INTRODUCTION: BEATING MENTAL ILLNESS SYMPOSIUM

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On April 7–8, 2016, the Saks Institute for Mental Health Law and Policy (“Saks Institute”), the University of Southern California (“USC”) Suzanne Dworak-Peck School of Social Work (“School of Social Work”), and PRISM, the USC Initiative for the Study of Race, Gender, Sexuality, and the Law (“PRISM”) convened a conference entitled Beating Mental Illness: A Dialogue on Race, Gender, and Disability Stereotypes in Police Use of Force Cases.¹ The conference brought together policymakers, mental health care providers and consumers, legal practitioners, scholars, activists, and members of the law enforcement community to discuss how to improve police performance when interacting with persons suffering from mental illnesses. Participants were specifically challenged to consider the ways stereotypes about mental illness, as well as stereotypes about race and gender, increased the risk of using inappropriate police force in citizen and police encounters. In addition, participants were asked to reflect on the often-deadly consequences of mistakes made in these interactions.

The conference sponsors’ prior work, as well as the constituencies they draw together in the conversation, ensured that we would have a lively, complex, and sometimes challenging series of conversations at the conference. The Saks Institute for Mental Health Law, Policy, and Ethics has long been recognized as a national leader in facilitating conversations about the need for ethical, sensitive approaches to mental health treatment, as well as spurring dialogue about the cultural and political changes required to accord persons living with mental illness the respect and dignity they deserve.² The School of Social Work, under the leadership of Dean Marilyn Flynn, has been at the forefront of conversations in the Los Angeles area about the plight of homeless Americans, many of whom suffer with mental health challenges.³ Additionally, the School of Social Work and the Saks

¹ A description of the conference and video recordings of the presentations can be accessed at Beating Mental Illness (2016), http://weblaw.usc.edu/who/faculty/conferences/beating-mental-illness/ [hereinafter Beating Mental Illness].
³ The USC School of Social Work has a research cluster devoted to housing, homeless and social environment. One of the cluster’s central areas of focus is the behavioral health challenges experienced by Los Angeles’s homeless population. See Homelessness, Housing, and Social Environment, USC SUZANNE DWORAK-PECK SCH. OF SOC. WORK, https://sowkweb.usc.edu/research/research-clusters/homelessness-housing-and-social-environment (last visited Oct. 6, 2016). See also Susan L. Wampler, USC Summit Launches Multi-Pronged Partnership to
Institute have engaged in active dialogue with city and state officials, as well as police departments, about ways to transform law enforcement procedures to better accommodate and support persons living with mental health challenges. Moreover, PRISM has attempted to spur further conversation about various critical race theory constructs, including intersectionality, to develop more nuanced conversations about the roots of social inequality. In this conference, PRISM’s goal was to show how disfavored identities, such as race, gender, and mental health, combine to create particularly thorny kinds of disadvantage, risk, and vulnerability. To this end, PRISM encouraged conference participants to explore the ways assumptions about race and gender shape our social perception of mental health and mental disability.

The organizers felt that Beating Mental Illness could provide a unique addition to contemporary dialogues about police “use of force” and “police brutality” because media coverage and, to some degree, even scholarly discussion has consistently tended to privilege race and race discrimination as reasons for excessive violence in police-citizen interactions. Politicians ranging from Hillary Clinton to Newt Gingrich have recognized as much.

Race unfortunately has played a critical role in many significant cases; however we also noticed that many of the most discussed and most troubling
police violence cases involved minority men and women that were also suffering from some form of mental illness. We believed that we needed a space for deeper conversation about the ways race, gender, class, and mental health status can combine to create unique forms of vulnerability for certain Americans. Wealthy persons suffering from mental illness can rely on a broad array of private resources to meet their needs and have stable housing that protects them from police surveillance. In contrast, mentally-ill Americans who are homeless, a group that is disproportionately black and male, are often out on the street, in constant contact with officers. As a result, they are more likely to be perceived as disruptive of good order or as a physical threat.

Statistics confirmed the basis for our concerns. The 2015, Los Angeles Police Department (“LAPD”) Use of Force Report revealed that nineteen percent of fatal police shootings by the LAPD involved blacks or African-Americans, and fifty-seven percent involved latinos. In total, this means seventy-six percent of officer-involved fatal shootings in Los Angeles in 2015 involved blacks and latinos. However, the report also indicated that more than thirty-three percent of fatal police shootings in Los Angeles involved persons suffering from some form of mental illness or disability. While precise data on the overlap in these categories was not available, it is clear that a significant portion of the mentally-ill persons killed by police were minorities, persons suffering unique intersectional advantages at the intersection of mental disability, class, race, and gender. With this in mind, we wanted to encourage conversations that consider excessive force as the product of multiple variables coming together and interacting in ways that increase the risk of violent conflict for certain Americans. Our conversations stressed that effective police training should certainly address mental health issues and racial bias but more importantly, it must consider how stereotyping from multiple vectors creates a unique risk of injury.

Examples make this point clear. In Los Angeles, many residents were shocked by the police brutality allegations in the Marlene Pinnock case. Pinnock, a fifty-one-year-old African-American woman who suffers from bipolar disorder, was homeless at the time of her interaction with officers in 2014. Pinnock had been off her medication for close to three months when

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9 Id.
she encountered California Highway Patrol Officer Daniel Andrew, who had been called to remove her from the side of the I-10 Freeway. Some reports suggest she was walking on the highway in an attempt to access a homeless encampment nearby. After Pinnock failed to comply with Andrew’s command to get off the highway and get down on the ground, Pinnock was mounted by Andrew and repeatedly punched in the face. Pinnock reported the assault was brutal enough to make her fear for her life. The California Highway Patrol later settled Pinnock’s case for $1.5 million and Andrew resigned. However, no criminal charges were filed against him. Many who viewed the footage were shocked that a woman old enough to be a grandmother, who was obviously in need of mental health treatment and who had never acted aggressively toward the officer, was treated with such extreme force.

Others recall the story of Charley “Africa” Keunang, another mentally unstable homeless person in Los Angeles killed during a police incident. Keunang, a Cameroon national, was shot outside of his tent on Skid Row in March 2015. Officers encountered him while responding to a 911 call reporting a robbery. After a brief struggle, an officer mistakenly reported Keunang had grabbed his gun. Police then fatally shot Keunang. Although the officers were ultimately cleared of any wrongdoing, Keunang’s death led the LAPD to revisit its procedures on how to interact with mentally disabled persons. In this case, similar to the Pinnock case, a deadly constellation of factors appeared: race, homelessness, and mental disability. In the prior year, police were faced with similar questions about the death of Ezell Ford, a twenty-five-year-old unarmed black man shot by officers in South Los Angeles. The Los Angeles Police Commission found police had


12 Woman Hit by Cop, supra note 12.


14 Moshtaghian & Snider, supra note 11.

15 Beating Victim, supra note 12; Woman Hit by Cop, supra note 12.

16 Moshtaghian & Snider, supra note 11.


18 Community Wants Answers, supra note 14.


21 Id.

22 Id.

23 Mather et al., supra note 21.

no reason to stop and detain Ford, who had been diagnosed with bipolar disorder and schizophrenia.25

California is not alone in struggling with problems involving police interactions with persons suffering from mental illness. Perhaps the most famous case, on a national scale, involved a young woman traveling through Texas named Sandra Bland. Bland attracted national attention after she committed suicide while in police custody.26 Bland was detained during a routine police stop for failing to signal when changing lanes.27 She refused to put out her cigarette and, as a result, was physically restrained and charged with resisting arrest.28 While many were rightly shocked at the officer’s brutal treatment of Bland during the stop, the jail’s failure to adequately attend to Bland’s depression and suicidal state during her weekend stay in holding was equally tragic. Although jail officials claimed to have monitored her, she was found hanging in her cell less than two days later.29 Many Americans were horrified that a routine traffic stop could result in jail time and her death, and they wondered why the police officer acted so aggressively toward her in the encounter.30 Her family was recently awarded a $1.9 million settlement by the local police department, but part of the settlement requires the jail to undertake new procedures to protect persons suffering from mental illness or trauma in jail.31 Also as part of the settlement, Representative Garnet Coleman has pledged to introduce the Sandra Bland Act during the 2017 session of Congress.32 In particular, the bill will propose protocols for better addressing the needs of citizens with mental health issues that are involved in the criminal justice system, including diversion programs and instruction for officers on de-escalation techniques when arresting persons with mental illness.33

These cases of police violence are tragic, prompting recognition by officials that more training is required and more creative approaches are needed to ensure that officers act appropriately when they encounter individuals suffering from mental disabilities. Much of the conference discussion, including the keynote address by Los Angeles District Attorney Jackie Lacey, focused on new approaches, such as Crisis Intervention Training (“CIT”), mental health diversion programs, and mental health courts.34 The panels and sessions created for the event were designed to present a balanced perspective by exploring the training offered, celebrating

26 Josh Sanburn, Everything We Know About the Sandra Bland Case, TIME (July 23, 2015), http://time.com/3966220/sandra-bland-video/.
27 Id.
28 Id.
29 Id.
33 Id.
34 See Beating Mental Illness, supra note 1.
progress, and acknowledging the challenges ahead. Opportunities were provided to explore the training currently offered to officers and possible alternatives, to explore whether necessary funding for officer training has been allocated, and to examine deeply political questions about how and when specially-trained CIT officers are currently deployed.

In the course of our discussions, we encountered challenges that taught us a great deal about the hard work it takes to build the bridges necessary for dialogue. Different stakeholders in the community of persons concerned about this issue use different language and have dramatically different views in some cases about the causes for concern. One major issue we encountered was the importance of language in these debates. Our original conference title was *Beating Mental Illness: Race, Gender, Ethnicity, and the Politics of Police Brutality*. When announcements were sent out, certain police officers and representatives of police departments indicated that they were reluctant to attend the conference or participate in conversation if the term “police brutality” was used to talk about some of the recent cases involving police violence and persons with mental illness. However, many of the invited activists and scholars felt it was essential to call these cases “police brutality cases” because the police preferred terminology, “use of force cases,” tended to sanitize these conflicts and empty them of their historical and political context. Some of these persons argued that the long history of police violence against African-American and Latino communities was more appropriately signaled by the term “police brutality.” They argued that the neutral term, “use of force,” pretended to suspend judgment about the illegitimate use of force in clearly egregious cases. We concluded that some compromise on language was necessary to ensure police participation, and the conference title changed to *Beating Mental Illness: A Dialogue About Race, Gender and Mental Health Stereotypes in Use of Force Cases*. Despite this change in name, police participation in the symposium remained lower than we expected. This result raises future questions about how to make decisions in these language debates.

The event began with an opening plenary called *Intersectionality Issues in the Black Lives Matter Movement*, which explored the ways in which Black Lives Matter activists have attempted to represent how the role gender issues and mental disability issues play in excessive force cases. Panel discussion was led by Renee Smith Maddox, Clinical Associate Professor at the School of Social Work and included remarks from Mario Barnes, Professor of Law and Co-Director of the Center on Law, Equality and Race at the University of California-Irvine School of Law, who provided a critical genealogy exploring the evolving voice of the movement. In addition, there were direct accounts from Professor Melina Abdullah, Chair of Pan-African Studies at California State University-Los Angeles and key member of the Black Lives Matter Movement, and from Pete White, Founder and Co-Director of Los Angeles Community Action and also key member of the

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35 *Beating Mental Illness*, supra note 1.
Black Lives Matter Movement. 36 A follow up discussion was led by Professor Jody Armour, professor at USC Gould School of Law. 37

The following day, participants joined in four panels. The morning began with Race, Gender and Sexual Orientation Stereotypes in Use of Force Cases which featured Rabia Belt, Stanford Law School; Carmelo Valone, Author and Activist, Master of Social Work candidate, USC School of Social Work; G.S. Potter, Ph.D., Community Activist and Educator, and Lawrence Carter-Long, co-author, Ruderman White Paper on Media Coverage of Law Enforcement Use of Force and Disability. 38 Additionally, we explored the efficacy of one of the key officer training models used around the nation—Crisis Intervention Training. The panel was led by our moderator, Kimberly Finney, Clinical Associate Professor at the School of Social Work. Panelists included Detective Charles Dempsey, Officer in Charge, Crisis Response Support Section, Mental Evaluation Training Detail, LAPD; Linda Boyd, Mental Health Clinical Program Head, Los Angeles County Department of Mental Health and Claudia Center, J.D. Senior Staff Attorney, Disability Rights Program, ACLU. 39 Some of the remarks from this session are reflected in this volume in Officer Dempsey’s submission, Beating Mental Illness—Crisis Intervention Team Training and Law Enforcement Response Trends, exploring the complexities of offering training to officers that is sensitive to the challenges of persons with mental disabilities. 40 As he explains, a key part of the challenge is remaining within the constraints of norms and protocols for training officers on threat assessment and containment while developing approaches that are sensitive to mental health challenges. 41

As mentioned above, our keynote speaker for the conference was District Attorney Jackie Lacey, who discussed the innovative diversion programs she has created directing persons with mental health challenges away from jail and into treatment facilities. 42 Lacey has faced some controversy regarding her decision not to charge some of the officers involved in controversial use of force cases in Los Angeles, but she was also hailed by many at the conference as a visionary and leader in changing police practices with regard to persons with mental illness. 43

Our third panel explored causes of the current crisis, specifically why mentally disabled persons are subject to particularly focused police scrutiny. 44 This panel, Mental Health Services “Wanted: Criminal Justice System Gap-filling, was led by Rafael Angulo, professor at the School of

36 Id.
37 Id.
38 Id.
39 Id.
41 Id.
42 Beating Mental Illness, supra note 1.
44 Beating Mental Illness, supra note 1.
Social Work. Exciting contributions were provided by Risdon Slate, Ph.D., Professor of Criminology, Department Chair, Florida Southern College; Mark Gale, Criminal Justice Chair, NAMI Los Angeles County Council; and David Meyer, J.D., Clinical Professor, Coordinator of Psychiatry and Criminal Law Training, USC Institute of Psychiatry, Law, and Behavioral Science. Much of the spirited debate that followed about causes and solutions to the crisis are included in this volume in Professor Blanck’s and Professor Slate’s submitted articles.

Our last panel of the day, Disability Rights Litigation and Use of Force Cases, featured Ann McGinley, J.D., William S. Boyd Professor of Law, UNLV Boyd School of Law; Peter Blanck, Ph.D., J.D., University Professor & Chairman, Burton Blatt Institute, Syracuse University; and Leonard Feldman, J.D., Partner at Peterson, Wampold, Rosato, Luna, & Knopp. While only some of the participants’ presentations are memorialized here, all are available as recordings on the conference website.

The urgent need to address stereotyping risks became even more apparent during a break in one of the sessions when a mental health consumer was given leave to deliver remarks to the audience and was loath to cede the stage without finishing his remarks. Understandably angry at being cut short, the speaker issued a few strong words to the conference organizers that attempted to ask him to leave the stage. Within minutes, police officers arrived at the doors of the conference hall ready to intercede. Because of the strong support for the speaker and our sensitivity to his need to speak, he was allowed to continue and the officers were asked to leave the conference area. However, the speed with which someone made a call for assistance, the quick response of the officers on call to the claim that a disruptive “mentally-ill” person was threatening the order of the proceedings, made the urgency of the conference topic all the more clear. Persons with mental health challenges are often quickly labeled as violent threats. These stereotypes about mental illness grow even more deadly when combined with stereotypes about race and class.

Recently, even more cases of police violence have occurred in circumstances that have drawn fire from concerned citizens. Some of these cases result in justice for the victim of the officer’s brutality. For example, the death of Terrence Crutcher, an unarmed black man who showed no apparent sign of aggression, resulted in the indictment of the officer charged with shooting and killing him. The officer involved alleged she used force because she perceived Crutcher to be mentally disabled and to be under the

45 Id.
46 Id.
48 Beating Mental Illness, supra note 1.
49 Id.
influence of the drug PCP.\textsuperscript{51} By contrast, many of these officers’ actions go unquestioned. For example, Charles Kinsey, another African-American man, was shot while attempting to protect a mentally-disabled latino man, resulted in the exoneration of the officer involved and a civil-rights case being filed.\textsuperscript{52} The media continues to reveal cases of controversial police conduct, many involving non-violent citizens subject to deadly force without apparent provocation.\textsuperscript{53} Race continues to be a critical lens for understanding these stories. However, we must also better understand and address the ways that race, gender, and mental health form a deadly combination that leaves some Americans, in particular African-American men and women, more acutely at risk. We must find ways to improve education and training if we intend to end the deadly effects of stereotypes and bias in police-citizen interactions. We must be attentive to the politics of language in organizing these debates or we risk losing important constituencies participation. Finally, we must remain humble and open to learning new information. The urgency of this project is undeniable as the tally of lives unnecessarily lost rises. Hopefully, through frank dialogues like the ones that occurred between the conference participants, we can find ways to avoid the mistakes of the past and chart a new future.

\textsuperscript{51} Id.
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