

Expanding and Funding Crisis Intervention Teams (CIT) Programs in Tennessee

BACKGROUND

Chronic underfunding of community mental health services has resulted in police serving as the nation's de facto first responders to behavioral health crises.

At least **10% of all police** calls involve a person with mental illness

People experiencing a mental health crisis are more likely to encounter police than medical help

Without the resources police officers need, such as specialized training and alternative diversion options, mental health emergencies can escalate into violence and result in serious injury or death.

Additionally, an estimated 2 million adults with serious mental illnesses are admitted to jails each year.

1 in 4 fatal police shootings involve individuals in a mental health crisis

15% of men and 30% of women admitted to jail have mental illness

A COLLABORATIVE RESPONSE

Established in Memphis in 1988, today there are more than 3,000 CIT programs across the country. The CIT model is founded on strong community partnerships among police, behavioral health providers, and individuals and families affected by mental illness and substance use disorders with the aim of preventing violence, avoiding unnecessary arrests, and improving access to behavioral health services.



CORE COMPONENTS

- A collaborative partnership between police, behavioral health providers, and advocates supporting strategies to link individuals with unmet behavioral health needs or who are experiencing a crisis to appropriate services
- A therapeutic drop-off site where officers can transport people experiencing a behavioral health crisis as an alternative to jail or emergency departments
- Voluntary, specialty training for police, 911 dispatchers, other first responders

CIT WORKS

CIT programs are an effective intervention for diverting people in crisis from jail. Police who receive CIT training are significantly more likely to transport a person to a treatment facility or refer them to services in the community, and less likely to make an arrest than officers without training. CIT programs:

- **Improve officer-level attitudinal & behavioral outcomes** — Participation in CIT improves officers' knowledge, attitudes and stigma regarding certain mental health conditions. Several studies have demonstrated significant reductions in use of force preferences and perceived effectiveness of physical force among CIT-trained officers.
- **Better identification** — Several studies examining dispatch and police call data pre/post CIT program implementation found significant increases in identified mental health calls, transports to emergency treatment, and proportion of transports that were voluntary.
- **Produce cost savings** — Produce cost savings Incarceration is costly compared to community-based treatment. One study estimates that the CIT program in Louisville, KY saved \$3.5 million annually in deferred hospital and jail costs.
- **Reduce officer injury** — Adopting CIT improves occupational health outcomes of police officers by improving their ability to safe de-escalate situations without resorting to the unnecessary use of force.
- **Work in rural communities** — Many rural communities have created regional collaboratives. Statewide CIT efforts can play an important role in supporting local and regional CIT programs, particularly in rural communities with fewer available behavioral health resources.

CIT in TENNESSEE

In Fiscal Year 2019-2020, the Tennessee General Assembly granted NAMI Tennessee \$150,000 to establish a new statewide CIT program. Here is what we have accomplished:

- We hired a full-time CIT coordinator
- We established task forces in eight counties: Weakley, Obion, Tipton, Sevier, Sumner, Grundy, Franklin, and White
- Three CIT trainings have taken place for officers and first responders;
- We are cultivating task forces in Clarksville and Williamson and Hamblen counties.

Why are we pursuing \$200,000 in Fiscal Year 2021-2022?

This funding would allow NAMI Tennessee to continue funding a full-time CIT statewide coordinator and project consultant (ret.) Major Sam Cochran, a national CIT expert. Our request for additional funding will help rural law enforcement departments defray the cost of sending officers to CIT training.

THE ASK: It is requested that \$200,000 be appropriated annually in the state budget to TDMHSAS to support CIT program implementation activities, including support for a full-time statewide CIT coordinator.