, he argued, is the cornerstone of this particular unit. One mental health professional made similar comments, suggesting the best calls for service are those where members of the MHU felt they made a significant difference to help PIC cope with their illness:

There was an individual—elderly lady in her 70s a couple of weeks ago and the sheriff was at her door to get her—she was going to be evicted that day. And this was the second time they were there to evict her and—nowhere to go. And I’m like she can’t go to a shelter system. You know? So I was able to get—there was a program through [shelter name] that works with the landlord—her husband had died and he had all the financial, everything in his name so she didn’t know
anything. The rent hadn’t been paid in 6 months after he passed away so I got her a worker that day, she was able to contact the landlord, I had an appointment booked the next day, the worker was going to come out—it was ideal. She was able to stay in her apartment.

This mental health professional acknowledges the importance of assisting those in crisis who may be unable to assist themselves. This excerpt also exemplifies the goal of the unit, which is to provide effective service to those in crisis. This mental health professional was able to connect the client to community services and keep them in their home—a case they identified as one of their most successful since joining the MHU. This further emphasizes the importance of compassionately serving those who experience mental illness or crisis in the community as opposed to exacerbating the criminalization of the mentally ill.

Finally, during one of the ride-alongs, the MHU was asked to respond to a woman who was showing signs of mental illness at a women’s shelter in the downtown core of the city. This woman had a history of violence and was experiencing a situational crisis after losing both financial and housing support from the government. The client was able to express her feelings and her situation articulately and the mental health professional provided the client with resources and support systems that would be available to her. By the end of the call, the MHU dedicated approximately one hour to this woman. Originally, the client was not respectful towards the officer given her previous interactions with the police. The client, however, was appreciative of the time the MHU took to help her cope with her circumstances and had sessions organized to speak with various counsellors and a social worker.
This response further reinforces the culture of service evident throughout the MHU. The police officer and mental health professional dedicated one hour to this client and were both committed to ensuring the client was well equipped with resources before they completed the call. The client was particularly hostile towards the police officer, claiming the police had given her a black eye a few weeks earlier. The police officer apologized for that interaction and reassured the client that the response from the MHU would be different. The goal of the MHU, the officer explained, was to help PIC throughout the community with resources and community support. This provides further evidence that the internalization of this attitude of service and compassion is reflected in the practical policing efforts of the MHU members. This attitude of service and compassion helped ensure this particular client received a high level of service, regardless of her previous history with the police. While much has been said about the culture of service within the MHU, there is evidence in this case study to suggest that this culture has the strength to trickle down to frontline patrol units.

Each officer and mental health professional in this study acknowledged the important role of uniformed patrol in responding to PIC. According to MHU members, frontline patrol is the first responding unit to the majority of calls for service. These officers are responsible for securing the scene and calling the appropriate speciality unit for assistance. Additionally, each MHU member emphasized the fact that they are not on patrol 24 hours a day, meaning the hours they are not on duty, frontline patrol is tasked with responding to all calls for service, including those related to PIC. There is an understanding within the MHU that this culture they have established must be transmitted to frontline patrol units to ensure PIC always receive effective service. One police officer explains that the position on the MHU is a 3-year placement, and once completed, the officer can be given another 3-year placement on the MHU or returned to
frontline patrol. For this officer, it is important to acquire as much information and education as possible from the experience of working with the MHU in order to bring that information back to patrol:

My goal would just be to learn from these mental health professionals. And this is a 3-year placement, but after that you gain the experience and learn a lot more about mental health and the different aspects of mental health. So to me, it would be to learn more and then for me I could bring that back to patrol when I come back and help.

This officer further discusses the importance of debriefing with frontline patrol units, suggesting the MHU has a lot of information and insight to share with members of frontline patrol units: “Now it’s a lot of questions that frontline will have for us: you didn’t take this person to hospital, why? So then it’s education too with our mental health professionals and patrol”. This shows a willingness to understand how to more effectively respond to PIC from the frontline patrol units’ perspective. This also demonstrates how a culture of service can penetrate different areas of the police organization. The culture within the MHU can permeate throughout the entire police organization—reflecting the organizational-level response to PIC. In other words, this culture of service may not be limited solely to the MHU. It is possible, for example, that through educating and informing frontline patrol units, this culture of service may spread throughout the organization rather than solely limiting itself to the specific MHU. As a senior police official suggests, members of the frontline patrol units are requesting the assistance of the MHU and are interested in understanding their response: “The frontline perspective is changing,
too in that they get these types of calls and they are actually requesting the MHU to respond. They see them as another tool on the tool belt to deal with persons in crisis”.

This can fundamentally alter the culture within the police organization more broadly—specifically relating to how the police respond to PIC. As I argue, we must allow for an emerging conceptualization of police culture that borrows from an overarching account of police culture (i.e., the pervasiveness of danger and camaraderie in policing) while acknowledging the opportunity for new cultural understandings to emerge (i.e., an emerging service based conceptualization of police culture). To better understand the impact of the MHU on the broader organizational culture, a more in-depth study would be required (i.e., interviewing frontline police officers, other members of the police organization, etc.). For now, however, this data shows the complexity and multi-layered nature of police culture. Each speciality unit within a police organization offers a unique opportunity to better understand their own specific culture within the broader police organization. In other words, we must acknowledge that speciality units allow for multiple cultural understandings to emerge within a singular police organization.
Conclusion

The deinstitutionalization movement in the 1950s and 1960s led to a substantial increase in contacts between people with mental illness and the police (Lurigio et al., 2008). Following the deinstitutionalization movement, Abramson (1972) famously referred to police interactions with PIC as the ‘criminalization of the mentally ill’. Even prior to this movement, the police had been tasked with responding to PIC in the community. Dorothy Cotton (2004) refers to police as “de facto mental health providers” given the fact that police officers are on the frontlines actively responding to PIC (135). Ineffective Canadian police responses to PIC (namely the aforementioned cases including Yatim, Dziekanski, and Boyd) were a major factor behind the movement to develop and implement specialized MHUs. These MHUs represent, in most instances, a formal partnership between mental health agencies (including local hospitals) and police organizations. These specialized MHUs also represent an opportunity for researchers to develop a more in-depth understanding of police culture. As previously mentioned, police culture refers to a distinct system of informal internal control within police organizations that guides police officers’ conduct through the identification and preservation of general attitudes/beliefs about the job (Chan, 1997; Goldsmith, 1990; McCarthy, 2013; Paoline, 2003).

Based on twelve semi-structured interviews and approximately 30 hours of direct observation with a Canadian MHU, I argue that there exists a multiplicity of cultures within a given police organization. First, I demonstrate the pervasiveness of both the perception of danger and the conception of camaraderie—two key characteristics in traditional accounts of police culture. In this regard, I argue that the perception of danger and the conception of camaraderie remain key elements of an overarching police culture—one applicable to both the organization and its members. Second, I argue that this MHU gives rise to an emerging service-based
conceptualization of police culture *within* this particular police organization. This conceptualization of police culture challenges traditional accounts that claim policing is inherently focused on crime-fighting responsibilities. Instead, this MHU represents a service-focused culture within this particular police organization. As more police organizations develop and implement specialized MHUs, we could experience a substantial shift in police culture.

The perception of danger in policing is reinforced through basic recruit training. A review of the basic recruit training material from the RCMP indicates that a total of 249 hours are dedicated to training regarding the prevention or management of dangerous situations while on patrol. This dominant theme throughout training instills a sense of ‘mission’ involved with policing—most notably effecting how police officers perceive their role in society. As discussed in chapter two, the police officers in this study reiterated on numerous occasions that their purpose is to ‘protect the public’ from danger. This perception is compounded by a number of different factors. Firstly, inaccurate or incomplete information exacerbates police officers’ perception of danger. The majority of the information police rely upon comes from the public and when that information is inaccurate or incomplete, police officers’ safety is jeopardized. Secondly, each officer in this study noted the unpredictability and volatility of PIC. In response, the police organization provided basic use of force training to all civilian mental health professionals. This emphasizes the perception of danger inherent not only in policing, but specifically in responding to PIC in the community. Finally, the media play a key role in determining police officers’ perception of danger. As noted previously, the media can exacerbate the perception of danger amongst police officers by focusing exclusively on their negative interactions with PIC. The data demonstrate that the perception of danger remains a key element of an overarching police culture.
The conception of camaraderie also remains a key element of an overarching police culture. The police officers and mental health professionals in this study referred to each other as ‘partners’, demonstrating the strength of this characteristic of police culture. Not only does this conception of partnership persevere amongst police officers in this study, but it also permeated throughout the MHU and became internalized by the civilian mental health professionals. Each MHU member also identified the importance of implicitly trusting their partner in order to ensure they remain safe while on duty (further exacerbating the perception of danger in policing). Furthermore, this camaraderie was evident throughout both the interviews and the ride-alongs, with one officer specifically noting the importance and prioritization of 10-78 calls (officer requires immediate assistance). Physically defending and assisting one another while on duty appears to be a given, however in this study, I find that the police officers and the mental health professionals also relied on each other for emotional support. The strength of the conception of camaraderie in policing is demonstrated through its ability to permeate throughout the MHU and become routinely internalized by civilian mental health professionals. Similar to the perception of danger, the conception of camaraderie represents another key element of an overarching police culture.

Finally, I argue that this MHU gives rise to an emerging service-based conceptualization of police culture within this particular police organization. This movement towards a service-based conceptualization of police culture started with the shift in language from police ‘force’ to police ‘service’. Each officer in this study identified this shift in language as a defining moment in Canadian policing. According to the respondents, this represented the modernization of the police and emphasized a new approach to policing (i.e., focusing on service rather than enforcement). As a result of the expanding mandate of the police, it is unwise to expect the
police to fulfill only one function (i.e., crime enforcement) (Goldstein, 1987; Manning, 1977). Instead, the police must recognize their changing environment and adapt to new expectations. In this study, I challenge assertions that the invocation of police discretion is inherently negative (Goldstein, 1960; Mastrofski, 2004; Miller, 2015; Tieger, 1971) by arguing that MHU officers invoke their discretion to provide a more effective and holistic response to PIC. This culture of service is reflected in practice through the officers’ invocation of discretion. Furthermore, the concern of having competing goals on the MHU (crime vs. health) was minimized as a result of each member’s commitment to provide a high level of service to PIC in the community.

The ways in which MHU members measure success also demonstrates the practical effects of this service-focused culture. Standard uniformed patrol units often measure success through the use of statistics (i.e., arrest numbers, citations issued, etc.), however the MHU measures success based on experiences. They are more concerned with whether the client received appropriate care and whether the families were satisfied with the response. This further amplifies their commitment to fostering a service-focused culture founded on their compassionate responses to PIC. As Eisenberger and colleagues (1990) note, employees who are more emotionally invested in their work produce greater outcomes for their organization. Each member is motivated to prevent the harms and consequences of mental illness and substance abuse, and actively seeks to make a difference in the lives of their clients. This emotional investment was evident throughout the course of the research with MHU members expressing the frustration experienced when a client refuses care, or the devastation of losing a client to suicide. It also motivates each MHU member to provide an effective response to the families of PIC—a positive consequence of this emotional investment. The data presented in this study
demonstrate that there is a service-based police culture emerging within this particular police organization as a result of the MHU.

The police are tasked with responding to PIC as a result of the reduction in government spending and the lack of available community services (Teplin, 2000). Addressing these structural issues in society will help ensure that persons with mental illness or substance abuse related disorders receive appropriate care from the appropriate institutions. Such individuals do not require a police response until they are considered ‘in crisis’. It would be beneficial, then, to address the issues that lead people with mental illness or substance abuse related disorders into crisis. Nonetheless, I believe this unit provides an effective and efficient service to PIC in the community. If the structural issues in society are not addressed, police organizations have the opportunity to develop, implement, and maintain a unit dedicating to providing empathetic service to PIC in the community.

The goal of this thesis was not to question the role of the police in society, but rather to better understand their cultural responses to PIC. To date, no study exists that examines the impact of a specialized MHU on police culture. I present a unique conceptualization of police culture that accomplishes two objectives. Firstly, my conceptualization of police culture acknowledges the pervasiveness of an overarching police culture characterized by both the potential for danger and the conception of camaraderie. Secondly, this conceptualization recognizes police culture’s fluidity and potential for change. I argue that there are a multitude of cultural understandings that can emerge within a given police organization. Future research can examine the culture that emanates from other speciality response units within police organizations (e.g., sex crimes units, robbery units, gang units, etc.). Comparative research
examining the culture of two or more units within one police organization can also be beneficial to better understand the cultural variation that can take place within a single police organization.

For practical and theoretical reasons, it is beneficial for researchers to understand the unique cultures of each speciality unit. By doing so, policies and procedures can be amended to develop, implement, and support a culture that effectively serves the specific responsibilities of each unit. This will allow for more nuanced and complex cultural images to emerge, and provides direction on how to amend certain aspects of policing. For example, the police organization in this study identified that responding to PIC was a weakness of the police. In response, they developed and implemented a specialized MHU—with its own unique culture—to respond to the complex needs of this vulnerable population. Developing more nuanced and complex cultural understandings within police organizations can allow the police to more effectively serve the citizenry. Since police culture plays such a key role in shaping officer behaviour, developing an understanding of the culture of each unit can identify and resolve problematic characteristics and develop and maintain beneficial characteristics. Hypothetically, strict-criminal enforcement could be part of the culture of units dedicated to investigating sexual offences against children, while community service initiatives could be part of the culture of community outreach units. Limiting our understanding of police culture to a monolithic set of standards that is arguably out-of-touch with today’s policing environment is irresponsible. By doing so, we limit our understanding of policing culture in such a complex policing environment. In contrast, acknowledging the fluidity of police culture provides a unique opportunity to build a more substantial and detailed understanding of both police culture and police behaviour.
Appendix A: Methodology Continued

As previously stated, the goal of this research was to examine the impact of a MHU on police culture. At the time of the research, this particular MHU represented the only unit of its kind in Canada. As such, this study is considered an extreme case study (Flyvbjerg, 2006). After establishing contact with the Chief of Police, it took approximately 10 months to negotiate access with the police organization and to obtain clearance from two separate research ethics boards (REB). The Carleton University REB provided clearance in April of 2015, while the REB for the hospital involved in this formal MHU partnership provided clearance in January of 2016. In order to complete the interviews and participate in ride-alongs with the mental health professionals, I required additional REB clearance from the hospital. I conducted twelve in-depth, semi-structured interviews and participated in approximately 30 hours of direct observation with this MHU. Each member of the MHU was interviewed (1 staff Sergeant, 4 police officers, 4 mental health professionals). Interviews were also conducted with a senior police official, a use of force instructor, and the civilian manager of the mental health professionals. Of all the participants in the study eight identified as male, and four identified as female.

Interviews are the most common method of data collection in case study research (Beitin, 2012; Belgrave & Charmaz, 2012; Roulston, 2012; Yin, 1998). Furthermore, individual interviews (as opposed to focus group style interviews) are the most commonly used data collection strategy in qualitative research since interviewees are less likely to withhold information due to the presence of another member, and because they are easier to organize and coordinate (Beitin, 2012). Interviews, according to Yin (1998), must only be understood as ‘verbal reports’—the information provided in interviews ought to be corroborated by other types
of evidence before the information can be accepted as valid. This argument is further developed by Warren (2002) who suggests ethnographic methods can be used to ‘fill in the holes’ in interviews (i.e., comparing what was said during interviews and what transpires in practice). Warren (2002) further demonstrates the value of interviews by demonstrating their epistemological value as a constructionist means of knowledge production (i.e., respondents are the experts responding to specific questions asked by the interviewer). The goal of interviews is to understand the meaning of the respondents’ experiences and life worlds and to derive information during a ‘guided speech event’ (Warren, 2002).

In-depth interviews are similar to conversations individuals have with friends except for the fact that the interviewer intends to use the information gathered from the conversation for another purpose (e.g., in an academic publication) (Johnson & Rowlands, 2012). These types of interviews require social and interpersonal interaction, personal commitment, and a certain level of intimacy between interviewer and interviewee (Crabtree & DiCicco-Bloom, 2006; Keegan, Legard & Ward, 2003; Johnson & Rowlands, 2012). Information derived from in-depth interviews, according to Johnson and Rowlands (2012), usually revolves around the individual self, lived experiences, values and decisions, occupational ideology, or cultural knowledge. This was the goal of the interviews in this case study. My aim was to develop a rich understanding of their culture and in-depth interviews offered the most appropriate option to do so (Crabtree & DiCicco-Bloom, 2006; Keegan et al., 2003). As Johnson and Rowlands (2012) indicate, these types of interviews are most appropriate for descriptive/exploratory type research that is trying to analyze accounts of members in some social setting:
If one is interested in questions of greater depth, where the knowledge sought is often taken for granted and not readily articulated by most members, where the research question involves highly conflicted emotions, and where different individuals/groups involved in the same line of activity have complicated, multiple perspectives on some phenomenon, then in-depth interviewing is likely the best approach (Johnson & Rowlands, 2012, pp. 101).

This project used semi-structured interviews, which ask major questions and acknowledge the use of probes in order to obtain a more comprehensive response (Warren, 2002). Furthermore, this allowed me to both alter the sequence of questions but also to adapt to the level of comprehension and articulacy of individual interviewees (Fielding & Thomas, 2001). I created interview guides for each group of interviewees: the MHU police officers, the MHU mental health professionals, a senior police official, a use of force instructor, and a civilian mental health professional. Each guide had a list of between 20-35 questions and each interview was approximately one-hour in length. There was a very steep learning curve during the initial interviews due to the amount of new information (Johnson & Rowlands, 2012). Later interviews in this study became more focused on specific probes and verification as questions were formed based on information gained in earlier interviews (Crabtree & DiCicco-Bloom, 2006; Johnson & Rowlands, 2012). Furthermore, by completing my literature review chapter prior to completing the research, I was prepared to follow the interviewee’s information/knowledge and was able to deviate from the prepared interview guide and ‘go with the flow’ of the interview (Britten, 1995; Crabtree & DiCicco-Bloom, 2006; Keegan et al., 2003; Johnson & Rowlands, 2012).
In addition to the use of interviews, this study also utilized direct observation to provide a more detailed examination of the MHUs cultural response to PIC. Direct observation involves having the researcher conduct field visits to gain a deeper understanding of a given phenomenon (Denzin, 2012; Yin, 1998). As previously stated, the use of direct observation can be used to ‘fill in the holes’ from interviews (Warren, 2002; Yin, 1998). Direct observation allows the researcher to examine what transpires in practice, versus what was verbally reported in interviews (Warren, 2002). In support of Warren (2002) and Yin (1998), Denzin (2012) suggests triangulation (the use of multiple methodologies) “reflects an attempt to secure an in-depth understanding of the phenomenon in question” (Denzin, 2012, pp. 82). For this research project, in addition to the twelve in-depth, semi-structured interviews, I participated in ride-alongs with the MHU to add “rigor, breadth complexity, richness, and depth” to the research question (Denzin, 2012, pp. 82).

Each interview was transcribed and detailed footnotes were recorded throughout the course of the research. The interview transcripts resulted in 182 pages of data and the field notes resulted in 14 pages of data. The data was entered into QSR NVivo and was thematically analyzed. Using inductive reasoning, I was able to continuously edit my codebook. Inductive reasoning allows phenomena to be understood “as events unfold and knowledge accrues” (Charmaz, 2008, pp. 155). I originally started the data analysis phase with 41 codes, however by the time the data analysis was complete, my codebook had reached 56 codes. For this project, I used grounded theory, which is the most common method of analysis for qualitative data (Belgrave & Charmaz, 2012). Originally founded by Barney Glaser and Anslem Strauss, grounded theory is an inductive, comparative, iterative, and interactive method of data analysis where a researcher begins with an area of interest and forms preliminary interview questions
about that area (Belgrave & Charmaz, 2012). Grounded theorists summarize their initial observations into categories and then test these categories in the research setting through more observations (Schutt, 2011).

After transcribing each interview and recording ride-along field notes, each line was coded using QSR NVivo. As previously stated, I developed a preliminary set of 41 codes. By the end of the data analysis I had reached a total of 56 codes. I used both primary and secondary-cycle coding. According to Tracy (2013), primary cycle coding is used to decipher the essence of the data. Secondary-cycle coding, however, takes place after primary cycle coding and is used to organize the data more effectively to develop more specific codes (Tracy, 2013). For this thesis, I selected the categories that represented the largest chunks of data and began reviewing the coding reports. Since this data set was so large, it was necessary to make the difficult decision of choosing which data to present in this study. This resulted in a substantial amount of data being left aside for future projects.

Finally, it is important to address the generalizability of the results of this study. As previously mentioned, I do not wish to make any statistical inferences. Instead, the results of this project can be generalized to other cases that represent similar theoretical conditions (Yin, 1998). In other words, the results of this project can be generalized to other police organizations with both similar demographics and similar specialized MHUs. There is an existing body of methodological literature that criticizes claims of generalization in social science research. Flyvbjerg (2006), for example, suggests generalization is overrated in social science by arguing that knowledge production accrues in a given field or society regardless of a studies’ generalizability. Nonetheless, I used two forms of data collection (i.e., interviews and direct observation) to render my claims more valid (Denzin, 2012; Flick, 2004). As Denzin (2012)
argues, triangulation (the use of multiple methodologies) “reflects an attempt to secure an in-depth understanding of the phenomena in question” (82).
References


