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**RESEARCH BRIEFING 4:
Police Conceptions of Mental Illness:
Labels, Causes, Dangerousness and Social Distance**

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Research Briefing 4

Police Conceptions of Mental Illness: Labels, Causes, Dangerousness, and Social Distance

Objectives: Movement of people with serious mental illness from hospitals to the community has resulted in an increase in interactions between people with mental illness and the criminal justice system, including police officers and the courts. This study used longitudinal survey data of police officers from a mid-western city prior to and at least one year after Crisis Intervention Team (CIT) training to characterize officers' conceptions of mental illness and its perceived causes, their perception of the dangerousness of people with mental illness, and their desired social distance from (or level of comfort with) someone with a mental illness.

Methods: Police officers filled out a questionnaire that used a vignette describing a male subject with symptoms of schizophrenia. Social distance was measured using a scale composed of six items measuring how willing the respondent would be to

- move next door to the subject of the vignette
- make friends with the subject
- spend an evening socializing with the subject
- have the subject start working closely with the officer on a job
- have a group home for people like the subject opened in the officer's neighborhood, and
- have the subject marry into the officer's family.

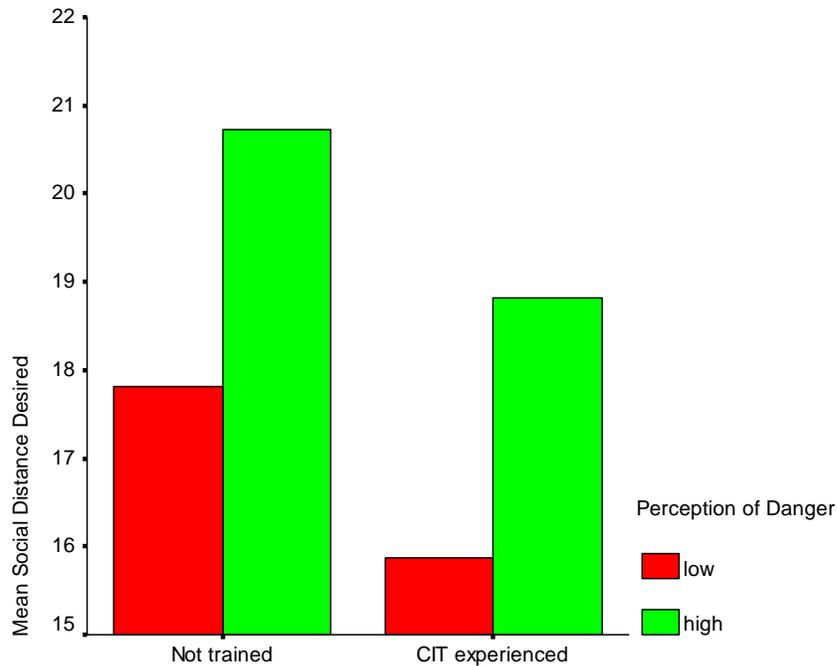
Officers' ideas about the causes for the subject's behavior were assessed by six items (e.g., the subject's situation was caused by a chemical imbalance, bad character, stressful circumstances). In addition, the officers were asked whether they thought the subject was experiencing a physical illness, a mental illness, and/or a nervous disorder. Perception of dangerousness was assessed using a scale composed of four items asking the officers' opinions on how dangerous or unpredictable the vignette subject was.

Results: Results indicated that the desire for social distance increased for both trained CIT and non-CIT trained officers when officers believed the subject was dangerous or when officers believed that his problems were the result of a physical illness. Regardless of whether the perception of dangerousness was low or high, CIT trained officers desired less social distance from those perceived as having a mental illness in comparison to non-CIT trained officers. The indications were that the officers' experiences shaped their attitudes, ultimately demonstrating the effects of the CIT training.

Figure 1 depicts how training affects desire for social distance, while taking into account the perception of dangerousness. The first observation was that the desire for social distance increased with an increased perception of dangerousness. The next observation was that non-CIT trained officers desired more social distance than CIT trained officers, regardless of the perception of dangerousness.

Research Briefing 4 continued

Figure 1. Desire for social distance and perception of dangerousness by training



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