



# **THE POLICE ORGANIZATIONS EDUCATION, KNOWLEDGE AND EXPERIENCES OF MENTAL ILLNESS**

## A QUALITATIVE INTERVIEW STUDY

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This study illustrates the experiences and knowledge on mental illness within the police organization. The main queries are how the police education prepare the police for encounters with mentally ill individuals, what police officers experience and what is done within the department in relation to strengthen knowledge and competence on mental illness. Nine interviews were conducted with police students, police officers and a business developer and the findings are that the overall perception of the police programme is that it provides future police officers with a basic understanding about mental illness. However, experienced police officers feel that they need more knowledge about mental illness to feel more secure and comfortable in these meetings. Furthermore, the police department works with the governmental assignation by preparing study material for different groups to strengthen their knowledge and competence on mental illness. The aim is to provide the police with knowledge about legal frames, recognition of mental states/disorders, how to respond to mentally ill individuals and what agencies are available to assist in the community. The limitation of the study was the relatively small sample considering that data was collected from different parts of the organization. However, this study has demonstrated an overview of the whole organization and their work connected to mental illness. The conclusion of this study is that the police department in Sweden has realized the knowledge gap and developed an educational plan to resolve the missing puzzle pieces.

*Keywords:* Competence, Development, Education, Experience, Mental illness, Police organization.

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# INTRODUCTION

The relationship between mental illness and crime is something that has got more attention during the past years (Ogloff et al., 2013). Studies have shown that individuals suffering from mental illness are highly overrepresented in prison populations (Brugha et al., 2005; Ogloff & Tye, 2007), and those suffering from severe mental illness are more prone to act violently than others (Douglas, Guy & Hart, 2009). This means that individuals suffering from mental illness are more likely to get into situations that result in involvement by the police (Patch & Arrigo, 1999).

Individuals suffering from severe mental illness in Sweden is estimated to be around 4 % of the total population (Levander, 2017). Due to some changes in the society between 1970 to 1980, when the mental institutions got closed and hospital beds for severe mentally ill individuals got limited, these individuals were no longer living in institutions (Green, 1997), but live at home with their families or at support accommodations and are a part of the society (Levander, 2017). Levander also states that these individuals usually are perceived as odd and due to that tend to isolate themselves from the rest of the population, but also engage in criminal activities to a higher extent. Meetings with individuals suffering from mental illness are a big part of the police daily work tasks and the amount of interaction with this group has increased over the years (Polismyndigheten, 2018).

A report from the Swedish police union (2009) has shown that 81 % of police officers that responded to their survey have stated that they regularly get in contact with mentally ill individuals. The majority of the respondents also answered that they do not feel fully secure in these meeting (Ibid.). Individuals suffering from mental illness are more likely to get harmed or injured during encounters with the police. It is important for the police to have knowledge and understanding of different factors that are highly connected to meetings with individuals suffering from mental illness to reduce the risk of people getting hurt (Cordner, 2010a). Lacking knowledge and understanding of mental illness among police officers increases the risk of them approaching the individuals based on prejudice and stereotypes. This in turn increase the risk of violence force use from the police, but also for the mentally ill individual to act and react negative to the police (Cordner, 2010b).

## Aim

The aim of this study was to illustrate the police organizations experiences and knowledge on mental illness.

## Research questions

Following questions have been studied in this thesis:

1. In what ways have the police education prepared police students for future meetings with individuals suffering from severe mental illness?
2. What experiences do police officers have from meetings with severe mentally ill individuals?
3. What is done within the police to increase knowledge and competence about mental illness?

## **BACKGROUND**

Green (1997) mention the effect of the changes during the 1970's and 1980's in the societies all around Europe. Institutions filled with individuals suffering from mental illness and other mental disabilities got closed and these individuals were placed out in the society. Green continues with stating that the long placements within institutions lead to an almost non existing knowledge among the patients about how to act and interact with people outside the institution nor were they taught how to take care of themselves. Due to the limitation of available places at mental hospitals for those with chronic and severe mental illness, they now had to live in the society and cope as good as possible with their limited assets of social skills. This could be one explanation to why police officers today, more often get in contact with mentally ill individuals in comparison to before the deinstitutionalization (Green, 1997; Lamb & Weinberger, 1998).

### **Mental illness and police contact**

Severe mental illness and crime tendencies are strongly intertwined (Brennan, Mednick & Hodgins, 2000; Penrose, 1939). A study by Moffitt (1993) has shown that only a few individuals are responsible for most of the crimes that are being committed, so called "life-course persistent offenders". Levander (2017) states that to be able to repeatedly commit crimes, the offender has to have a specific way of thinking, abnormal way of feeling and acting in a way that is going against the societal norms without being affected by the responses of the community. Levander continues by stating that these individuals often suffer from several psychiatric diagnoses. It is however important to take in mind that the police are not only interacting with mentally ill individuals when a crime has been committed (Coleman & Cotton, 2014), they are most often involved in order-related issues (Wells & Schafer, 2006). Urgent situations involving individuals suffering from severe mental illness, usually requires police involvement. The police are most often the first or even only agency that is contacted in these cases (Lamb, Shaner, Elliott, DeCuir & Foltz, 1995; McNiel, Hatcher, Zeiner, Wolfe & Myers, 1991) and are supposed to determine whether the person is in need of healthcare or need to be arrested due to criminal activity (Lamb, Weinberger & Gross, 2004). Even though police officers are those who are called out to situations involving interaction with severe mental ill individuals, they do not possess extensive knowledge nor training on how to deal with this group of individuals (Husted, Charter & Perrou, 1995).

Matthews (1970) enlightens the conflict that police officers face when interacting with severe mentally ill individuals. The question whether one should approach the individual from a legal perspective or a medical one is often present among police officers in these meetings. Menzies (1987) talks about the importance of the level of knowledge among the police officers about the specific mentally ill individual they will meet and its meaning for how they act and interact with the person in place. Hails and Borum (2003) write that even though police officers frequently are called to respond to different situations involving individuals with mental illness and the responsibility police departments have to train and educate their co-workers, the police officers that are interacting with this group of people are not offered proper training. With regards to the amount or frequency of interaction with mentally ill individuals the training provided is not appearing to be substantial (Hails & Borum, 2003).

A study by Jones and Mason (2002) has showed that the police way of acting and their attitudes are crucial for whether the outcome of a meeting will be positive or not. If the mentally ill individual has the prejudice that the meeting with the police force will be negative and the police officers approach with a negative attitude, this will lead to the development of

more negative feelings of the mentally ill individual who then will act conflicting to what the police is aiming for (Jones & Mason, 2002).

### **Police in Sweden**

The role of the police in Sweden is according to the Swedish police law (SFS 1984:387) to promote justice and security within the community. Their work should aim to preserve order and protect the public (SFS 1984:387).

#### *Police education in Sweden*

The police education in Sweden is a 2,5 years long program, including a six months long trainee service (Polismyndigheten, 2018). The education plan (Polismyndigheten, 2018) states that the aim of the education program is to prepare the police students to be able to implement the daily tasks of police officers, learn about the Swedish laws, ethics and other important components regarding good policing. A previous report from the police union (2009) has shown that police officers lack knowledge about mental illness and how to act in meetings with these individuals. The report also enlightens the need of more education about mental illness but still there has not been any changes in the police education regarding this subject. Out of all the courses within the police education only one course is covering mental ill-health (Linnéuniversitetet, 2018; Umeå Universitet, 2018).

A report from Rask, Kronkvist and Åberg (2006) has shown that to be able to approach the group, severe mentally ill individuals, in a good way it takes for the police officers to feel self-confident, secure and have experience similar to this from before. This report also showed that those students that fulfilled the task, interacting with this group of individuals with good results usually had a straight and calm way of communicating with the mentally ill person.

#### *Meetings with severe mentally ill citizens*

It is not unusual that police officers in Sweden get in contact with individuals suffering from severe mental illness in their daily work (Polisförbundet, 2009; Rask et al., 2006). The report from the Swedish police union (2009) showed that 81 % of their police respondents are regularly or now and then in contact with mentally ill individuals. Out of all respondents 12 % of police officers have stated that they never feel secure in meetings with individuals suffering from mental illness, and only 5 % of the respondents' stated that they feel secure at all times.

The meetings between police officers and severe mentally ill individuals is often occurring at tense situations and in an environment that is creating feelings of insecurity among the police (Rask et al., 2006). Rask and colleagues continues to present that meetings with severe mentally ill individuals for experienced police officer are much easier than for those who lack this experience. However, they state that every meeting is unique and the only similar thing between them is that a severe mentally ill individual is involved. It takes some pre-knowledge or experience about mental illness to be able to handle these situations in a good way and with a positive result (Rask et al., 2006).

### **Definition of problem**

A report from Department of Justice (2017) showed that the police department has observed that when police officers meet mentally ill individuals the risk of use of violence was higher than in meetings with mentally stable individuals, in worst cases it ends with death. This has lead to governmental attention on the police department and an assignation to increase knowledge and competence on mental illness was sent out to the police. The police put

together a developmental team to evaluate the need, what parts of the organization to prioritize and how to structure the education (Department of Justice/Justitiedepartementet, 2017). The extent police officers interact with mentally ill individuals is known and it is also known that the majority of police officers feel insecure to some level when interacting with this group of people (Polisförbundet, 2009; Rask et al., 2009). Despite this, there are not many studies conducted in Sweden about how police officers are prepared for interacting and handling this group of people, what experiences they have or what is done within the police department to improve knowledge and competence on mental illness among their co-workers.

## **METHOD**

The current thesis has focused on knowledge about mental illness within the police organization. This by illustrating police officers experience of meeting individuals suffering from severe mental illness, how the police education is structured to prepare future police officers for meetings with this group of individuals and what is done within the police department to increase knowledge and competence in this area. The main point of this thesis is to describe personal experiences and perceptions, therefore a qualitative method has been used. Own experiences and stories are captured best by using a qualitative method (Bryman, 2016; Hammarberg, Kirkman & de Lacey, 2016).

To establish contact with involved informants two different methods were used. To get in contact with potential informants for the police student interviews, an e-mail was sent to one of the head of the police education including the aim of the thesis and a request for approval to collect data from their students. When consent for interviewing student of the responsible university was received a short description of the thesis was sent to the head of the education who then passed the information to students in semester four on the police education. The students that wanted to participate then contacted the author of this thesis to schedule a suitable time and place for the interview.

The contact with police officers was established with the help of a PhD student at Malmö University that was used as the main intermediary between the author and the police department. Information about the current study was sent to the PhD student who then forwarded the information to the head at a police department. When consent was received and police officers agreed to participate an interview was booked. The interview with the police officer in charge for the government assignment was booked by personal contact with him made by the author of this thesis.

Before the interview started each participant got information in oral- and written form about the aim, how the data will be used and information about the possibility to withdraw participation afterwards. They were also asked to sign a consent form where they sign that they have received information and agree for the interview to be recorded.

### **Participants**

The participants in the current study were police students, police officers of external service and one business developer of the police department, responsible for the implementation of the governmental assignment.

The inclusion criterion for student participation in this thesis study was that the informants currently are students at the police education and have finished at least three terms of the program. This criterion was included due to the fact that the course on mental illness is not given until the third term of the education (Linnéuniversitet, 2018; Umeå universitet, 2018). The students of the last term were out doing their aspirant training and reaching out to them was not feasible and therefore they also got excluded from this study. The inclusion criteria for police officers was that they should be police officers of external service. This due to the fact that this group of police officers are those that are sent out on calls and have the first personal contact with individuals that are in need of police service.

After the outreach and information about the study three police student agreed to take part as informants and participated in interviews that form the basis of one part of this thesis result. Additional to these interviews five police officers of external services were interviewed, and also the business developer responsible for the implementation of governmental assignation. In total nine interviews were conducted and used to form the result presented later in this thesis.

### **Data collection method**

The data was collected by semi-structured interviews. This method enables for the author to shape the interview to get the information needed (Bryman, 2016). The semi-structured interviews are best to use when a specific topic is to be investigated (Hammarberg et al., 2016). As Bryman explains how a semi-structured interview is proceeded, an interview guide was created, including questions and topics that the interviews aimed to cover to enable answers related to the aim and research questions stated in this thesis. This structure enables for the the interviewer to add questions as the interview was going on and be sure that all necessary information was gathered during the interviews.

The interviews were performed both face-to-face and over the telephone, based on the what the informants felt most comfortable with. The interviews were recorded with a recorder after the informants gave their consent. The interviewer asked a question and waited for a respond and then the conversation developed. The interviews were between 20 to 40 minutes' long and the time was dependent on how much the informants had to say based on their own experiences. When the interviewer went through all the questions the informants were asked if they had anything more to add in relation to the topic and their experiences and afterwards the recorder was turned off and the interview was over.

### **Data analysis**

Based on the material collected, the data analysis method used in this thesis was an inductive thematic analysis. This means that the themes are created based on the data received from the interviews (Gray, 2014). This was proceeded as stated by Creswell and Poth (2018) by going through different stages and processes to produce a result that answers to the aim of this thesis. A thematic analysis is made by using six steps: first the author has to become familiar with the data, generate initial codes, search for possible themes, review the themes, defining and naming them and last produce the final result (Braun & Clarke, 2006).

To become familiar with the data, the author transcribed the interviews, carefully read through the material several times and highlighted parts of the transcript that was of importance for the current study (Creswell & Poth, 2018). Next step in the analysis was to go through the content of the transcribed material and create categories which were used to identify patterns in the text produced based on the transcribed interviews. When identifying

patterns and looking over the categories themes could be created which captures the overall content and answer an important part of the research questions (Gray, 2014). The last step was to develop the categories and themes to more elaborated descriptions and concepts to enable an understanding of the content in the interviews.

*Table 1. Themes and codes as a result from the analysis*

<b>Themes</b>	<b>Codes and categories</b>
Education	Content Structure Preparation Further training
Meetings	Experience Missing pieces
Emotions	Insecurity Lack of control Disappointment
Development	Knowledge Competence Time

## **Ethics**

Ethical considerations are important in a research study and it is important that the person conducting a study reflects about whether ones' study is ethical to conduct (Bryman, 2016). As stated by the Swedish Research Council (2017) researchers have to find a balance between different interest that all are legitimate. New research and knowledge is valuable in many different ways and could contribute to developments in the society. However, it is important for the researcher to constantly make ethical considerations as the study evolve such as deliberate the potential risk of harm in relation to the gains of the results of the research (ibid.).

### *Ethical considerations in current study*

No ethical approval was needed for the conduct of this study, due to the fact that no personal nor sensitive information was gathered and do not include any points that requires an approval (Malmö University, n.d.). The author of the current thesis took the following ethical principals into consideration: information requirement, consent claim, confidentiality and useful claim (Bryman, 2016; CODEX, 2018).

All information was stored in a safe place and only the author of this thesis had access to the recorded material. All participants received written and oral information about the study and the aim of conducting this study, how the collected material will be used and what will happen with the material when the study has been examined and graded. They were also informed that participation was voluntary and the possibility to withdraw participation was available at any point. Due to the fact that the author met with some of the informants, had access to their phone numbers and knew their names, they were not absolutely anonymous. However, confidentiality was taken into consideration and names where not used in the thesis nor in the transcribed interviews and the information presented could not be connected to any specific informant (CODEX, 2018).

### *Ethical motivation for current study*

As presented and stated above, police officers are daily interacting with mentally ill individuals and the majority of police officers have stated that they are lacking knowledge about and on how to deal with this group of people (Polisförbundet, 2009). By not conducting this thesis and give an insight of police officers' experiences and perceived knowledge about mental ill-health and severe mental illness could mean that we put both the police and the mentally ill individuals at risk (Cordner, 2010b).

## **RESULTS**

The current thesis has focused on different parts of the police organization such as education, work experience and aimed developments about knowledge on mental illness. The results are divided into four themes, presented in table 1. The first part of the result covers the police education and training on mental illness from both police student and police officers' perspective. The police experience of meetings with severe mentally ill individuals is presented in the second part of the result, emotions in relation to these meetings are the basis of the third theme below and last part is about how the police department work to fulfil the governmental assignation.

### **Education**

All informants stated that they feel that the course about mental illness given during the police education was good. The police students mention that the *content* was well thought out and both basic knowledge about different states of mental illness and legal aspects connected to encounter with this group were discussed and involved.

*"We were thought about the most common mental disorders, well, most common for police of outer service to meet...The course covered both the behavioural and legal."* (Police student 1).

Among the police students the main difference of whether they felt that the education they received about mental illness was good or not, was *prior experience*. The student that had experience of meetings with individuals suffering from mental illness did not think that the course was enough to prepare them for encounter with this group of individuals.

*"... I think it's impossible to read to things... you can receive theoretical knowledge, but I would never say that reading any book could prepare me for meeting with a hysterical woman or a woman who just killed her husband after years of assault... no matter how good actors you hire"* (Police student 2).

Even in the police interviews prior experience, before entering the police education, was mentioned and stated to have an impact on how they perceived the amount of education on mental illness received from the police education but also their first meetings with severe mentally ill individuals.

When the police students and police officers where asked how the police education have prepared them for meetings with individuals suffering from severe mental illness the responses differed to some extent. There were some disagreements whether the amount of knowledge received from the police programme was enough for the police and the students to know how to act and react in situations involving mentally ill individuals.

*“I read about this... about mental illness for about six to seven years ago. The education I received, I think it was more than enough”* (Police 4).

*“I don’t think it’s enough... It’s really good that there is an education whatsoever in this area, but you have to work with it in practice...”* (Police 1).

The students all mentioned the *structure* of the course. They received both theoretical and practical knowledge. The beginning of the course consisted of theoretical knowledge and clinical examples of different states of mental illness and how they are expressed. When they finished the theoretical part their knowledge was tested in a practical exercise where they entered in a situation where a person acted to be in a state of mental illness and the police students had to solve the situation.

*“Just like I said, we learned different ways, or we got different keys to respond to these persons in the best way... like for example a manic person... first of all we learned to identify a person like that very quick, we were learned to always keep calm and focus on what we are here to do”* (Police student 1).

*“We had an exercise right before we finished this course... we had to talk to a person with borderline and that was really tough. It was good to try with these persons who really knew their thing, before you get out, mean get out in reality”* (Police student 3).

A consistent respond from the police was the lack of *further training* on mental illness after the finished police education. Four of the police officers’ stated in their interview that there is a need of further training on mental illness within the police organization. They all feel that they have become better to handle situations involving mentally ill individuals, but that is not based on further education, but on personal experiences. When asked how the need of further education on mental illness looks within the police, one respondent answered:

*“Well, there is, there is a need absolutely. I don’t know how it should be done, to like get as much knowledge as possible in a short time... but there is a need absolutely... especially we who work on the outside”* (Police 2).

One police officers felt that they have enough knowledge to be able to carry out their mission in a safe way and education on mental illness should not be prioritized. There are other areas that should be higher prioritized.

*“But I, I would say... overall we have enough, we have a sufficient level of knowledge on this and there are many other subjects that, well, should be higher prioritized than this...”* (Police, 4).

Some of the police officers stated in what ways they would like to expand their knowledge and what moments they feel the need of further training. One of the most common situations mentioned was when they meet a suicidal individual. Four of the police officers mention situations involving interaction with individuals that want to die and the struggle they face in these meetings.

*“We often go on suicide alarms... people who try to kill themselves, and sometimes succeed... so we have relatively little education, if even any on how to handle these... these human beings”* (Police 1).

## **Meetings**

Police officers’ perception on how often they get in contact with individuals suffering from severe mental illness differed to some extent. They all stated that the amount of interaction with the severe mentally ill was all dependent on what department within the police you work for. Those who work with interventions and are called out on emergency calls get in contact with the group more often than departments that target a specific crime type. The perceived range on meeting with severe mentally ill individuals ranged from once a month to several times each week. They all stated that the amount is shifting and they meet individuals that are mentally ill a lot, but not to the extent that one could call their state to be severe.

*“I no longer work with interventions... I get in contact with these people (severe mentally ill, authors comment), I still do, but not as often.”* (Police 4).

*“It depends on which... which part or what work task you have within the police. Even if it is an outer service position, but there are those who work in the intervention section and they meet this much more often... If you work with targeting something special, a specific crime type well then you might not get in contact with it as often as the interventional police...”* (Police 3).

The biggest difference in *experience* of police officers in meetings with individuals suffering from severe mental illness through their carriers was that the longer they have worked the more tools they feel that they have and could use in these meetings. All police informants stated that through the years they feel that they have become better at comprehend signals in meetings and to find ways to act based on that.

*“... the longer you’ve worked, you become calmer, comfortable, safe in yourself. You, you don’t get stressed in the same way, and you have an experience bank to use in these meetings, not only with mentally ill, but all people you meet”* (Police 5).

However, some of the police officers stated that that even though they regularly meet individuals suffering from severe mental illness they find it hard to identify different mental disorders and do not possess knowledge on the best way to approach individuals based on what disorder they have.

*“Though I can’t say that my education is good enough for me to know what diagnosis it’s about or how I should act with a person in a specific occasion”* (Police, 3).

## **Emotions**

While the police officers told about their experiences of meetings with severe mentally ill individuals they also shared some common emotions that they have in these meetings. *Insecurity* was an emotional state that all police informants mentioned. However, their insecurities were based on different parts of the meetings. Some of the informants stated that their insecurity is based on the fact that one does not know how the mentally ill individual will react, while others feel insecure on how to act in these meetings and based on what mental disorder the person they meet have. Furthermore, a consistent respond among all

police officers was that their feelings of insecurity has decreased to some extent during the career.

*“Today I really know how I should do and so, there is nothing... It actually is the easiest task in the world... in that way that you know exactly, there is never anything unclear what you should do with the person in front of you. But it is just that, the insecure thing in it and the x-factor, the person you meet. They are all different in how they act and so...”* (Police 4).

Another feeling mentioned in some of the interviews was *lack of control*. Some of the police respondents stated that in meetings with mentally ill individuals, the communication becomes problematic due to their mental state and loose ties to reality. Furthermore, the lack of control also leads for these police officers to be more on guard than in meetings with individuals that are mentally stable.

*“The absolute most problematic is this with communication and to get to them... you never know how it will go... like with severe mental illness it feels like it can turn really quick...”* (Police 3).

*“You always have, you like have to be observant at all times, you can’t stand and be relaxed...”* (Police 2).

A *disappointment* about how different agencies in the society are handling the mentally ill individuals emerged during some of the interviews. Two of the police respondents stated that they think that different authorities and agencies in the society should take their responsibility for these people instead of putting the blame on each other. They feel that these individuals are treated as objects and not as human beings in need of help and support.

*“It is a lot of politics it is about... who should, who is responsible for the health care, it costs a lot of money... they become administrative people you manage, but it ends with them being tossed around...”* (Police 1).

## **Development**

This part of the result is based on the interview with one of the business developers involved to implement the governmental assignment.

An organizational analysis over different departments of the police was made to pinpoint what knowledge is missing with the police and how to structure it. Police officers from all parts of Sweden were invited to workshops to enable a mapping of challenges they face in meetings with individuals suffering from mental illness. Based on this analysis four learning outcomes were created:

1. Legal frames – where does your mission begin and where does it end
2. For employees of the police to recognize different states of mental illness and/or neuropsychiatric dysfunctions
3. To be able to respond to people that have some form of illness or dysfunction
4. How, based on your local prerequisites, could collaborate with other parties, authorities or municipalities to help these individuals.

To strengthen *knowledge*, the police department has developed a knowledge portal on their intranet where employees could go and educate themselves on different mental states, knowledge about mental illness on a national and international level. Furthermore, there are plans to buy a training instructor who will train the staff on acute care of suicidal individuals.

The police department also find it important to give a human face to those suffering from mental illness. To do that, the police are in contact with user organizations to receive insight knowledge on how it feels to live with a diagnosis and their experiences in meetings with the police.

*“It shouldn’t only be a clinical perspective on different diagnosis, but we also want to, there are human beings behind all this and how does it feel to have a psychosis, how does it feel to have autism or what it could be...”*

The knowledge portal is aimed to be available to all employees in the police department. However, when asked whether the developer believe that a lot of the employees are going to take part of the portal, this answer followed:

*“I believe, I think, I don’t think many will do it to be honest and a little negative, because... those intranet, you don’t reach those who might need it the most... Intervention police are those who meet these people with mental illness the most out of our staff, but they don’t have the time to sit on our intranet and search around”*

An attempt to reach the police officers of outer service, that have a bigger need of more knowledge, the police department will focus on their mandatory further training over the year and provide knowledge development during these occasions.

To strengthen the police departments *competence* to respond to people with mental illness, the department have produced some material to use during the mandatory training. The aim of the material is to give police officers tools to understand the situation, to enable them to assess and later to be able to manage it mentally and tactical based on different scenarios. The material consists of a large amount of scenario films with four associated comment films that cover different angles of understanding the situation.

*“Concrete there are a large number of films... scenario films we call them. One category of films that we record a patrol who arrive to a person that has a form of mental illness or neuropsychiatric dysfunction... After they’ve seen the film they have to reflect over some questions that are related to response, assessment of state the person I have in front of me suffers from...”*

Furthermore, there are taped films of people suffering from mental illness where they share their stories and experiences of meetings with the police while being in a mentally unstable state. Additionally, there are support material in different forms where one could go through different mental and neuropsychiatric states and receive tools on how to act and interact with this group. The business developer also states that they consistently work with low-impact approaches that the police should implement in all situations.

When implementing something within departments, especially a big one as the police, there will be some challenges to face. One of the biggest according to the business developer is to make the material available now and over a longer period of *time*. Time was something that

came up as an important and crucial. The employees need to be given time to strengthen their knowledge and competence. Furthermore, it is important to give the time needed to increase knowledge and competence and make it to a part of the knowledge base that police officers should have. For this to be accomplished the fire and energy within the department has to continue and not to put this topic aside if something else comes up, but to be stubborn and carry on to educate about mental illness.

*“Me and my colleagues usually say that this should not be a sparkler that shines bright and beautiful during a short time and then you stand there with a charred stick”*

## **DISCUSSION**

Following text is a discussion of the method used and presented result in relation to similar studies. Additional to this, a discussion on the limitations of the thesis will be presented.

### **Result discussion**

Prior research has stated that police officers have low knowledge on mental illness (Hughes & Jackson, 2004; Husted et al., 1995). The results in this thesis could to some extent strengthen the prior findings. Even though this thesis and the study conducted by Husted and colleagues have been conducted 24 years apart, the findings regarding level of knowledge are similar. This could probably be understood if taking into consideration that the view on knowledge differ within the police organization (Holgerson, Gottschalk & Dean, 2008). Holgerson and colleagues (2008) discuss the complexity of the difference between theoretical knowledge and street-level knowledge. Police officers and those with a higher ranking within the organization do not share the same view of what type of knowledge that is most important. The different views of what knowledge is, could perhaps explain why police officers do not feel that they have received more knowledge. They may not have received the form of knowledge that they perceive as valuable for their job.

Furthermore, the results in this present study also indicated that police officers, until today, feel that they are not offered proper training to develop their knowledge on mental illness or on how to respond to mentally ill individuals. It is also stated that they do not feel secure in meetings with this group of people. This is a consistent answer that has been highlighted in similar studies conducted in other parts of the world as well (Hails & Borum, 2003; Husted et al., 1995). The major difference between this thesis and other studies is that they use different methods. Prior studies are often quantitative and therefore only gives an overview, while this thesis provides a more detailed description of experiences. The different methods and aims of prior studies with a similar topic and this thesis result in difficulties to compare the findings.

The fact that the education received from the police education is not good enough for future police officers to be able to handle situations including individuals suffering from mental illness has been stated in previous research studies (Polisförbundet, 2009). When looking at the police students' response to whether they feel that the education they have received was good 2 of 3 students stated that they feel that way. This indicates that the report from 2009, today is no longer accurate. However, when including the answers from police officers and the business developer 6 of the 9 interviewed stated that the education received is not good enough. When looking at the bigger perspective and their perception of the police education it confirms what has been stated in the report.

A study by Holgersson and Gottschalk (2008) found that police officers' knowledge on how to handle situation tends to be based on experience. This was also something that could be strengthened by the result in this present thesis. The police officers of this study had become better in handling situations involving mentally ill individuals through their careers and based on prior experience of these meetings. Similar statement on the role of experience was presented by Rask and colleagues (2006) where they wrote that experience have an impact on how the police perceive meetings with mentally ill individuals.

The majority of the police officers feel that they need more knowledge about different mental states and training on how to act in meetings with severe mentally ill individuals to be able to handle these situations with higher confidence and higher feelings of safety. This correspond to the findings in studies by Cordner (2010a) and Rask with colleagues (2006). This could mean that police officers have taken a step towards embracing the fact that for their work to be accomplished in the best possible way, one has to assimilate both theoretical, practical and familiarity knowledge as stated in Holgersson and colleagues (2008).

### **Method discussion**

Based on this thesis aim a qualitative interview study was the most suitable choice of method. The author wanted to get information about experiences from a subjective point of view. That is best captured by doing interviews with individuals that have that experience (Hammarberg et al., 2016). Hammarberg and colleagues (2016) have also stated that semi-structured interviews are useful when seeking for views on a specific topic. This thesis focused on the police organization and their work on the topic of mental illness. This is a specific topic and therefore, with support from Hammarberg and colleagues study, the choice of method in this thesis is viable.

The sample size in this thesis is relatively small, with a total of nine interviews covering three different parts of the police organization. However, as the interviews went by the author felt that no additional information emerged and in the end the content of the interviews became more or less the same. This could be explained as data saturation and that further data collection would probably not have a big impact on the result (Fusch & Ness, 2015).

During the analyse of the interviews content to enable the creation of themes and categories the author of this thesis had some difficulties to separate information for the two themes education and meetings in the police interviews. This because the police officers consistently talked about their experiences and level of knowledge as coherent. The police officers explained their experience as a result of the level of knowledge they have and on based on the absence of further training on this subject.

### ***Validity and reliability***

Two essential elements in assessing the quality of a study are validity and reliability. These terms are according to some researchers more suitable for quantitative research and suggest that the terms trustworthiness and authenticity are more useful when assessing the quality of a qualitative study (Bryman, 2016).

By including quotes from the interviews when presenting the result, the readers are allowed to get an insight on the basis of a created theme (Bryman, 2016). This, together with the detailed description of the data analysis process, strengthen the studies trustworthiness by making the whole process transparent (Hammarberg et al., 2016). One could easily follow the steps of the

analysis made by the author of this thesis and quotes were added in the result to give a sample of what type of statements the result was based on.

To reach credibility in qualitative research it is important to present the result in a clear context, people with similar experiences or people in close relation to those with the experience recognize the statements that are made (Hammarberg et al., 2016).

By connecting the findings in this research with prior studies made on a similar or identical topic the reliability of the study is increasing (Hammarberg et al., 2016). A discussion of the result in relation to other studies has been presented above to give a clear picture of the findings in this thesis in relation to other studies covering a similar topic.

When collecting data from a group of individuals that are in the same context, consistency is usually found to some extent. However, it is important to have in mind that individuals in a group still can experience things different and that does not mean that the results are invalid, but rather offers a diverse insight (Hammargren et al., 2016).

### **Limitations**

One limitation of this thesis is the relatively small sample, where only the police interviews are of a relatively satisfactory amount. However, this thesis gives an overview of the whole police organization, from being a student to actually working as a police officers but also how the police department approach the subject. In qualitative studies there is common to have small samples due to the possible difficulties to analyse if there are many interviews to analyse (Denscombe, 2010).

In quantitative research the term generalizability is used to discuss whether the result could be applied in a larger context (Bryman, 2016). When the data consist of personal experiences, as in qualitative studies, one could not apply the findings in a general aspect due to the fact that experiences differ from individual to individual and is an absolute subjective thing (Hammargren et al., 2016). This means that the findings in this thesis could not be applied or used to gain understanding on a general level. The findings in this study are based on stories of subjective experiences. Even though this study can not contribute to general knowledge it gives an insight on how student and police officers perceive their knowledge on mental illness and what experiences they have. What knowledge they feel is absent for them to be more comfortable in situations involving interaction with mentally ill individuals and an insight of what is done within the police department to meet the needs of their employees.

One important limitation to discuss is the absence of more information about the interview persons. Information about what job experiences the respondents had prior to the police education and for the police, how long they have worked as police officers could contribute to a better understanding of the results. However, this information was excluded by the author of this thesis due to the increasing risk of enabling identification of the respondents if this information would have been included and presented.

## **CONCLUSION**

This present thesis has been looking into different parts of the police organization with the aim to illustrate the police organizations experiences and knowledge on mental illness in a Swedish context. It can be seen that the overall view police officers and current police

students have on received knowledge on mental illness is low and most of the police officers have stated that there is a big need of further education in the subject. Police officers do not feel fully secure in meetings involving mentally ill individuals and perceive these meetings to be hard to handle. This has been heard by the higher ranked employees within the department and extensive efforts have been made to meet the needs of the police officers.

Previous research has shown similar findings connected to the need of more education on mental illness within the police to strengthen the security of both police and mentally ill individuals. They have as well stated the importance of training in different forms and the importance of acknowledging the different views on knowledge within the police department to enable development.

### **Future implications**

This thesis has shown that the knowledge on mental illness is inadequate, but actions are being taken to improve the situation. Implications for future research on this topic should be to do an evaluation after the implementation of further educational training to see whether the views and perceived experiences with mentally ill individuals has changed. Look whether the form of education and training has been improving knowledge and competence on mental illness within the department and made police officers feel more secure and confident in meetings with mentally ill citizens.

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# APPENDIX

## Appendix I

### Letter of information

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My name is Edina Mehmedovic and I am a masters' student in criminology at Malmö University. Prior to this I have studied a bachelor program covering subject as criminology, psychiatry and social work and through the education developed an interest of the connection between mental illness and criminology. Additional to this I have a big interest in police work and during my education I have received an insight on how often police officers interact with mentally ill individuals but also the amount of education given on this topic within the police education. This has been the basis of my choice of topic for my masters' thesis.

This thesis will consist of three parts that in one way or another cover the relation between police organisation and mental illness. One part covers the police education and the knowledge on mental illness received there. Further police officers' experiences and perceived knowledge on mental illness will be included. Last but not least what is done within the police organisation to increase knowledge and competence on mental illness among their employees will be included. The framing questions of this thesis are:

- In what ways have the police education prepared police students for future meetings with individuals suffering from severe mental illness?
- What experiences do police officers have from meetings with severe mentally ill individuals?
- What is done within the police to increase knowledge and competence about mental illness?

The interview will be semi-structured, which means that some questions are prepared as well as spontaneous questions could be asked as the interview develops. The interview will be, if you allow, be recorded and then be transcribed by the author. The audio-file will be deleted as soon as the interviews are fully transcribed and checked. After approved and graded thesis all material will be disposed.

This thesis is in line with ethical principles, which means that the material will be handled with caution and information is handled confidentially. The result will be presented in a way so that it is not possible to know who participated and all respondents will be marked with numbers instead of names.

I want to remind you not to name people or sensitive information that could be connected to a specific individual during the interviews.

Participation is voluntary and the possibility to withdrawing your participation is allowed and no explanation is needed.

The result will be published to a group of students in relation to the opposition and also be published after a successful submission of the thesis.

**You are hereby asked about participation in the study.**

## Appendix II

### Interview guides

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#### Police student

1. To what extent during the police education has education and discussion about mental illness occurred?
  - a. Severe mental illness/disorder?
2. In what ways have the police education prepared you for meetings with individuals suffering from a severe mental disorder?
  - a. Any specific exercises/moments?
3. How would you describe the amount of education on mental illness that is received during the police education programme?
4. Based on the knowledge you have received on mental illness, to what level would you feel safe and comfortable in meetings with severe mentally ill individuals in your future role as a police officer?
5. Could you give examples of moments in your training on mental illness that you perceived as good and useful for your future meeting with individuals suffering from a severe mental illness`
  - a. Any examples or thoughts on what could be done during the education programme to make you feel more prepared for these meetings?

#### Police officers

1. How long have you worked as a police officer?
  - a. As a police officer of outer service?
2. What does the concept “severe mental illness/disorder” mean to you?
3. To what extent do u perceive that you and your colleagues get in contact with individuals that suffer from severe mental illness/disorder?
4. How would you describe your experiences of meetings with individuals suffering from severe mental illness in your role as a police officer?
  - a. Emotions? Thoughts?
  - b. In what ways have your experience changed during your carrier?
5. How would you describe the amount of education on mental illness within the police?
  - a. How would you describe the level of knowledge among you and your co-workers?
6. How would you describe the need of more knowledge and education on mental illness within the police?
7. Do you find that the amount of training given during police training is sufficient to make you feel safe and comfortable in meetings with individuals suffering from a serious mental disorder?

## Business developer

1. What do you think was the reason behind the identification of the need for increased knowledge about mental illness within the police department?
2. What is currently done within the police department to increase knowledge and competence on mental illness?
3. In what ways is the web-module aimed to increase knowledge on mental illness?
  - a. To what extent do you think that police employees will assimilate the web-module and conduct the programme?
4. Are there any concrete examples on how the department has thought of strengthening the police work on mental illness?
5. What type of educational material has been developed for the mandatory training, youth investigators and receptionist staff?
  - a. In what ways will the concerned employees get access to the material?
6. What do you think is the biggest challenge when it comes to increasing the knowledge and competence on mental illness within the department?
7. Does the governmental assignation affect the current police education in any ways?