

Where We Stand:

NAMI believes in minimizing justice-system response to people with mental illness, while ensuring that any interactions preserve health, well-being and dignity. NAMI supports policies that reduce and prevent use of force by law enforcement during interactions with people with mental illness.

Why We Care:

Mental illness is not a crime; however, contact between law enforcement and people with mental illness is all too common. Often, these interactions include a person in crisis, and the situation can escalate and result in law enforcement using force. Estimates show that people with serious mental illness are [over ten times](#) as likely to experience use of force in interactions with law enforcement than those without serious mental illness.

This disproportionate impact is partially due to how [officers interpret](#) symptoms. For example, someone experiencing a mental health crisis can appear hostile or resistant, and their symptoms can interfere with their ability to respond to commands. Tragically, use of force can become lethal. Between 2015-2020, a [quarter](#) of all fatal police shootings involved someone with a mental illness.

Police training has been a central part of efforts to improve law enforcement's response to people with mental illness. Trainings can provide law enforcement with skills in de-escalation and other techniques that reduce the need to use force. Many states and local governments have minimum requirements for this training, and many law enforcement agencies include these trainings without a requirement by law. Skills-based trainings, such as [Crisis Intervention Team \(CIT\) training](#), educate officers about mental illness as well as methods of [de-escalation](#).

Creating a culture that focuses on reducing use of force, whether established by leadership or through official agency policy, can have a significant impact on day-to-day operations of law enforcement. Some agencies have adopted policies on valuing the [sanctity of life](#) as a core part of their mission. Creating this

mindset can support officers in making decisions in the field that prioritize the safety and dignity of individuals they encounter.

NAMI supports policies that reduce and prevent use of force by law enforcement during interactions with people with mental illness.

Assessment and evaluation of tactics used by law enforcement can help identify when a tool or tactic should no longer be used. There are many previously acceptable law enforcement tactics that are no longer considered safe. For example, [chokeholds and carotid holds](#), which are physical restraint techniques that apply pressure to the neck restricting the airway or blood flow to the brain, had been a routine part of law enforcement training, but are now banned or restricted by [nearly half](#) of the nation's largest police departments, as well as the [U.S. Department of Justice](#). Stun guns (also known as tasers), which were believed to be a less harmful alternative to a gun, have begun to be viewed as a more [harmful tool](#) than previously thought.

Use of force disproportionately impacts people with mental illness. Law enforcement leaders and policymakers at all levels should prioritize policies that prevent use of force when law enforcement is responding to a person in a mental health crisis to reduce trauma and tragedy.

To learn more about NAMI's work on this issue, visit www.nami.org/Advocacy/Policy-Priorities