# Shared Management of Police-Mental Health Collaborations (PMHCs): The Benefits of Partnering with People with Mental Illness, Families and Advocates

## Introduction: Shared Program Management

Police-Mental Health Collaboration programs are best managed through a collaborative partnership between law enforcement agencies, mental health agencies and mental health advocacy organizations representing people with mental illness and their families. Advocacy groups include local chapters of Mental Health America, NAMI, and mental health peer organizations in your community. People with mental illness, their families and advocates should be equal partners in the collaborative effort, participating at each step along the way with an equal voice.

For most communities, collaboration occurs through an interagency workgroup comprised of representatives from each partner agency or group. In order to share management with people living with mental illness and family members, it’s important that these groups are included in the PHMC workgroup from the outset of your program.

## Building Community Trust in the Program

One benefit of sharing management of your PMHC with people living with mental illness, their families and advocates is to provide an avenue for building community trust.

### Hearing Feedback from Individuals with Mental Illness and Family Members

The first step to building trust with the community is to hear the perspectives of people with lived experience and take these perspectives into account when considering program design and management. People with mental illness and their families often have extensive experience seeking out community mental health services, interacting with law enforcement during a crisis situation, and interacting with mental health crisis systems. These experiences are sometimes helpful and supportive, but can also be frustrating and traumatic. Both types of experiences are important to consider.

Advocacy organizations can serve as a conduit for hearing feedback from people with mental illness, family members and community members about their experiences with the PMHC program, both positive and negative. One important aspect of ongoing program management is creating a regular process for receiving this feedback and using it for program improvement. When the interagency taskforce does this, it helps to build community trust.

It can be challenging for all partners to discuss negative feedback, such as when a PMHC has not achieved the outcomes it strived for, including linking people to effective services or improving safety. Law enforcement and mental health service providers can also be open about the challenges they experience together in responding to crisis situations. When all partners listen with respect, everyone develops greater understanding and trust. They may also be able to develop strategies to improve outcomes in the future.

### Reassuring the Broader Community

Since many individuals living with mental illness and their family members have experienced negative events during a mental health crisis in the past, partnership with a trusted mental health advocacy organization will reassure many individuals and family members that your program is focused on safety and diversion from jail where possible.

### Increasing Awareness of the PMHC Program

For long-term success, community members must be aware of the PMHC program and how callers to 911 can access it. The more people who use the program when they need it, and have positive interactions with police, the more community support and trust your program can build.

Mental health advocacy organizations can educate people with mental illness, their families and community members about how to prepare for mental health crisis situations and how best to request a mental health team or specially-trained officers, if needed. They can share information such as:

* Which mental health supports are available to them when they are not in crisis—such as peer and family psychoeducation, support groups, and warm lines (telephone lines staffed by trained mental health peers to support a person in distress);
* When to call emergency numbers, and which numbers are appropriate during different crises;
* When they should ask for a mental health team or specially-trained officers; and
* What information to share with emergency communications.

Ultimately, when individuals, family members and community members are educated about the PMHC, it sets up the officers to have a more effective and safe response. Officers will have more information when they arrive on scene, and will be interacting with people who are more likely to know what to expect during a crisis.

## Sustaining the PMHC

Sharing management of your PMHC with people living with mental illness, families and mental health advocates also provides many opportunities to improve the sustainability of your program.

### Identifying Champions

Many PMHCs find that a prominent community member plays an important role in their program by helping gain public support, bring together partners, resolve disagreements, or gain access to resources. This individual might be an elected official, a judge, law enforcement executive or even a local celebrity.

Mental health advocates often have insight into which prominent community members have a personal connection or professional interest in mental health issues. Advocates can play an important role in persuading these individuals to support your program.

### Identifying Gaps in Services and Quality of Services

Just as people with mental illness, family members and mental health advocates have a unique perspective on mental health crisis situations, they also have unique perspectives on the mental health service system. Specifically, they can help identify gaps or challenges that make it difficult for people to access the crisis response system or that compromise the quality of services. For example, mental health advocates often point out the challenges associated with lack of transportation: a clinic with high-quality crisis services may be located far from public transportation, making it difficult for individuals to travel to the clinic during a crisis, and increasing the chances of a call to 911 or an encounter with law enforcement.

Similarly, peer support specialists (individuals in recovery from mental illness who are trained to provide support to others) can provide immediate feedback about the impact of new policies and procedures on the clients with whom they interact.

Advocating for Funding and Improved Mental Health Services

Partners involved in your PMHC can access a wider array of funding sources when people living with mental illness, family members and advocates are at the table. For example, mental health advocacy organizations may be able to connect with funders who do not typically support mental health or law enforcement agencies, such as individual donors, foundations, corporations, and other non-profit organizations. In addition, many government funders seek out programs that partner with community organizations and stakeholders, improving your program’s chances of receiving funding through a government agency or grant.

When you assess your community’s mental health service needs and the goals of your PMHC, partners in the program may agree that further support is needed from local or state elected officials. Mental health advocates may be particularly helpful in advocating for specific mental health services needed to improve your crisis response system. For example, mental health advocates can:

* Educate city and county officials about your PMHC and the need for a line item in the budget to support specific law enforcement or mental health service capacity,
* Educate state legislators about the need to change a specific statute,
* Lobby for the creation of a new mental health service or increase funding for existing services, or
* Lobby for improved accountability or data collection.

Whichever strategy you choose to employ, it is best for all partners to be in agreement about the community’s needs and priorities.