



*An officer and co-response clinician preparing to go to a 911 call.*

## The Advocates Co-Response Program Model

# CULTURE CHANGE

Ongoing data collection and analysis have demonstrated the success of the Advocates co-responder model, not just for community members with mental health needs but also for the culture of police departments. Police attitudinal and satisfaction research was conducted in Advocates' Co-Response in 2010 and 2016. It demonstrated to a statistically significant degree that the presence of the Co-Response program has decreased police officer authoritarianism and increased police officer confidence on calls for service involving individuals in crisis.

Officers cite the immediacy of the response, their familiarity with the clinicians, and the clinicians' ability to de-escalate situations as the most important components of the Co-Response model.

**93%**  
of Co-Response Police Officers **found the clinician helpful**

**91%**  
of Co-Response Police Officers **found the services helpful**



It is so helpful to have immediate access to social workers as sometimes we're tied up at that call for an extended period of time, and they're the trained professionals and resolve it much quicker than me alone."

MARLBOROUGH POLICE OFFICER

### Effect of the ASHH Co-Response Program on Police Officer Attitudes toward the Mentally Ill

A before and after questionnaire was administered in 2015 during police roll calls in Ashland, Sherborn, Holliston, and Hopkinton to measure the effects of a pre-arrest, Co-Response Program.

The table below displays each domain of the Community Attitudes Towards the Mentally Ill (CAMI) and Dorothy Cotton's research on police attitudes towards the mentally ill scales. The CAMI scale is a five-point Likert scale measuring each theme by combining responses, and the Cotton scale measures police officers' attitudes towards the mentally ill.

The scales range from strongly disagree (1) to strongly agree (5). There was a significant increase in the compassion score — 15 percent — after one year of the Co-Response program. Additionally, all of the scores moved in the desired direction.

**Before and After Year One of ASHH Co-Response Program Operations**

	<b>Avg. Score Before</b>	<b>Avg. Score After</b>	<b>% Change</b>
Compassion	2.06	2.21	15%
Kindness	2.74	2.83	9%
Perceived Dangerousness	2.99	2.90	-8%
Community Inclusion	3.04	3.05	1%
Tolerance	3.48	3.59	11%

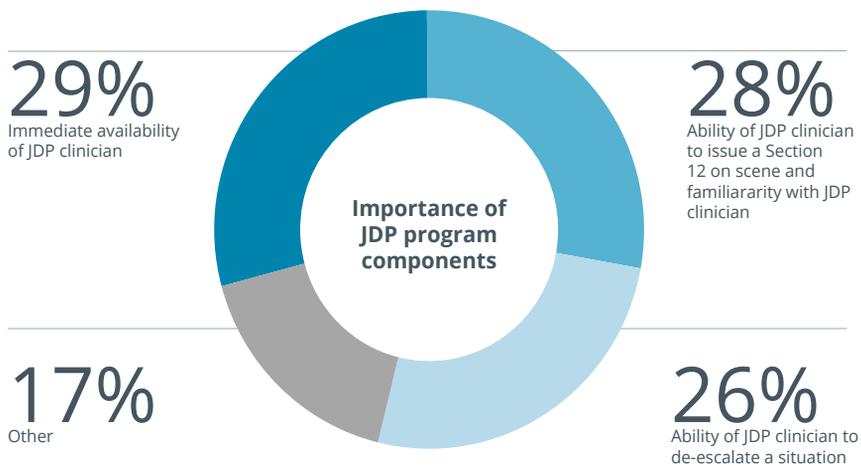


*A co-response clinician conducting an in-cell assessment.*

## The Advocates Co-Response Program Model

### What Police find important about the Co-Response Program

ASHH Co-Response study participants were asked to rank the different components of the program model in order of importance to them as police officers. The chart below shows the distribution of their 'first importance' rankings.



It makes it easier for me to talk with people dealing with mental health issues knowing that I have a social worker with me. It also makes it easier for that individual to talk to a social worker instead of a police officer."

MARLBOROUGH POLICE OFFICER

*Overall, the program has shown a beneficial and positive impact for police officers and by default is impacting the way they view and respond to calls for service involving individuals in a behavioral health crisis.*

## CONTACT

**Sarah Abbott, Ph.D.**  
Program Director  
SAbbott@Advocates.org  
(508) 922-6689

**Co-Response Training and Technical Assistance Center**  
85 Swanson Road, Suite 140  
Boxborough, MA 01719  
(978) 391-5074

[www.JailDiversion.org](http://www.JailDiversion.org)  
[www.Advocates.org](http://www.Advocates.org)

