

# Continuing Education: Integrating Practice Paradigms

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**Abstract:** This paper reflects on a continuing education opportunity that involved mental health professionals and law enforcement officers for mental health crisis training. In this manuscript, I reflect on the benefits and opportunities presented during the session and the various implications for practice.

**Keywords:** continuing education, integrative practice, paradigms, training, mental health

Recently, I participated in a continuing education opportunity with a crisis response unit within the police services designed to respond to and support individuals experiencing a mental health emergency. Though I have previously participated in many crisis intervention courses for mental health professionals, this opportunity was unique, as it involved integration with law enforcement officers who have, historically, been ill-equipped and unprepared to deal with mental health crises. Crisis training courses have been developed and implemented to address this gap and police and first responders have participated in training nationally. One such training program is based on the Memphis Model of Crisis Intervention, which was developed after an individual with a serious mental illness was fatally wounded during an interaction with the police (Dupont & Cochran, 2000).

The training was 40 hours in duration and involved approximately 20 law enforcement officers. Initially, I was nervous as I was outnumbered by many officers, some of them armed, who quite evidently shared a similar “police culture” much different than my own. Many of these officers were members of the critical incident response team (CIRT) and had responded to situations in which individuals with serious mental illnesses were themselves armed and perhaps “dangerous.” Some shared stories of interactions where they had used force to respond to those deemed a threat. Some officers shared harrowing stories in which they had had to use “less-than-lethal ammunition” (pepper spray, rubber bullets, beanbag projectiles, and tasers) to subdue those in crisis who were thought to be a threat. These tactics were obviously much different than the supportive listening and validation strategies I have used on the front lines.

During the training, I learned how officers respond to mental health emergencies in the community and the policies and procedures that govern this practice. I learned about the gaps in current training and the areas in which officers feel they could benefit from more training (for example, specific diagnoses and eligibility criteria for various community services). I had the opportunity to ask many questions related to police response to community crisis calls, and I was eager to answer any questions the officers had related to my experience as a mental health crisis worker. I feel that this opportunity advanced my knowledge of the role officers play in these situations—and, as a result, I feel better equipped to respond to mental health crisis calls that may involve an officer.

This opportunity was among the most enlightening and informative continuing education programs I have attended. This was largely due to the importance of the topic and the differences

in paradigms between the two professions. As a social worker, I am passionate about effective and anti-oppressive approaches to mental health supports, including crisis services. While I am certain many officers are eager to respond safely to those experiencing a crisis, their education and training are much different than the training of a social worker (and vice-versa). As a social worker, I could not ignore the subtle biases that underlined some views toward those with serious mental illness. While I do not believe this was done consciously, we must be careful when linking forms of violence to people with serious mental illness.

Individuals with serious mental illness are often portrayed as dangerous in the media and linking violence and mental illness has the potential to perpetuate discrimination against this population. People with mental illness are not more violent than the general population and, in my own experience as a provider of mental health crisis services, their crises (more often than not) do not require the use of force or any other physical intervention (while I do recognize this may not always be the case whether mental illness is present or not). Thus, it is important that we are mindful of competing paradigms among differing professions, and we must provide alternative points of view for those who work outside of our professional domain. While I was unaware of the different approaches to police intervention for those with serious mental illness, the other participants may not have been aware of the societal and structural issues that impact views and subsequent supports available to those with serious mental illness.

Continuing education programs are often closely aligned with the professional domain in which they occur. For example, in mental health disciplines, it would not be uncommon to attend suicide intervention training and crisis intervention skills training. I believe attending these opportunities is important to develop critical awareness and is a duty we have to our clients and to the profession. Staying up to date with current events and issues in the professional domain is essential to ensure the best outcomes for clients. These sentiments are not new and are likely shared by many social work practitioners.

I expand on this to add that agencies should promote—and practitioners should seek—continuing education opportunities that offer integrative, multi-interdisciplinary teams. Within the biopsychosocial approach to social work practice, practitioners would understandably attend continuing education in nursing, psychiatry, law enforcement, and more. I encourage social work practitioners to get creative and seek opportunities outside of their practice domain and comfort zone. Embracing different paradigms may be challenging for those who are passionate about their value stance, but these crossovers of thought offer the opportunity for growth and development and a better understanding of the functions of various teams.

In summary, historically, continuing education has remained relatively practice specific; however, integrating multiple perspectives and practice domains allows for new opportunities, including collaboration and insight that has the potential to better serve others. While this may be challenging, it provides an excellent opportunity for professionals to critically evaluate their own value stance and the implications of the paradigms they operate from.

## **References**

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