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# CAUSES OF CRIME

## CHAPTER 3

UTAH STATE BOARD OF EDUCATION  
CAREER AND TECHNICAL EDUCATION

## **CHAPTER THREE: EXPLANATIONS OF CRIME**

### **INTRODUCTION**

It is best to start this unit by emphasizing that there is no single cause of crime. In addition, there is no single explanation for criminal behavior that is agreed upon by even a majority of *criminologists*, those individuals who study the causes of crime. However, it is still important to study this particular subject so that society can attempt to properly deal with the most important law enforcement task, that of crime prevention. Only by learning why certain people commit certain crimes can a society or a community act to stop them. There are reasons for all crimes, though the person who commits the crime may not know the reason. The police and the public may not know either, but if such causes can be determined through study, then prevention or rehabilitation becomes much easier to accomplish.

The following material is arranged into categories, depending on where it is generally believed that criminal behavior originates. Some of these ideas are no longer widely accepted, but are interesting examples of how crime has been explained in the past.

### **PSYCHOLOGICAL EXPLANATIONS**

Psychological explanations for crime are based on the mind and its mental processes. Many of the explanations for criminal behavior are based on the pioneering theories of Sigmund Freud and the treatment known as psychoanalysis. Freud taught that there are three mental processes: id, ego, the super-ego. The id is the source of drives to gratify certain basic needs, such as food, sex, power, etc. The super-ego equates to a person's conscience. The ego is the integrating process that tries to find a balance between the id and the super-ego. Freud believed that there are three different interactions between id, ego, and super-ego that lead an individual to commit a crime. First, some individuals fail to develop proper super-ego controls. In other words, an individual is not taught or does not learn what parents, teachers, religious leaders, and others offer regarding what society considers right and wrong. Second, some individuals have very strong obsessive-compulsive actions, a part of the id they are unable to control. Because the individual is unable to control his or her desire for a specific gratification, he or she commits a crime to satisfy the desire. Third, Freud taught that people often have extreme mental conflicts that produce guilt. In order to rid himself or herself of the unwarranted guilty feeling, an individual may commit a criminal act so that he will be punished, thus resolving the feeling of guilt.

Harrison G. Gough, a noted applied psychologist, focused much of his research on the study of individuals' personality characteristics. He defined some criminals as psychopaths, describing them as having too much concern for immediate gratification, no concern for the rights of others, and poor planning and judgment skills, and as always blaming others for their mistakes. Gough believed that psychopaths are a result of broken homes, where there is inconsistent discipline, child abuse, and no strong male figure in the home.

American courts currently give considerable credibility to psychological theories of crime causation. The courts have been receptive to defendant claims of uncontrollable drives or mental illness. If proven, the law allows a person to be found not guilty by reason of insanity. It is the responsibility of the defense to prove that the accused was unable to differentiate between right and

wrong, and therefore did not understand the consequences of his or her actions. Sometimes all that need be proven is that the crime was the result of an irresistible impulse.

Courts will not conduct a trial if the accused is deemed to be incompetent, meaning that the accused is unable to understand the trial process. Such individuals are usually committed to an institution for the treatment of their mental disorder until they are adjudged to be sane. There is considerable evidence that individuals committed to such institutions actually spend longer in custody than those committed to prison for similar crimes.

There is much confusion in society regarding the mental illness or insanity plea. Trials such as John Hinckley's attempted assassination of President Reagan have left many people with doubts about the justice involved. Many individuals perceive that expert witnesses offer contradictory and biased testimony, and that no one really knows what goes on in another person's mind.

A recent book, *Inside the Criminal Mind* (Stanton E. Samenow, Ph.D.) argues that "...criminals choose to commit crimes. Crime resides within the person and is caused by the way he thinks, not by his environment. Criminals think differently from responsible people." Samenow rejects traditional psychological theories as excusing crime, and argues that changing criminal behavior must be accomplished by "insisting that they be treated as responsible for their behavior and held accountable."

## **SOCIOLOGICAL EXPLANATIONS**

Sociological explanations of crime are based on the assumption that criminal activity can be produced or stimulated by a person's environment, the interaction of an individual with other individuals and groups with whom a person associates. The field of sociology examines how and why an individual develops those beliefs, attitudes, and values that are so important to the decisions that an individual chooses to make on a daily basis. Of particular concern to sociologists are the formative pre-adult years.

Emile Durkheim, whom many consider to be the father of sociology, was the first to point out that, for some individuals, crime may actually be normal. He stated that normlessness (the lack of shared standards of expected social behaviors), characterized by an absence of social values, can cause individuals to commit crime. He emphasized that crime can be caused by a breakdown in society's norms or expected social behavior because individuals do not see crime as being wrong.

Sociologists have come up with numerous other theories to explain why an individual may become involved in crime. Frank Tannenbaum, who was instrumental in developing the labeling theory, stated that individuals tend to respond to the labels that they are given. If a juvenile is labeled a delinquent, the juvenile's own self-perception may be to accept the label and to respond as defined. This particular theory receives great attention in the field of education, where teachers are continually reminded to be positive in any circumstance in which a student may feel that he is being labeled.

Travis Hirschi, author of *Causes of Delinquency*, was a major proponent of the social control theory. He suggested that individuals have a bond with society composed of four different factors: attachment, commitment, involvement, and belief. If an individual has a weakened bond with society and a lack of commitment to its rules, there is a possibility of criminal activity. Because our American society is becoming more mobile, wealthier, and less in contact with family, churches, schools, and other groups, the social bond is weakening, and breaking the law may become more acceptable and prevalent.

Edwin Sutherland, in his book *Principles of Criminology*, proposed the theory known as differential association. Sutherland stated that criminal behavior results from significant differential

association with valued sources who accept criminal behavior as a valid alternative. The key element of this theory is that criminal behavior is learned. Sutherland suggested that such learning comes from valued sources such as family, friends, and peers, and that person-to-person contacts are most important. He stated further that the importance of a contact will vary depending upon frequency, duration, priority, and intensity of the contact. The individual will then adopt acceptable or unacceptable actions based upon these valued sources.

Robert K. Merton developed another popular theory known as the strain theory. He stated that all persons are reaching for goals of success, especially in a culture like America's. However, not everyone can be successful by conforming to society's rules. Some individuals, frustrated by their lack of success in reaching the goals that they have set, consider other possible options. One of these options may be turning to criminal activity in order to attain their set objectives. They pursue the same goals as other Americans, but turn to illegal means to reach them.

## **INTEGRATION OF THEORIES**

In a 1985 publication, *Crime and Human Nature*, James Q. Wilson and Richard J. Herrnstein offered a theory for criminal behavior based on their study of the causes of crime. Their study drew on many academic fields, including psychology, political economy, and political science, in an intentionally interdisciplinary approach. They argued that in order to establish the causes of crime, one must understand human nature, which is influenced at least in part by physique, intelligence, and personality. Their analysis of the research data suggested that inherited traits of an individual combine with environmental surroundings to produce someone who is susceptible to criminal behavior. They stated that the most important factor in turning a potential criminal from a life of crime is his family life. If the family is strong, with appropriate role models, the child is able to counter the negative factors to become a law-abiding citizen.

The theory of crime causation that they offered is based on the premise that people, when offered choices, choose a preferred course of action. Preference does not necessarily imply a totally rational thought process, however. Preferences result from reinforcers, conditioning, delay or uncertainty, equity or inequity, and context reinforcement.

“The larger the ratio of the rewards (material and nonmaterial) of non-crime to the rewards (material and nonmaterial) of crime, the weaker the tendency to commit crimes. The bite of conscience, the approval of peers, and any sense of inequity will increase or decrease the total value of crime; the opinions of family, friends, and employers are important benefits of non-crime, as is the desire to avoid the penalties that can be imposed by the criminal justice system. The strength of any reward declines with time, but people differ in the rate at which they discount the future. The strength of a given reward is also affected by the total supply of reinforcers.”

Obviously, there is no consensus on why someone becomes involved with criminal activity. It is likely that aspects of heredity, environment, and mental processes all interact to produce a criminal. The field of criminology is a fascinating endeavor that is open to many other disciplines, such as biology, psychology, psychiatry, and sociology, as the challenge to find out what causes crime continues.

## **TYPOLICAL THEORY**

Criminologists often find it useful to talk about patterns of criminal characteristics. This particular field of study has become increasingly visible in today's society. The Federal Bureau of

Investigation (FBI) has focused on this area of expertise, and has a specialized group of agents trained to identify the type of individual who would commit a specific type of crime.

Criminal profiling focuses on a number of aspects of a specific type of criminal offense. Of major concern to the analyst is the offender's behavior. It is also important to attempt to identify the psychological motivation for the commission of the crime and the emotional needs that are met through the commission of a crime. These needs and motives can be identified in order to provide the characteristics of the individual being profiled.

Identifying these typologies makes it easier to study and investigate the causes and treatment of different types of criminals. Of particular interest are the person's social class, family background, peer group associations, and contact with the criminal justice system. The following typologies are drawn from *Society, Crime and Criminal Careers* by Don Gibbons.

Professional thief (con men, pickpockets, shoplifting rings): These criminals have group activity, an education process, their own vocabulary, and a high self-concept as "elite"; they do not associate with "lower-class" criminals, and they have pride in their criminal skills. They start at young age (schooled). They tend to be lower-middle class, place high value on money as a goal, and leave and their families when young. They associate with the criminal fringes of society, then succumb to strong peer pressure. They are seldom caught, and have no strong feelings against police. They are skilled in social interactions, which they may use to impress judge; they usually end up with a minor fine when caught.

Professional heavy (armed robbery, strong-arm robbery, burglary): These criminals are highly skilled in inducing fear, utilizing detailed planning and the element of surprise. They seldom work alone, and have specialized roles. They are proud to be criminals; all others are amateurs. Police are considered "clowns" or are to be respected, but the criminals are not necessarily hostile to them. They are urban, lower working class, and belonged to gangs as teens. They see crime all around them. Often they have suffered from parental neglect and little supervision. They "work," then return home to middle-class homes and families. They may have extensive arrest and jail records and consider themselves "tough guys," and may have learned crime while in prison.

Amateur shoplifter (adult women): These steal for personal use and work alone, usually in large stores. They consider themselves honest citizens, not thieves. They usually continue until caught and turned over to police; many have already been caught by store management several times and released without police involvement. They are lower and middle class, mostly married, with children but no peer support. The best therapy approach is to induce guilt.

Joyrider (male, 13-20): These criminals steal for short-term recreation. The majority look for keys left in a car; some hot wire vehicles. They are slightly skilled and seldom involved in other criminal activities. Joyriding is done in groups of guys casually associating. They consider themselves "cool" or "tough" and view police as stupid, since the police drive by without stopping them. They are repeat offenders who usually stop by 20 and never break the law again. They have a middle-class background with close and strict parents, but no strong father figure. Peer group pressure is strong. They have little contact with courts.

Psychopathic assaultist (violent, senseless assaults): These people don't just hit, they attempt to *hurt* people. They are "lone wolves." With a defiant chip-on-the-shoulder attitude, they are very suspicious and strike out first because they think others are out to get them. They undergo frequent arrests, long sentences, and no rehabilitation, and come from all social classes. They have a family rejection pattern, and usually come from an illegitimate or unwanted pregnancy. Most are placed in foster homes or are runaways. They avoid group associations. They have contact with many police and social service agencies, all of which are treated with hostility.

Rapist: These criminals use varying degrees of force to induce sexual activity. In some cases this results from the extension of a voluntary association where sexual demands exceed the wishes of the female (date rape). Other cases are of sexual activity deal with control and submission. They rationalize that the victim “seduced” them, “asked for it,” engaged in provocative action or dress, or “really wanted it.” They have no other criminal background. They are usually caught unless the rape is a single episode. Most serve prison time when caught and are never involved in rape again. They are lower or lower-middle class, and may consider domestic violence acceptable. They have normal family backgrounds and experience affection, but minimal commitment.

Embezzler: This type of criminal violates a position of trust, takes advantage of an opportunity to steal created by nature of his/her employment, and goes to great lengths to conceal crime. The crime seldom involves or is known to others, and the embezzler develops elaborate rationalizations when discovered. They come from relatively comfortable middle-class backgrounds, frequently from stable a family background, but may need money to maintain a desired standard of living. They have minimal contact with courts; private business losses are seldom handled criminally, although more recent emphasis on “white-collar crimes” is increasing the potential for prosecution and civil sanctions.

## **BIOLOGICAL THEORY**

Biological explanations of criminal actions are based on the belief that the body itself is responsible for a person’s behavior. In ancient times, people who acted strangely or did things that were against society’s rules were believed to be under the control of evil spirits or fates. This belief took responsibility for acting unacceptably away from the person. We still use the phrase “I don’t know what got into me” when we are caught doing something wrong, as a way of claiming that it really isn’t our fault. In more enlightened times, this belief has become less acceptable and has been replaced with the belief that most people act rationally when deciding whether or not to commit a crime.

Cesare Beccaria, the author of *On Crimes and Punishments* (1764), believed that man is driven by what he called a social contract—that is, that all individuals have a free will and a rational manner, which leads each person to look out for his or her own best interests. He also believed in manipulability, or the idea that an individual is predictable and can be controlled and manipulated by society to live within the law, given the proper motivation. He described this motivation to obey the laws as swift associative punishment in response to the commission of a crime. The method of punishment should serve the greatest public good, rehabilitating the criminal while deterring others from committing the crime. He also focused his writing on reformation of the criminal justice system. He called for revamping the system by utilizing more humanitarian forms of punishment and equality in sentencing, and by banning torture and capital punishment. His book was well accepted and was praised by such leaders as Catherine the Great, Thomas Jefferson, John Adams, and Voltaire.

Jeremy Bentham, influenced by Beccaria and others, was a founder of the philosophy of utilitarianism. He authored *Introduction to the Principles of Morals and Legislation* (1789), which explained his ideas of psychological hedonism. Bentham believed that personal pleasure was an individual’s ultimate goal. He taught that an individual, using a rational analysis of his or her own self-interest, would appraise a situation and base his or her decision on pleasure versus pain, in addition to the conventional decision of right versus wrong. If the pleasure gained outweighed the pain involved in the punishment process, the person would be willing to commit a crime. Bentham wrote that “nature has placed mankind under the governance of two sovereign masters, pain and pleasure. It is for them alone to point out what we ought to do, as well as to determine what we shall do. On the one hand the standard of right and wrong, on the other the chain of causes and effects... They govern us in all we do, in all we say, in all we think.”

A famous Italian physician and criminologist, Cesare Lombroso, had a different idea about crime. In his book *L'uomo Delinquente [Criminal Man]* (1876), he postulated that criminals were genetic throwbacks and stated that "In general, many criminals have outstanding ears, abundant hair, a sparse beard, enormous frontal sinuses and jaws, a square and protruding chin, broad cheek bones, frequent gestures." He taught that as many as 40% of society's criminals were evolutionary throwbacks who were genetically inferior to others. Lombroso developed this theory by measuring the skulls of numerous individuals, including the criminals of his time. His theory was loosely based on Charles Darwin's theory of evolution and became known as atavism, the reversion of man to evolutionarily primitive traits. His ideas today strike many as racist, but they were based on beliefs common in his society.

Franz Joseph Gall, a noted physician, physiologist, and neuroanatomist, believed that the brain, or how it was formed, was the key to a person's behavior. In his book, *The Anatomy and Physiology of the Nervous System in General, and the Brain in Particular* (1819), he wrote of the principles of cranioscopy, later to be known as phrenology. He believed that certain regions of the brain controlled various aspects of an individual's personality, morality, and mental faculties. Gall believed that the contours of the skull or cranium reflected the interior shape of the brain, and that the contours could be examined in order to diagnose the characteristics and traits of each individual. Gall was able to map out various phrenological characteristics, such as destructiveness (behind the left area), wit (above the right eye), and secretiveness (left side of head). His idea of cerebral localization was quite accurate, in that various areas of the brain do control various aspects of individual behavior, but the contours or shape of the cranium are not relevant.

Ernest A. Hooton, a noted physical anthropologist, argued that criminals were criminals because they were biologically inferior. In his treatise *The Asymmetrical Character of Human Evolution* (1923), he wrote that "Criminals as a group represent an aggregate of sociologically and biologically inferior individuals." Later in his career he conducted a twelve-year study of over 10,000 convicts in ten different states, measuring and comparing them with a group of over 3,000 non-criminal volunteers. His study conclusions reinforced what he had already stated, that the inmates were found to be physically inferior. The conduct of his study and its findings have been debated for many years since, and have been discounted by many criminologists.

William Sheldon conducted a study involving juvenile delinquents and concluded that there were three basic body types. He listed and defined them as follows:

Endomorphs: tend to be fat with short limbs and soft, smooth skin

Ectomorphs: lean, delicate body; small; fine hair

Mesomorphs: large muscles, bones, trunk, and hands

Sheldon concluded that most of the criminals in society were from the mesomorph body type, because they behave very aggressively and thus get in trouble with the law more often. The study by Sheldon and a similar study by Eleanor and Sheldon Glueck were based on examination of many juveniles in reform schools. Critics of the two studies point out that the findings may not be valid, since judges at the time resisted sending children to reform schools who did not look like they could take it.

More recently, studies have examined the XYY chromosome syndrome. Most people are either female (XX) or male (XY). The last pair of a person's 23 pairs of chromosomes determines the sex of the individual. On occasion, however, an unusual male pairing (XYY) occurs. Several studies have deduced that a male with this characteristic tends to be taller and more prone to anti-social behavior than normal. According to early studies, such persons are overrepresented in prison populations.

However, more recent studies have tended to discount the negative effects of the XYY chromosome, and further study is needed in order to draw a final conclusion.

In the 1970s, work started on examining the effect of genes on human behavior. Early studies by R. J. Moyer have led him to believe that some genes may create brain structures leading to aggression and hostility. Since genes are the building block of life and are likely to be artificially modified in future years, such research holds promise for the biologically oriented criminologist.

## MENTAL ILLNESS AND CRIME

Some criminologists theorize that mental illness is directly related to violence and crime. There are studies that both support and disprove this to be the case, depending on other varying factors such as drug or alcohol abuse or exposure to traumatic events. One thing that is agreed upon by mental health professionals is that persons with mental illness have a higher probability of being victims of crimes when compared to the general public. The table below is an overview of the most common categories of mental illnesses that are likely to involve contact with law enforcement or EMS, along with descriptions of each and specific examples.

Common Mental Illness Category	General Description	Example
Anxiety disorders	Anxiety disorders manifest as fear and trepidation, as well as physical signs of uneasiness and anxiety that are characterized by increased heart rate and perspiration. Anxiety disorders are further categorized based on their triggers. A person with an anxiety disorder is unable to control his or her response to a trigger, to the degree that it interferes with his or her normal day-to-day functioning.	<p><b>Phobia:</b> <i>Phobia</i> is the term used to describe an irrational and extreme fear of a situation or object. There are many types of phobias, including the fear of spiders (arachnophobia), the fear of being up high (acrophobia), and the fear of being away from home (agoraphobia).</p> <p><b>Obsessive compulsive disorder:</b> People with OCD are plagued by constant thoughts or fears that cause them to perform certain “rituals” or routines. The disturbing thoughts are called obsessions, and the rituals are called compulsions. An example is a person with an unreasonable fear of germs who constantly washes his or her hands.</p>

		<p><b>Post-traumatic stress disorder (PTSD)</b> is a condition that can develop following a traumatic and/or terrifying event, such as sexual or physical assault, the unexpected death of a loved one, or a natural disaster. People with PTSD often have lasting, frightening thoughts and memories of the event, and tend to be emotionally numb.</p> <p><b>Panic disorder</b> is typified by frequent episodes of severe, incapacitating anxiety attacks, also known as panic attacks. These panic attacks may include symptoms such as an accelerated heartbeat, breathlessness, nausea, and an inability to think clearly. The diagnosis of panic disorder is also dependent upon the person being worried about experiencing a panic attack or worried about the panic attack being a symptom of a medical condition, such as a heart attack.</p>
Mood disorders	Mood disorders are affective disorders defined by a constant feeling of being sad or periods of extreme happiness, or by going back and forth between feeling overly happy and overly sad. Typically a person who is diagnosed with depression experiences feelings of sadness that preclude him or her from functioning normally. These feelings of sadness last longer than	<b>Major depression:</b> In order to be diagnosed with major depression, an individual must feel depressed for most of the day and for most days over at least a two-week time period. Additionally, he or she may experience symptoms such as changes in appetite and weight, irritability, loss of interest and motivation for his or her usual activities, hopelessness and, in some cases thoughts,

	<p>would be expected given the situation. Depressive disorders can be further subcategorized as bipolar disorder, dysthymia, or major depression.</p>	<p>plans or attempts to cause harm to himself or herself. Some women may experience depression after having a child, which is called postpartum depression. The duration of postpartum depression can vary from weeks to months.</p> <p><b>Bipolar disorder:</b> In the United States, over 1% of adults, or up to 4 million people, have been diagnosed with bipolar disorder. Bipolar disorder is sometimes referred to as <i>manic depression</i>. It is characterized by extreme changes in mood, recurring depressive episodes, and at least one manic episode.</p>
Behavioral disorders	<p><i>Behavioral disorder</i> is the catchall term used to refer to the inability to display acceptable behavior in a given situation. One of the most commonly diagnosed behavioral disorder is attention deficit hyperactivity disorder (ADHD). Because ADHA was initially more commonly diagnosed in boys, it was thought to be a disorder exclusive to boys. However, now ADHD is also frequently diagnosed in girls. Interestingly, about half the children who are diagnosed with ADHD in childhood continue to display symptoms in adulthood. The symptoms of ADHD include the inability to pay attention, in addition</p>	<p><b>Attention deficit hyperactivity disorder (ADHD):</b> Symptoms of this disorder include inattention, hyperactivity (or restlessness in adults); disruptive behavior and impulsivity are also common in ADHD. Academic difficulties are frequent in those diagnosed with ADHD, as are problems with relationships. However, it can be hard to draw a line between normal levels of inattention, hyperactivity, and impulsivity and the more significant levels that require intervention.</p> <p><b>Autism spectrum disorders (ASD)</b> span many levels of diagnosis, such as high-functioning autism (or</p>

	<p>to hyperactive and impulsive behaviors.</p>	<p>Asperger’s syndrome). People who are diagnosed with autism are characterized by abnormalities of social interaction and communication that pervade the individual’s functioning, and by restricted and repetitive interests and behavior. Like other psychological development disorders, ASD begins in infancy or childhood, has a steady course without remission or relapse, and comes with impairments that result from maturation-related changes in various systems of the brain. Lack of nonverbal communication skills, limited empathy for others, physical clumsiness, obsessive repetitive routines are some possible symptoms of ASD.</p>
<p>Psychotic disorders</p>	<p>Psychotic disorders involve distorted awareness and thinking. Two of the most common symptoms of psychotic disorders are hallucination—the experience of images or sounds that are not real, such as hearing voices—and delusions, which are false fixed beliefs that the ill person accepts as true, despite evidence to the contrary.</p>	<p><b>Schizophrenia</b> is a mental disorder often characterized by abnormal social behavior and failure to recognize what is real. Common symptoms include false beliefs, unclear or confused thinking, auditory hallucinations, reduced social engagement and emotional expression, and inactivity. Diagnosis is based on observed behavior and the person’s reported experiences.</p> <p><b>Alzheimer’s</b> is a neurodegenerative disorder that affects the elderly. Symptoms include</p>

		disorientation, memory loss, mood swings, and difficulty with language.
Impulse control disorders	The diagnosis of impulse control disorders is used to describe the inability to resist impulses or urges and performing acts that are considered harmful to oneself or to others. People often become so wrapped up in something that they can no longer focus on anything else, neglecting their relationships and responsibilities.	Some examples of impulse control disorders are starting fires (pyromania), stealing (kleptomania), and uncontrollable gambling.

The following two considerations regarding mentally ill individuals are important for police:

**Credibility.** Symptoms of mental illness may cause individuals, including police officers, to perceive situations inaccurately. Officers would be wise to verify questionable information. However, assuming that a person who has mental illness is incapable of providing credible information could lead to the loss of valuable information and the neglect of persons who have been victimized.

**Risk of Violence.** Although persons with mental illness, particularly those who are experiencing particular psychotic symptoms and abusing drugs and alcohol, have increased rates of violent behavior, most are not violent. At the same time, police officers must assume that all citizens they encounter may be dangerous, because the price of letting down their guard is too high. Unfortunately, exaggerated perceptions of dangerousness may lead to behaviors that escalate the situation. Addressing these perceptions through education and opportunities for positive contact with persons with mental illness who are stable in the community can improve officers' comfort in approaching a person with mental illness. Skills training in the recognition of mental illness, coupled with effective communication and de-escalation strategies, will assist officers in successfully resolving situations with mentally ill persons who are in crisis.

### **CRISIS INTERVENTION TRAINING (CIT)**

Many police departments today recognize that not all officers are equally skilled in de-escalation or with interacting with mentally ill persons in crisis. The Memphis Police developed a program that is now used by many police departments across the nation to more effectively use resources and guide law enforcement when dealing with mental illness/crisis situations. This program is known as Crisis Intervention Training (CIT).

The CIT program provides additional training for police officers that covers the different types of mental illnesses, medications, public resources, and scenario-based training that enables officers to

be certified for specialized in dealing with these cases. When patrol officers encounter situations involving individuals with mental illness, they may request a CIT officer to respond and assist with the individual or family members. Ideally, CIT officers are officers who are interested and want to specialize in this element of training. Oftentimes they know someone or have relatives who suffer from a mental illness, and therefore have an increased level of empathy or understanding with these individuals. Safety is always paramount for police, whether they are CIT trained or not.

## **SUICIDE PREVENTION**

Law enforcement officers often deal with situations involving an individual who is suicidal. These include:

- A person is communicating a desire or intent to attempt suicide.
- A person has just made a suicide attempt.
- A person has died by suicide.

In a significant number of cases, officers receive a call that is not described as a suicidal crisis, but rather as a general disturbance, domestic violence, or similar type of situation. Upon arriving at the scene, the officers need to determine whether the situation involves someone who is suicidal.

The officer has an important role to play in all of these situations. It is generally considered to be within the scope of a law enforcement officer's duty to protect the safety of the community as a whole, as well as individuals. The officer's first responsibility is to deal with any safety issues that may affect law enforcement personnel, the person who is suicidal, or others present at the scene, especially if the person has immediate access to lethal means. The officer can also provide clarity and support to the person who is suicidal and the other people who are there. After the crisis, the role of the officer, along with EMS providers and mental health professionals if they are present, is to ensure the suicidal person receives an evaluation as soon as possible.

## **FACTS ABOUT SUICIDE**

- Suicide touches everyone—all ages and incomes; all racial, ethnic, and religious groups, and in all parts of the country.
- Suicide takes the lives of about 38,000 Americans each year (CDC, 2010).
- About 465,000 people per year are seen in hospital emergency departments for self-injury (CDC, 2010).
- Each year, over eight million adults think seriously about taking their life, and over one million make an attempt (NSDUH, 2011). However, there is help and hope when individuals, communities, and professionals join forces to prevent suicide.

## **PREPARING AHEAD OF TIME**

Review the protocols and standard operating procedures required by your law enforcement agency and in your state and local area for responding to a person with suicidal thoughts, a person who has made a suicide attempt, or a death by suicide.

Learn how you should deal with a suicidal person who refuses to be transported for an evaluation.

Meet with your local emergency medical services (EMS) providers to discuss how you can work together to help people who are suicidal, including those who refuse to be transported.

The following are warning signs that a person may be suicidal:

- Acting anxious or agitated; behaving recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings

(Adapted from National Suicide Prevention Lifeline, [n.d.]