

Crisis Intervention Teams (CIT)

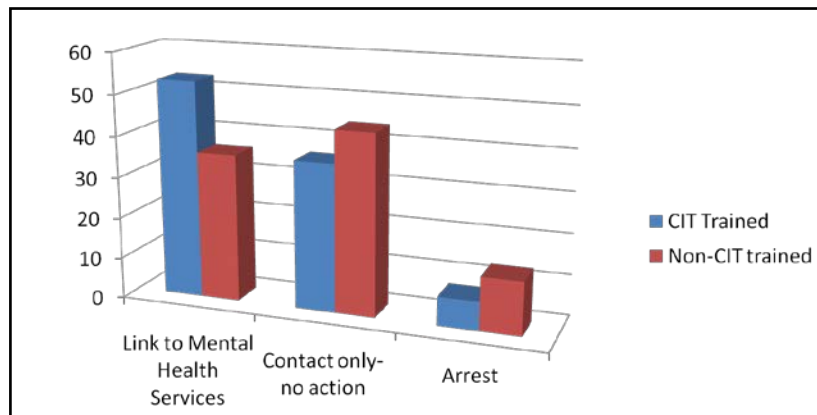
What is CIT? *A vital program for the city of Chicago!*

- **CIT (Crisis Intervention Team)** is a Chicago Police Department 40-hour training program which educates officers on effectively responding to mental health crises and develops collaborations between law enforcement and community mental health agencies.
- **CIT is city-wide.** More than 1,400 officers have completed CIT training across all 25 police districts in the city of Chicago, and some suburbs. Chicago has the largest CIT force in the nation.
- Advanced CIT training programs specifically for **juvenile** and **veteran** populations (40-hours each) have also been developed and implemented by the Chicago Police Department. These are the first such advanced training programs in the nation.

Why support CIT? *It makes a difference!*

IMPACT OF CIT ON 911 CALL OUTCOMES IN CHICAGO

- Federally funded research on Chicago’s CIT program (Canada, Angell & Watson, 2010; Morabito, Kerr, Watson, Draine, & Angell, in press; Watson, Ottati, Morabito, Draine, Kerr & Angell, 2010) found that compared to their non-CIT trained peers, CIT-trained Chicago Police Officers:
 - Directed people to mental health services 18% more often (a statistically significant effect)
 - Reported feeling better prepared to respond without needing to resort to use of force
 - Used less force when subject agitation/resistance increases
- Based on one month of data from mental health related calls, the graph below demonstrates the difference in outcomes by Chicago’s CIT-trained officers and non CIT-trained officers regarding linkage to mental health services, contact only, and/or arrest (Watson, et al 2010):



- This data indicates that **CIT officers are more likely to link citizens to mental health services** than their non-CIT trained colleagues.

IMPACT OF CIT NATIONALLY

- **CIT is evidence-informed.** CIT has become the most widely recognized and adopted best practice model of specialized police response (Compton et al 2011).
- Research on CIT at the national level demonstrates that it:
 - Reduces injuries to officers and to persons experiencing a mental health crisis
 - Reduces arrests and diverts more subjects from criminal justice system
 - Improves the knowledge, attitudes and confidence of officers
 - Increases linkage to psychiatric services
- **CIT improves mental health outcomes.** Research has demonstrated that diversion from jail through CIT leads to a significant improvement in psychiatric symptoms after a 3-month period (Crowell, Broner, & Dupont, 2004).
- **CIT intervention and subsequent treatment match the cost of sending a person to jail without treatment.** A study examining cost effectiveness of diversion programs compared the cost of jail alone to the cost of CIT intervention and subsequent treatment. No significant difference in cost was found between the two options—CIT intervention is not more expensive than jail alone (Crowell, Broner, & Dupont, 2004).

Officer attitudes toward CIT

- CIT and non CIT-trained officers were asked for their opinions of the CIT program. The majority of Chicago police officers asked had **positive opinions** about the program (Watson & Kerr, 2009).
 - **Improves effectiveness of my district in responding to persons with a mental illness**
 - 91.5% agree or strongly agree
 - **Is a good program for my district**
 - 96.2% agree or strongly agree
 - **Reduces the risk of officer injuries**
 - 87.6% agree or strongly agree
- Chicago CIT-trained officers say:
 - ***“CIT is the best training I have received since I came on the department 20 years ago.”***
 - ***“I use the training I received in CIT every day.”***
 - ***“This CIT training has made me a better officer.”***

What can you do?

- Contact your local officials and tell them you support CIT and would like them to advocate for increased staffing and resources for the Chicago Police Department CIT program.
- Urge that OEMC call takers be trained to dispatch CIT trained officers in the case of a mental health crisis.
- Write a letter to the Mayor and Police Superintendent in support of CIT.
- Contact NAMI Chicago for a sample letter or more information.

Citations:

1. Canada, K, Angell, B & Watson. AC (2010). Crisis Intervention Teams in Chicago: Successes on the ground. *Journal of Police Crisis Negotiations*. 10 (1-2) 86-100.
2. Compton, M.T., Broussard, B., Munitz, M., Oliva, J.R. & Watson, A.C. (2011) The Crisis Intervention Team (CIT) Model of Collaboration between Law Enforcement and Mental Health. In *Police Practices and their Impact on Society*. Hauppauge, NY, Nova Science Publishers, Inc.
3. Crowell, A. J., Broner, N., & Dupont, R. (2004). The cost-effectiveness of criminal justice diversion programs for people with serious mental illness co-occurring with substance abuse. *Journal of Contemporary Criminal Justice*, 20, 292-315.
4. Morabito, M..S, Kerr, A.N., Watson, A.C., Draine, J., Angell, B. (in press). Crisis Intervention Teams and People with Mental Illness: Exploring the Factors that Influence the Use of Force. *Crime & Delinquency*.
5. Watson, A.C., Ottati, V.C., Morabito, M., Draine, J., Kerr, A.N., Angell, B. (2010). Outcomes of police contacts with persons with mental illness: The impact of CIT. *Administration and Policy in Mental Health and Mental Health Services Research*. Vol 37 (4) p302-317. DOI10.107/s10488-009-0236-9.
6. Watson, A.C. & Kerr, A.N. (2009). Research Brief: CIT in Chicago. Crisis Intervention Team response to persons with mental illness. University of Illinois at Chicago.