What Is “Mental Illness”? 

- Any mental illness (AMI) is defined as a mental, behavioral, or emotional disorder. AMI can vary in impact ranging from no impairment to mild, moderate, and even severe impairment. (1)

- Serious mental illness (SMI) is defined as a mental, behavioral, or emotional disorder resulting in serious functional impairment, which substantially interferes with or limits one or more major life activities. The burden of mental illnesses is particularly concentrated among those who experience disability due to SMI. (2)
For Example…

- ADHD
- Anxiety Disorders
- Bipolar Disorders
- Borderline Personality Disorder
- Depression
- Dissociative Disorders
- Early Psychosis & Psychosis
- Eating Disorders
- Obsessive-compulsive Disorder
- Posttraumatic Stress Disorder
- Schizoaffective Disorder
- Schizophrenia

What Is “Substance Use Disorder”?

- Intense, enduring, and often irresistible desire for subjective effects of substances (cravings);
- Impaired insight;
- Poor judgment and risky decision making about substance-seeking behavior;
- Markedly reduced desire for naturally rewarding social relationships and activities;
- Reduced sensitivity to euphoric effects of substances over time (tolerance);
- Uncomfortable and sometimes life-threatening withdrawal symptoms that develop when stopping substance use;
- Negative emotions when unable to obtain access to substances;
- Compulsive substance seeking that persists despite repeated damaging consequences to self, family, and society; and multiple relapses (2).

(2) American Psychiatric Association, 2013; Crean, Crane, & Mason, 2011; Goldstein et al., 2009; Kalivas & O'Brien, 2008; Koob & Volkow, 2010; National Institute on Drug Abuse [NIDA], 2011; Schoenbaum, Roesch, & Stalnaker, 2006; Tiffany & Wray, 2012; Volkow & Li, 2004)

2016 Prevalence of Mental Illness & Substance Use Disorders In Adults In US

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5062605/
Victimization of people with a mental illness

- Around a quarter of people with mental illness had experienced recent physical violence—a 4-fold increased risk compared to those without mental illness—around 6% had experienced recent sexual violence and nearly 40% had experienced recent intimate personal violence. (3)
- Women with severe mental illness are more likely to be sexually victimized than males with the same conditions or than either gender in the general population. (3)

Victimization vs Victimization

- Individuals with serious mental illness are 11 times more likely to be victims of a violent crime than the general public. AND Women with serious mental illness are more at risk than men. (4)
- Psychiatric disorders were associated with increased risk for emotional and physical violence and psychiatric hospitalization. (5)

Victim & Survivors In the Criminal Justice System

-Incarcerated Women with Past Sexual Assault Victimization as an Adult (6)
We identified a problem
NOW WHAT

Very few training programs include victimology let alone how it connects to MENTAL ILLNESS

INVESTIGATIONS

Set the Stage - Safe room

Make sure victim wants to be there and you have their permission

RECORD INTERVIEW

Have Monitor (outside room)

Offer Victim Advocate

NO "WHICH" DIFFERENT THAN OTHER INVESTIGATIONS

Avoid pitfalls

DON'T TALK YOURSELF OUT OF THE CASE

Think, Logic, and listen to the words

Make eye contact

Positive body Language

Use their Terminology

Have a conversation NOT INTERIGATION
If Mental Illness Identified

Educate yourself about mental illness
How to better communicate

Forensic Interview
Take neutral stance
Open-ended questions
Open-ended prompts: "Tell me more about that"

INCONSISTENCIES

As they say: Softly massage through the areas to clarify inconsistencies as they arise

The amazing Brain
The information going into the victim's brain during a sexual assault is traumatic, threatening, and horrifying. The amygdala controls emotions and feelings, sending signals to the hypothalamus and pituitary-hypothalamic axis. This results in a hormonal flood in the victim's body (catecholamine: high levels), which is helpful for the fight or flight response but impairs the circuits in the brain that control our rational thought process. Opiates, hormones that act like natural morphine, are released at high levels, preventing emotions from coming through. High levels of corticosteroids, a group of steroid hormones that reduce energy available to the body, can trigger a full shutdown in the body.
TONIC IMMOBILITY

Tonic Immobility is not a choice.
Increased breathing, eye closure, muscular paralysis.
Victim can not move.
Research shows that an average of 50% of rape victims experience some form of Tonic Immobility.

Factor in Mental Illness

These physical responses are instantaneous and natural responses to an outside threat.
There is no way to know how a victim will react during an attack.

Remember

Their reality may not be your reality but that does not mean they are wrong.
How Law Enforcement and Advocacy Can Improve Responses & Decrease Biases

What are potential biases first responders may have?

- Persons suffering MH issues are usually offenders, not victims
- Victim lacks of credibility due to MH symptoms
- Delayed reporting by victim generates doubt
- Confused details mean victim is lying or falsely accusing
- Victim cannot provide accurate details due to MH symptoms
- Victim is calling “again”

How responses can be improved at the organizational level?

- Identify need for culture change within the organization
- Establish community partnerships with mental health providers
- Community engagement on mental health concerns of the community
- Increased training on mental health response
  - CIT
  - Comprehensive advanced response
- Implement innovative response models
  - Mobile crisis team (MCT)
  - Co-response Models/Teams of mental health professionals and police officers
**Tips for first responders…**

- Approach victims from the front
- Maintain eye contact
- Introduce yourself and your role
- Remove the victim from noisy/crowded environments
- Include victims in all conversations
- Explain your actions before proceeding
- Be calm, reassuring, patient, and honest
- Contact someone in their support network
- Ask them what they need to feel safer
- Keep interviews simple, brief, and one-on-one

**Victims’ Rights**

**REMEMBER** that despite paranoia or delusions, the victim may still be able to provide accurate details of the crime.

**Resources**


https://www.ovcttac.gov/views/TrainingMaterials/dspOnline_VATOnline.cfm

**Your Illness does not define you – your strength and courage does.**

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