

A Growing Dilemma: How Police Brutality Affects Mental Health in Black Communities

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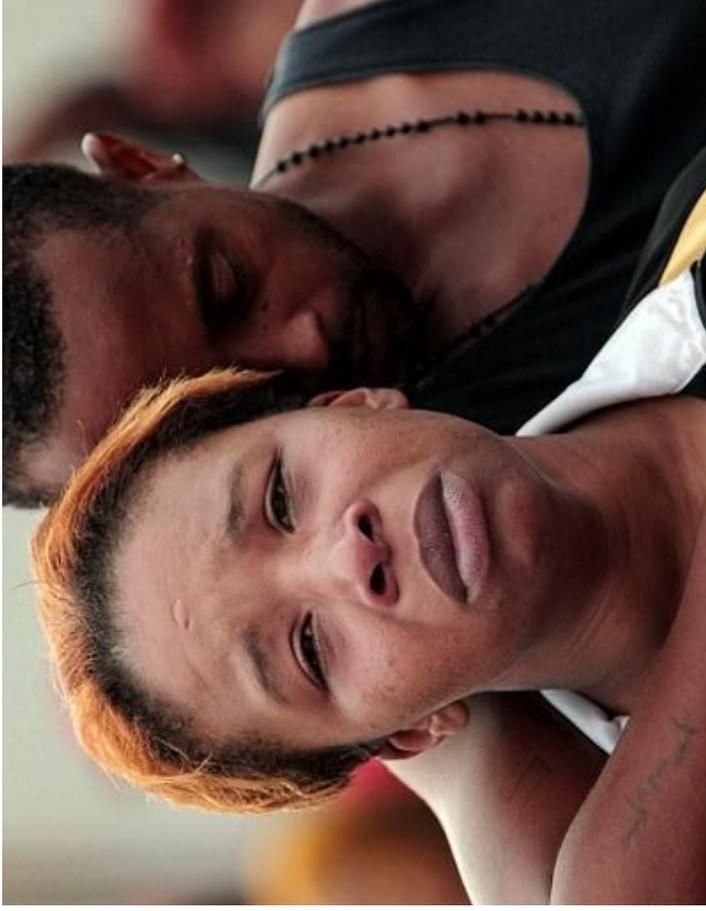
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Executive Summary

1. Introduction

Police violence is an ongoing problem in the United States. It describes the police's use of excessive and unwarranted force that often results in death or serious bodily injury. Black people are more likely to be killed by the police than any other demographic and are killed at higher rates. It is important to be aware that police violence is not about crime but rather racial profiling and systematic racism that has plagued this country since its birth. Police violence on Black bodies also has negative psychological effects on the Black community as a whole, as this report details.



The families of individuals who are affected by police violence as well as the victims of police brutality are often forgotten in conversations regarding police accountability and redress. No government-funded programs exist to provide mental health support for the victims of police brutality and the family members of those affected by police violence. Presently, in most states, crime victims and their family members can apply for government assistance to pay for funeral costs, counseling, medical fees, or other crime-related expenses. However, most victims of police violence do not qualify for these victim compensation funds. Police departments do not issue families or individuals affected by police violence the victimhood certification required by most states' victim compensation boards. Further, state boards do not provide compensation to individuals in situations where police officers are suspected of being involved in a crime where they sustained bodily harm or were killed, and this is often the reality for victims of police violence. The unfortunate truth is that when an officer is involved in a shooting or any sort of brutality there are no publicly funded services available to the family members of the victim. To address this shortcoming, this report provides a detailed overview of the costs of police violence on the mental health of the Black community. It also highlights several community-based organizations that are already doing work in this area and discusses a piece of state legislation that could serve as an initial step in providing the support necessary to begin to address this problem.

Part 1 – The Effects of Police Brutality on Mental Health

1. Direct Effects of Police Brutality on Mental Health

Police brutality and other police violence directly affect the mental health and well-being of individuals who experience it firsthand, but it also affects entire communities as well. This is supported by a growing body of empirical evidence.

STUDIES

Epidemiology and Psychiatric Sciences in 2017^[1]

Analyzed survey data from 1,615 participants in four U.S. cities (Baltimore, New York, Philadelphia, and Washington, D.C.), finding correlations between victimization by police and depression or other psychological distress.

Victimization in this context is defined as the outcome of deliberate action taken by a person or institution to oppress or harm another.

MEDICAL PROFESSIONALS

Dr. Georges C. Benjamin, Executive Director of the American Public Health Association (“APHA”)

“[Police Violence] certainly creates stress, which we know affects a range of health outcomes....Those are experiences that cause stress and that wear and tear the body systems of people of color that increase the allostatic load, and cause weathering.”^[2]

Evidence shows that the constant stress of the looming threat of police violence, the actual experience of police violence, and the devastating aftermath of police brutality at a personal (first-or-secondhand) and societal level can have tremendous effects on the mental health of people.^[3]

COUNTER

Police presence in communities can have a positive effect on mental health by creating a feeling of safety and comfort.

HOWEVER

Aggressive policing can also aggravate racial disparities in arrests, detentions, convictions, and sentences, thereby blocking social mobility and compounding the psychological health stresses of economic isolation.



2. Indirect Effects of Police Brutality on Mental Health

Police brutality has significant indirect effects on mental health in the Black community by breeding mistrust in the institutions meant to keep us safe.

A. Law Enforcement Institutions

For example, police brutality engenders a lack of confidence in law enforcement institutions.

“This lack of faith in law enforcement makes people less likely to call on the police when they are in danger.”

Because police brutality makes people less likely to call the police for assistance, “crimes don’t get solved.”

Dr. Georges C. Benjamin, executive director of the American Public Health Association (“APHA”) explains.^[4]

Consequently, police brutality makes effective police work more difficult and the communities they serve less safe, increasing the overall strain on public health.



B. Medical Institutions

Studies show that negative experiences with law enforcement may decrease trust in other institutions as well. This mistrust in areas such as medical care could limit engagement with the healthcare system, affecting community members’ willingness to seek mental health resources and other treatment.

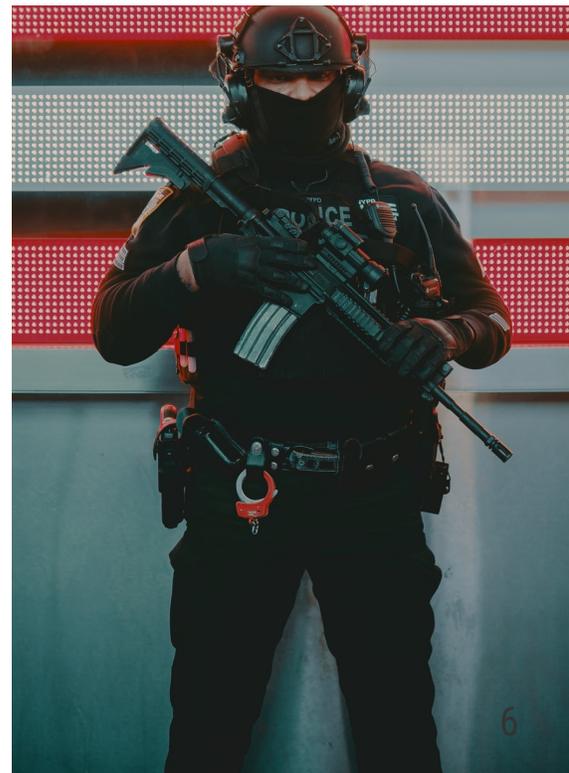
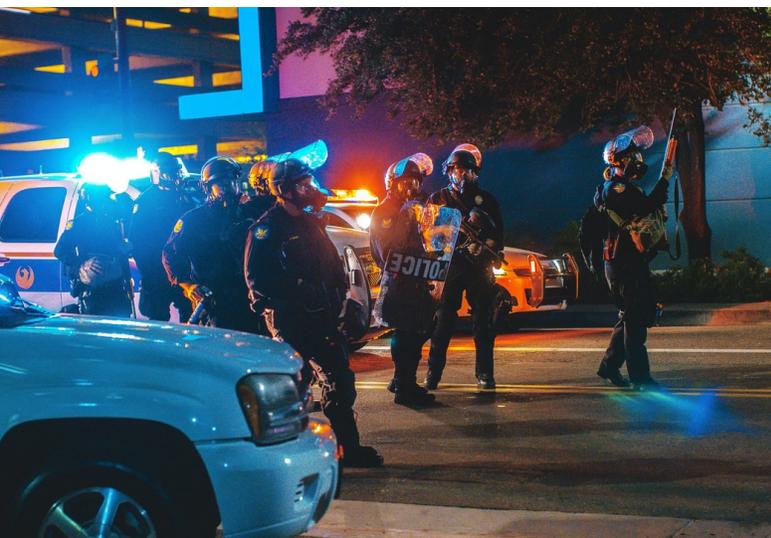
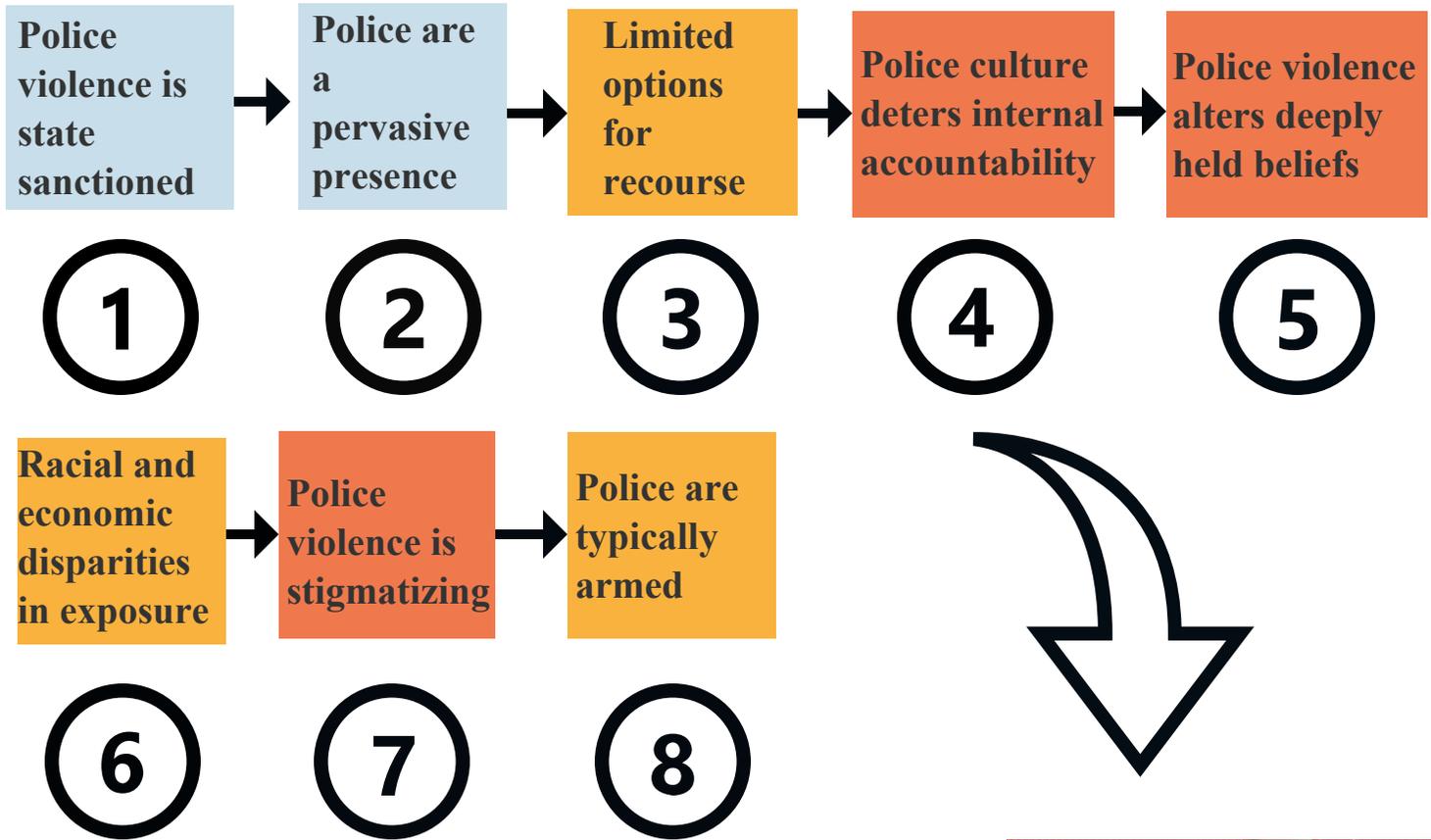
In short, conditions outside the medical system, such experiences with police brutality, can impact health by shaping how people access health care and interact with the medical system.

The National Library of Medicine

Conducted a study and found that respondents who had negative encounters with the police, even encounters they perceived to be necessary, had higher levels of medical mistrust compared to those with no negative police encounters. ^[5]

3. Eight Factors That Make Police Brutality Distinct in the Realm of Public Health

Police brutality is unique in the realm of public health. Several factors demonstrate why police brutality is a distinct and stressful event in the United States. These factors were articulated in the “Impact of Police Violence on Mental Health: A Theoretical Framework.”^[6] This publication identified eight factors distinct to police violence in the United States:



A. Police Violence is State-Sanctioned

Unlike most other forms of violence, police violence in America is embedded in a history of state-enforced practices that permit cruel and dehumanizing punishment of individuals deemed to be from so-called “dangerous classes.”^[7] Individuals considered to be a part of the modern-day “dangerous classes” include immigrants, youth, and various minority groups.^[8]

In a study examining state-sanctioned police violence, researchers at the University of Chicago analyzed lethal use-of-force policies in police departments across twenty cities and found that not a single police department was operating under guidelines in compliance with the minimum standards laid out under international human rights law.^[9] This lax framework for American policing gives officers greater discretion in using deadly force than officers in other countries. For example, in Spain, officers have to use verbal cautions and fire warning shots before they are permitted to aim at an individual.^[10]

Ultimately, because police departments are not restricted by international law, the use of deadly force in the U.S. is not confined to “last resort” scenarios, which results in the killing of a number of unarmed individuals by police every year, generating more public health concerns—particularly in the Black community.

B. Police Are Pervasive

It is no secret that verbal and physical violence between law enforcement officers and the public is a critical determinant of health and supports research into the public health consequences of these violent interactions.

This issue is compounded by the prevalent nature of policing, as it is almost impossible for individuals, particularly in urban communities, to avoid stressful and sometimes violent police encounters. Thus, over-policing can manifest in community members experiencing post-traumatic stress disorder (“PTSD”)^[11] because they are constantly reminded of the consequences of non-compliance.

C. Limited Options for Recourse

People who have experienced police violence have few options for redress because they must report incidents to the same police departments that originally harmed them.

Police are authorized to use force in a wide variety of situations and victims have to prove that the violence was not reasonable or unjustified. Because there are few avenues available to report an incident, obtain legal recourse and advocacy services, or receive referrals to mental health treatment, any mental health effects impacted individuals have may worsen over time.^[12]



D. Police Culture Deters Internal Accountability

Violence committed by institutional actors, rather than in interpersonal relationships, is exacerbated by the organizational cultures that often condone or overlook the violence.

Police often maintain a code of silence regarding fellow officers’ violence and therefore fail to hold each other accountable. This undermines the experiences of victims who do report incidents, further increasing the potential for negative mental health results.^[13]

E. Police Violence Alters Deeply Held Beliefs

Police violence alters deeply held beliefs because many Americans are often taught that police protect them and their communities from various dangers and help in emergencies.

A single violent encounter can shatter this belief for any individual, but when police violence is the norm instead of an isolated incident, the community at large loses trust in the police as an institution. This results in those affected viewing the police as part of the problem and a threat.^[14]



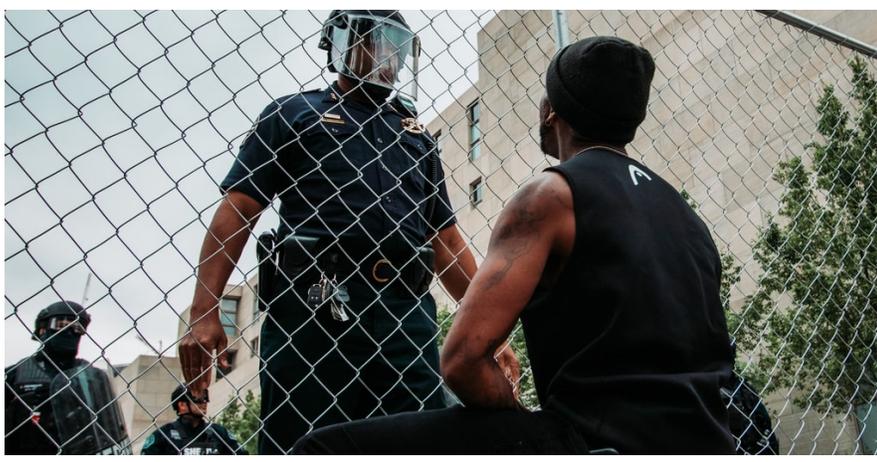
F. Racial and Economic Disparities in Exposure

Police violence disparately impacts people of color—especially Black and Latinx people— increasing the potential for feelings of diminished self-worth and value within American society.[15]

“History shows that crime data was never objective in any meaningful sense.” “Instead, crime statistics [are] ‘weaponized’ to justify racial profiling, police brutality, and ever more policing of [minorities].”[16]

Khalil Gibran Muhammad, Professor of history, race, and public policy at the Harvard Kennedy School

Thus, racial and economic disparities in exposure to police violence can negatively affect the mental health of community members by fostering and engendering antagonistic police/community relations.



G. Police Violence is Stigmatizing

Police violence is stigmatizing because police have discretion to use force in many situations, but survivors of police violence are often blamed for the encounter.

The actions of survivors of police violence are often heavily scrutinized and faulted to justify officers’ actions, especially by members of groups that benefit from the social order policing upholds.[17] Moreover, many people have friends and relatives who work as police officers, making it feel like a betrayal to report incidents of police violence.[18]

As a result, survivors of police violence are often affected mentally not only by the physical consequences of these encounters but also by the stigma associated with them.

H. Police are Typically Armed

Police brutality is distinct in the realm of public health because American police are typically armed. However, the police in over a dozen other democracies around the world do not commonly arm their police and instead rely on armed teams only to respond in high-risk situations.[19]

American police not only always carry firearms and are otherwise heavily militarized, but they also have broad latitude to determine when and how to deploy force. Every interaction with police presents the possibility of violence, and for communities subjected to routine over-policing, this threat brings additional challenges to mental health.[20]



Part 2 – Mental Health in the Black Community

Black people are more likely to experience chronic and persistent, rather than episodic, mental health conditions for a number of reasons.^[21]

As in many areas, when it comes to Black people and mental health in the United States, they experience disproportionately negative impacts. Black people are more likely to experience chronic and persistent mental health conditions for a number of reasons. These include affordability and lack of access to services, a scarcity of Black mental health professionals, racism, and mistrust of the medical system.^[22] Additionally, the historical adversity that Black people have experienced—from slavery to segregation to police violence—has also created socioeconomic disparities that are directly linked to mental health outcomes.^[23] Mental health experts have previously established a causal link between racism and an increase in depression, anxiety, substance abuse, and suicide amongst Black youth and adults.^[24] Additionally, Black people living below the poverty line are twice as likely to report serious psychological stress than those living two times above the poverty line.^[25]

IMPACTS ON MENTAL HEALTH IN THE BLACK COMMUNITY

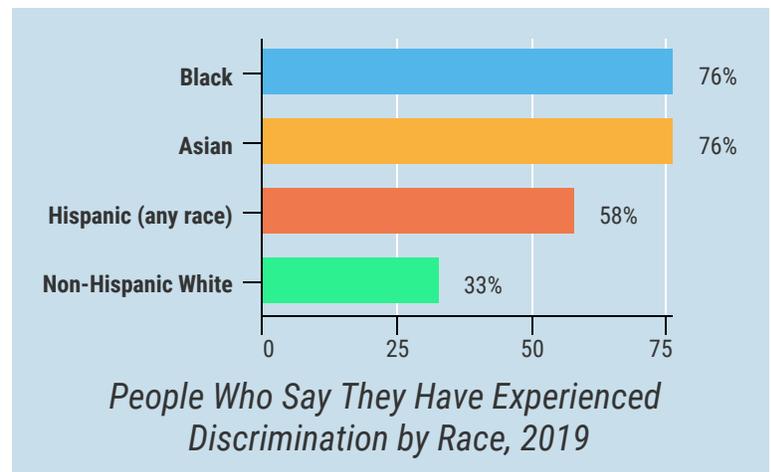
Racism

Racism is the grouping and ranking of societal groups by race in which the dominant group or groups disempower and discriminate against racial groups categorized as inferior both as individuals and systemically.^[26] Despite progress made over the years, being victimized by racism and discrimination has been associated with increased measures of depression, anxiety symptoms, psychological distress, and comorbidity—which is the

presence of two or more illnesses in the same person.^[27] Furthermore, Black men and women are likely to experience different forms of discrimination based on their gender. For example, Black men are more likely to experience institutional racism due to the disparate impact of the criminal justice system. Alternatively, Black women are more likely to experience intersectional racism due to their gender.^[28] Longitudinal evidence suggests that discrimination incrementally contributes to depression, rather than depression increasing attention to discriminatory experiences.^[29]

Historical Treatment of Black People

The historical treatment and continued negative treatment of Black people—i.e. disproportionate use of excessive force by police officers—“ha[s] led to a mistrust of authorities, many of whom are not seen as having the best interests of Black and African Americans in mind.”^[30] Not only does direct racism and discrimination have a negative impact on Black mental health, but the threat of racism and discrimination negatively impacts mental health as well. This has caused Black people to live a life of “heightened vigilance.”^[31]



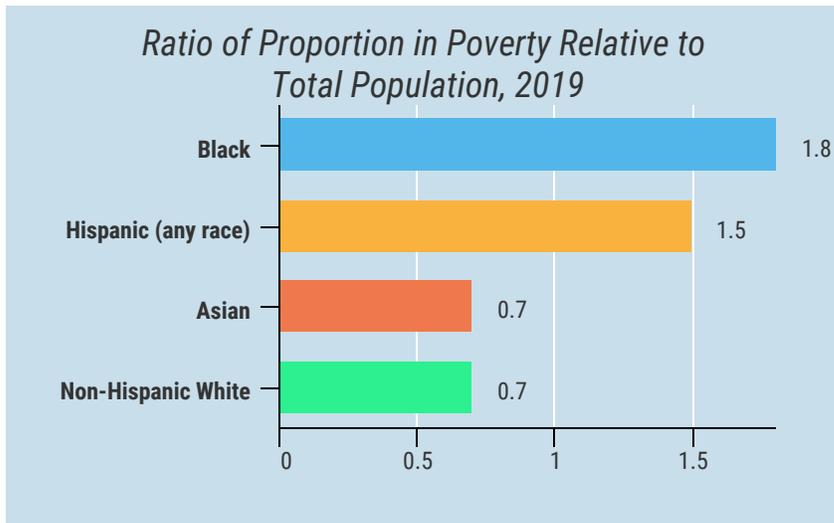
Heightened Vigilance

Heightened vigilance, or hyper-vigilance, increases depressive symptoms and furthers the mental health disparity between Black and white people. It leads to vigilant coping, which is the protection against anticipated discrimination by monitoring and modifying behavior.^[32] Studies find that the anticipation may increase stress, cardiovascular reactivity associated with stress, and blood pressure.^[33] Over time, this can have long-term consequences on both mental and physical health.

Because Black people are more likely to be victims of racism and discrimination in the U.S., it leads to disparate negative outcomes in their mental health compared to people of other races. Unfortunately, the mental health disparity does not translate into more affordable or accessible mental health care in the Black community.

“As vigilance is more common among those who experience greater discrimination, and those who experience discrimination are least likely to seek health care, individuals who adopt vigilant coping strategies may also be at heightened risk for untreated physical and mental health-related problems.”

Mary S. Himmelstein et al., *Psychology & Health*



Poverty

Black people living below the poverty line are twice as likely to report serious psychological stress than those living two times above the poverty line.^[34] Although poverty impacts all races, poverty disparately impacts the Black community. While the poverty rates universally declined in 2019, Black people still experienced the highest rate (18.8 percent).^[35] This is 1.8 times greater than their share of the general population (13.2 percent).^[36] On the other hand, the poverty rate of non-Hispanic white people was 7.3 percent.^[37]

Mental Healthcare Access and Treatment in the Black Community

Despite the clear need, less than one in three Black adults who need mental healthcare receive it.^[38] This is almost 1.5 times less than the general population that received necessary mental illness treatment in 2019.^[39] In 2018, 11.5 percent of Black people had no form of health insurance,^[40] greatly reducing the opportunity to seek mental health treatment. Additionally, Black people are less likely to (1) receive guideline-consistent care; (2) be included in medical research studies; and (3) use mental health specialists.^[41]

Since mental health professionals play an essential role in treatment, it is vital for patients to work and communicate well with them.^[42] It is more beneficial for Black people to receive care from Black mental healthcare professionals because Black professionals are less likely to show prejudice or demonstrate provider bias.^[43] Provider bias can result in misdiagnosis and inadequate treatment.^[44] For example, Black men are more likely to receive a misdiagnosis of schizophrenia when expressing symptoms related to mood disorders or PTSD.^[45] Provider bias increases the mistrust of the medical profession and furthers the stigma that Black people currently have against mental health.^[46]

The Stigma of Mental Health in the Black Community

Although mental health issues are prevalent within the Black community, there is a stigma in the Black community due to an association between poor mental health and personal weakness.^[47] This causes Black people to feel shame and concern about how others may perceive them. This shame prevents many Black individuals from seeking the proper mental health care that they need.^[48]

Additionally, the strong cultural ties to faith and spirituality that generally exist within the Black community can deter them from seeking professional psychological care.^[49] While faith, religion, and spirituality can aid in any recovery process and serve as an important part of a treatment plan, they should not be the only option for people whose daily functioning is impaired by symptoms of poor mental health.^[50] Helping people understand that mental health is just as essential as physical health can help de-stigmatize mental illness in the Black community.^[51]

STATISTICS ON MENTAL HEALTH IN THE BLACK COMMUNITY

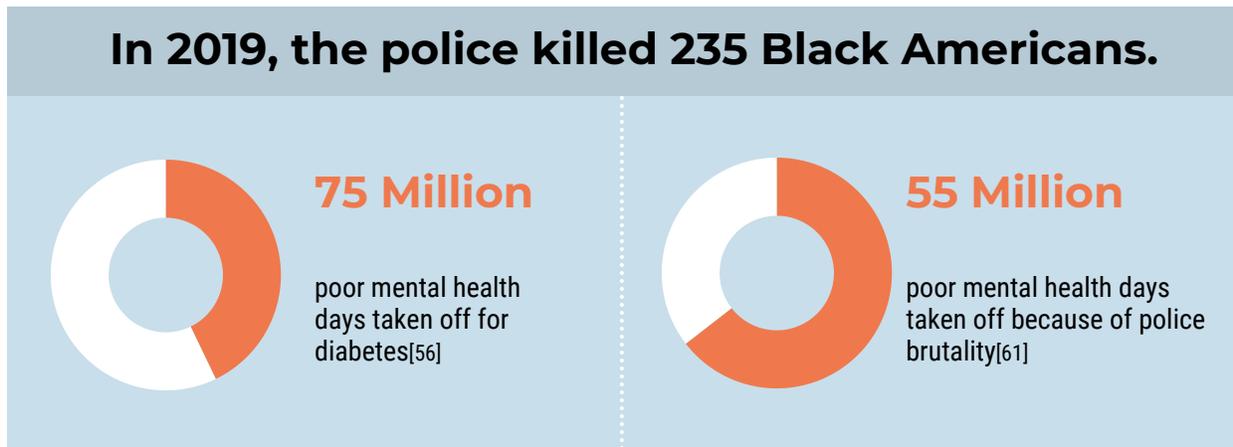
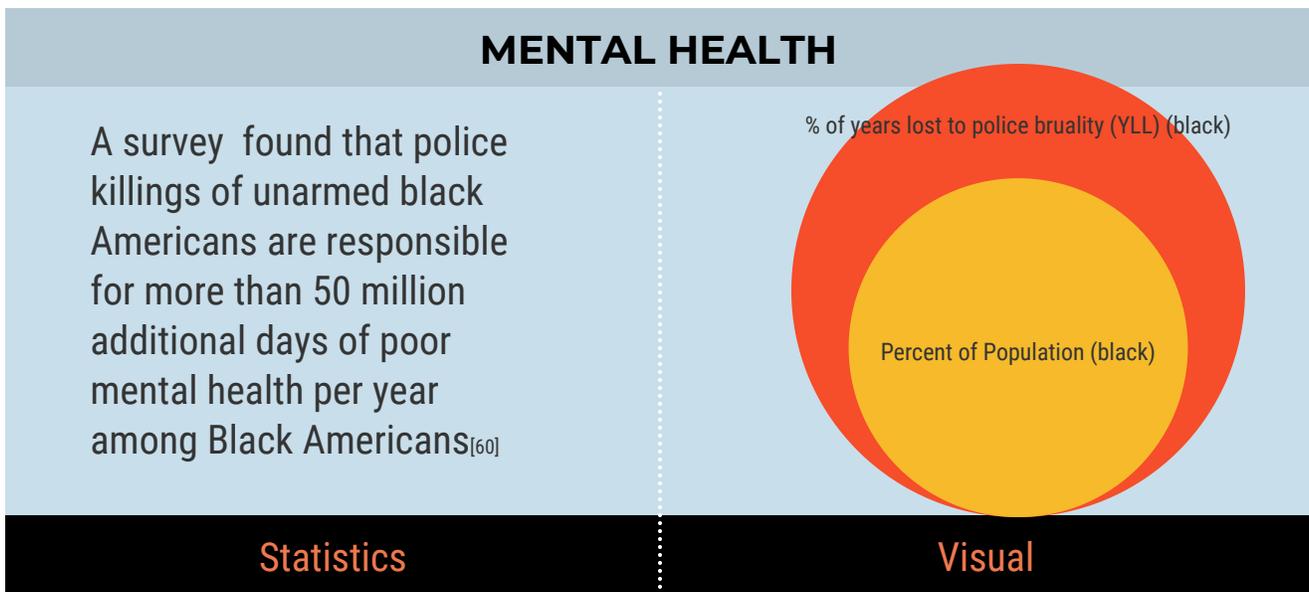
Generally, adult Black people are “more likely to have feelings of sadness, hopelessness, and worthlessness than” adult white people.^[52] While Black people are less likely to die from suicide than white people, Black teenagers “are more likely to attempt suicide than White teenagers (9.8 percent v. 6.1 percent).”^[53]

In 2019, 20.6 percent (51.5 million) of people experienced mental illness.^[54] Of those, 5.2 percent (13.1 million) experienced serious mental illness.^[55] Serious mental illnesses are “mental, behavioral, or emotional disorder[s] resulting in serious functional impairment, which substantially interferes with or limits one or more major life activities.”^[56] As with poverty, Black people experienced disproportionately higher rates of mental illness in 2019 compared to their makeup of the general population.^[57] While Black people comprised only 13.2 percent of the population in 2019, 17.3 percent (8.1 million) of Black people reported having a mental illness, and 23 percent (nearly 2 million) of those people reported having a serious mental illness.^[58] In the past few years, depressive episodes and suicidal thoughts, plans, and attempts have grown significantly in the Black community.^[59]



Part 3 – How Police Brutality Affects Mental Health in the Black Community

Mental health experts have previously established a causal link between racism and an increase in depression, anxiety, substance abuse, and suicide amongst Black adults and youth.



Heightened Awareness of Police Brutality: The Pros and Cons

The U.S. has a long history of police brutality and violence. Recently, however, significant news and social media coverage has resulted in increased public awareness and visibility surrounding this issue. Additionally, mental health in the Black community has gained recognition as a public health concern.

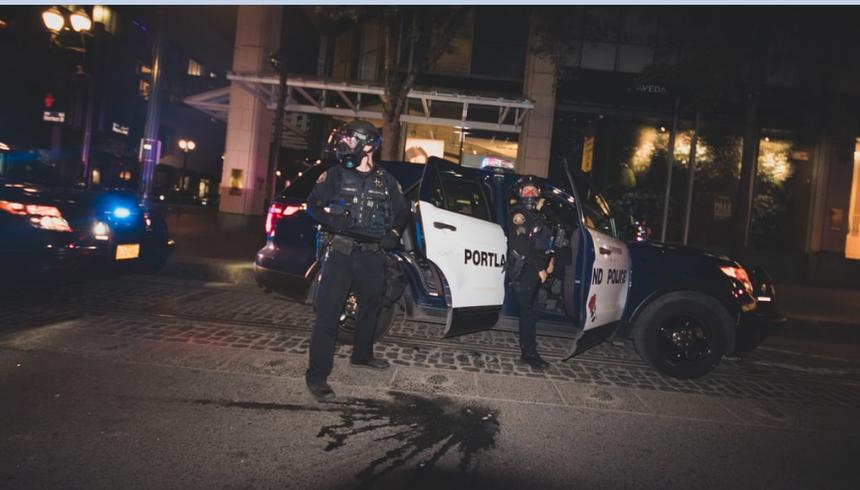
This is also the result of an increasing number of studies that have linked exposure to police violence and mental and physical health consequences.

Frequent police brutality is more than a cause for concern for the Black community as a whole. Police killings of unarmed Black Americans like Mike Brown, Eric Garner, Breonna Taylor, Oscar Grant, and many more have had an impact on most Black Americans, even if they did not know these people personally.

Widespread news and social media coverage of police violence has generated a form of vicarious trauma,^[62] increasing the impact from not only those direct victims, but also to family members, protestors, and activists alike.

Police brutality forces the Black community to deal with:

- (1) fatalities of injuries from the brutal encounter;
- (2) racist state responses;
- (3) financial strains from lawyers, hospital bills, funeral bills, et cetera; and
- (4) systematic oppression that invalidates and gaslights the trauma.



What Happens After Police Brutality?

In the aftermath of police brutality, the Black community not only has to process the actual incident but also feels a responsibility to fight for change. This form of activism leads to many hashtags that spread awareness across the globe. However, while the hashtags spread awareness, they also spread more trauma. Black people are forced to rewatch, reread, re-listen, and re-feel the initial trauma they felt from the original event. And unfortunately, it is hard for people to avoid the posts and hashtags because technology has become such an integral part of activism. So, while heightened awareness may be good for the movement, it is not good for the mental health of the Black community.



Because of the burden police brutality places on the Black community, the American Psychological Association issued an official statement acknowledging the causal link between police brutality and the impact this violence has on Black men, specifically.^[63]

Police killings of unarmed black Americans are responsible for more than 50 million additional days of poor mental health per year among Black Americans.^[64]

COMPARE THIS TO THE 75 MILLION HEALTH DAYS TAKEN FOR DIABETES

POLICE BRUTALITY CAUSES BLACK PEOPLE TO MISS WORK ALMOST AS MUCH AS A POTENTIALLY DEADLY DISEASE

Black men are 2.5 times more likely to be killed by police and one out of every 1,000 young black men will be killed by the police^[65]



The awareness of this statistic causes Black Americans to live in fear, even if they have not been directly impacted by police brutality. Dealing with this reality has an impact on the mental, as well as physical health of Black people in the U.S. “[L]iving in areas with a heavy presence of whites where there are large racial differences in police use of force is associated with an increased risk of poor/fair self-rated health, high blood pressure, diabetes, and obesity.”^[66]

These health conditions lead to short life spans for black Americans. One survey measured the years of life lost (YLL) to evaluate the public health of Black people as a result of police violence. People of color accounted for 51.5% of YLLs, despite making up only 38.5% of the population. The most affected age group was 25–34.^[67]

Another survey also reported estimates predicting PTSD from this “aggressive policing,” which is based on the scale of the police stop. There was more trauma in men who lived in public housing areas, suggesting that more “aggressive policing” occurs in these areas.^[68] There was also a strong correlation between invasive police stops and high levels of trauma.^[69] Young men who reported that they had been treated fairly by the police had reported lower levels of trauma.^[70] The survey concluded that areas experiencing aggressive policing are already socioeconomically disadvantaged and have even more compromised mental health consequences.^[71]

“Black Americans have no place to feel safe because even their homes can become a battle grounds.”

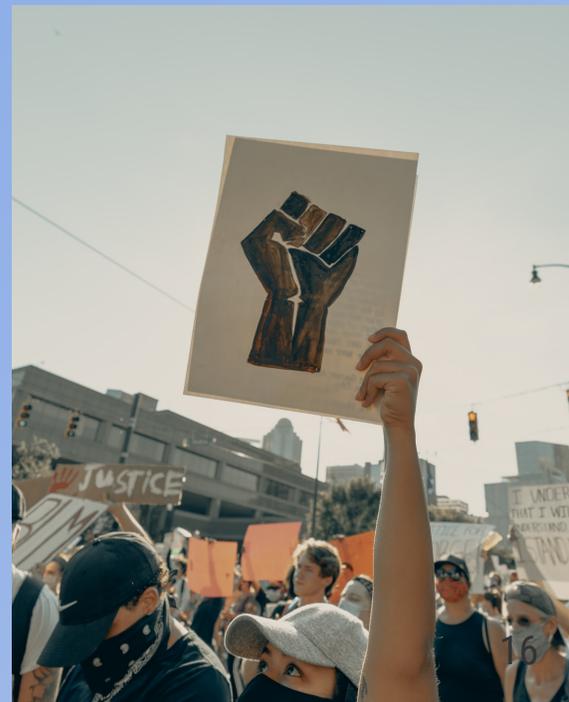
Harvard Professor David R. Williams conducted a study that analyzed the “spillover effect ” that members of the community suffer from, even when they are not directly affected, but instead have witnessed or heard about the killings.

The study showed that for each additional killing of an unarmed Black American in the respondent's state in the three-month period prior to the interview, there was about a fourteen-day increase in the number of poor mental health days reported.^[72]



“If you stick a knife in my back nine inches and pull it out six inches, there’s no progress. If you pull it all the way out that’s not progress. Progress is healing the wound that the blow made.”
Malcolm X

Police brutality has more victims than those just directly involved. The cases that get reported in the media are only a small number of police brutality occurrences because the majority of cases do not generate enough public support to become a trending hashtag, but those murders still have victims.



Part 4 - Community-Based Solutions for Mental Health

My Good^[73]

Founded by Macy Gray, My Good is a nonprofit that seeks to help families and loved ones of victims of police violence with financial, emotional and, mental health support.

The focus of the organization is to do what it can for grieving family members affected by police brutality. This includes creating platforms for victims' families that provide support groups with grief experts and ministers. It also creates a community for family members in mourning to come together weekly online to share, vent, and discuss their own initiatives.

My Good recognizes that therapy is often the number one need for these families, so it connects them with a network of grief specialists and provides funding for treatment to those who need it. Also recognizing hospital, funeral, legal expenses, and other expenses further burden these families, My Good also provides financial support in these areas.



Family Intervention Crisis Team (“FCIT”)^[74]

Part of the Love Not Blood Campaign (“LNBC”), FCIT is a collaboration of victims’ families working together to support each other and embrace families newly affected by police brutality, community violence, and incarceration.

It provides holistic healing to families in the form of services that range from emotional support, events for impacted families, vigils, healing circles, help navigate the criminal justice system, financial support, to creating space for traumatized victim families to tell their story.

LNBC also provides victim family support groups that have trained advocates who can accompany families to hearings, trial proceedings, meetings with the coroner, all while providing emotional support and information about the process.

Families United 4 Justice (“FU4J”)^[75]

Families United 4 Justice is a network of families affected by police violence and their organizations advocating for police accountability across the country. FU4J is dedicated to providing support and services to families newly affected by police violence and to family-led organizations assisting in healing, organizing, demanding justice, and providing redress for unjustified police shootings.

At yearly conferences, FU4J brings families affected by police violence together, teaching coping mechanisms and providing coaching on telling their stories to effect change. Because many victims’ families lack readily available access to basic forms of support — FU4J gives provides a network of support to assist with legal fees, access to affordable mental counseling, and assistance with other difficulties that arise for a family that has lost a loved one to police violence.



Dignity and Power Now^[76]

Dignity and Power Now is a Los Angeles-based organization focusing on healing and transformative justice to help support the families of victims of state violence. It provides trauma-informed healing justice through both rapid response networks and ongoing Wellness Clinics free of charge. Rooted in community power, Dignity and Power Now actively supports communities in getting the healing services they need and helping them learn how to build power and advocacy. By reaching out to families and individuals that have been impacted by state violence, the organization is creating a world in which communities are healthy and care for each other.

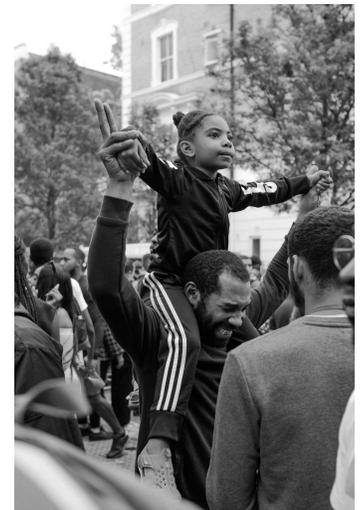
The Michael O.D. Brown We Love Our Sons & Daughters Foundation^[77]

Lezley McFadden, the mother of Michael Brown Jr., created the Foundation with the intersection of four outcome components in mind: justice, health, education, and family. As part of its mission, the Foundation seeks to address the need for mental health treatment and healing as a community.

To accomplish this, the Foundation emphasizes a multi-faceted approach to addressing the issue through activism, legislation, and other advocacy geared toward providing communities with the mechanisms they need to succeed after being affected by police violence.

The Foundation’s signature program, Rainbow of Mothers, was developed to create a collective impact by providing wrap-around services, including counseling, group sessions, legal advice, and financial support to assist in the restorative process of rebuilding and repurposing that is critical in the wake of police violence.

The Foundation also seeks to pass the Mike Brown Bill, which would create a fund to promote healing and mental health for those impacted by police violence.



The Boris Lawrence Henson Foundation (“BLHF”)^[78]

Taraji P. Henson launched BLHF, which works toward increasing mental health support and awareness within the Black community, focusing on three core initiatives: (1) bringing mental health support to urban schools; (2) reducing the recidivism rate within the prison system; and (3) increasing the number of African Americans in the mental health field. BLHF hosts virtual local support groups and provides and connects people to mental health providers and programs serving their communities.



Anti-Police Terror Project (“AFTP”)^[79]

AFTP is Black-led, multiracial coalition building a replicable and sustainable model to eliminate police terror in communities of color. This includes supporting families that have been impacted by police violence by connecting community members with resources, legal referrals, and other opportunities for healing.



California Bill for Police Brutality Victim Compensation^[80]

While legislative action regarding police brutality is severely lacking, California has proposed one way in which the state could contribute to addressing the effects of police brutality on families and impacted communities. This proposed bill would allow the families of victims of police brutality to seek compensation from the state’s Victim Compensation Board regardless of whether any person is arrested for, charged with, or convicted of a crime.

Further, the bill would “prohibit the California Victim Compensation Board, which reviews compensation requests, from denying a request if a victim of police brutality was involved in committing a crime if the victim failed to ‘cooperate reasonably’ with law enforcement or on the sole basis of a police report.”

Generally, victims of police violence do not qualify for victim compensation funds because police brutality is not often classified as an eligible crime to receive funds. This California bill would revise the term “crime” to include any personal offense. The bill would include in the definition of “crime” the use of force by an officer that is beyond what is reasonable under the totality of the circumstances, and that causes the victim injury or death, regardless of whether the peace officer is arrested for or charged with the commission of a crime or a public offense. By expanding the types of conduct for which compensation can be paid from such funds, the bill would allow families to receive financial support that could be used to support such things as mental health treatment and other costs associated with police brutality. This proposal is just one example of the ways in which state and federal governments can play an active part in addressing the myriad effects of police violence on impacted communities, particularly the Black community.



ENDNOTES

1. J.E. DeVylder, et al., *Prevalence, Demographic Variation and Psychological Correlates of Exposure to Police Victimization in Four US Cities*, 26 *Epidemiology & Psychiatric Sci.* 466 (2017).
2. Carolyn L. Todd, *Why Police Brutality is a Public Health Issue*, *Self* (June 17, 2020), <https://www.self.com/story/police-brutality-public-health-issue>.
3. Sirry Alang, Donna McAlpine, Ellen McCreed & Rachel Hardeman, *Police Brutality and Black Health: Setting the Agenda for Public Health Scholars*, 107 *Am. J. Pub. Health* 662 (2017).
4. Todd, *supra* note 2.
5. Sirry Alang, Donna McAlpine & Rachel Hardeman, *Police Brutality and Mistrust in Medical Institutions*, 7 *J. of Racial and Ethnic Health Disparities* 760 (2020).
6. Jordan DeVlylder, Lisa Fedina & Bruce Link, *Impact of Police Violence on Mental Health: A Theoretical Framework*, 110 *Am. J. Pub. Health* 1704 (2020) [hereinafter *Impact of Police Violence*].
7. Holly Ober, *Experiencing Police Violence Worsens Mental Health in Distinct Ways*, UC Riverside (Oct. 13, 2020), <https://news.ucr.edu/articles/2020/10/13/experiencing-police-violence-worsens-mental-health-distinct-ways>.
8. Oxford Reference, <https://www.oxfordreference.com/view/10.1093/oi/authority.20110803095659626> (last visited May 1, 2021).
9. Univ. Chi. L. Sch. Glob. Hum. Rts. Clinic, *Deadly Discretion: The Failure of Police Use of Force Policies to Meet Fundamental International Human Rights Law and Standards* 19 (2020), <https://chicagounbound.uchicago.edu/cgi/viewcontent.cgi?article=1014&context=ihr>.
10. Ed Pilkington, *'State-Sanctioned Violence': US Police Fail to Meet Basic Human Rights Standards*, *The Guardian* (June 22, 2020), <https://www.theguardian.com/us-news/2020/jun/22/us-police-human-rights-standards-report#:~:text=10%20months%20old-,%20State%20sanctioned%20violence%3A%20US%20police%20fail%20to,meet%20basic%20human%20rights%20standards&text=America%20s%20biggest%20police%20forces%20lack,the%20use%20of%20lethal%20force>.
11. Jacob Bor, Atheendar Venkataramani, David Williams & Alexander Tsai, *Police Killings and Their Spillover Effects on the Mental Health of Black Americans: a Population-Based, Quasi-Experimental Study*, *THE LANCET* (Dec. 2018), available at [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31130-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31130-9/fulltext).
12. *Impact of Police Violence*, *supra* note 6.
13. *Id.*
14. *Id.*
15. *Id.*
16. Colleen Walsh, *Solving Racial Disparities in Policing*, *The Harvard Gazette* (Feb. 23, 2021), <https://news.harvard.edu/gazette/story/2021/02/solving-racial-disparities-in-policing/#:~:text=%E2%80%9CHistory%20shows%20that%20crime%20data,meaningful%20sense%2C%E2%80%9D%20Muhammad%20wrote.&text=Bratton%20rejected%20notions%20that%20crime,%2C%20police%20practices%2C%20and%20racism>.
17. *Impact of Police Violence*, *supra* note 6.
18. *Id.*



ENDNOTES (CONTINUED)

19. Amelia Cheatham & Lindsay Maizland, *How Police Compare in Different Democracies*, Council on Foreign Relations (Apr. 21, 2021), <https://www.cfr.org/background/how-police-compare-different-democracies>.
20. *Impact of Police Violence*, *supra* note 6.
21. *Black and African American Communities and Mental Health*, Mental Health Am., <https://www.mhanational.org/issues/black-and-african-american-communities-and-mental-health> (last visited Mar. 8, 2021) [hereinafter *Black Mental Health*].
22. *Id.*
23. *Id.*
24. Position Statement on Police Brutality and Black Males, Am. Psychiatric Ass'n (Dec. 2018), available at <https://www.psychiatry.org/File%20Library/About-APA/Organization-Documents-Policies/Policies/Position-Police-Brutality-and-Black-Males.pdf>.
25. *Black Mental Health*, *supra* note 21.
26. David R. Williams, *Stress and the Mental Health of Populations of Color: Advancing Our Understanding of Race-related Stressors*, 59 J. Health Soc. Behav. 466 (2019).
27. *Id.*
28. Brea Perry, Kathi Harp & Carrie Oser, *Racial and Gender Discrimination in the Stress Process: Implications for African American Women's Health and Well-Being*, 56 Soc. Persp. 25 (2013).
29. *See* Williams, *supra* note 26.
30. *Black Mental Health*, *supra* note 21.
31. Williams, *supra* note 26.
32. Mary Himmelstein, et al., *Vigilance in the discrimination-stress model for Black Americans*, 30 Psychol. Health 253 (2015).
33. *Id.*
34. *Black Mental Health*, *supra* note 21.
35. John Creamer, *Inequalities Persist Despite Decline in Poverty for All Major Race and Hispanic Origin Groups*, U.S. Census Bureau (Sept. 15, 2020), <https://www.census.gov/library/stories/2020/09/poverty-rates-for-blacks-and-hispanics-reached-historic-lows-in-2019.html>.
36. *Id.*
37. *Id.*
38. *Black/African American*, Nat'l All. Mental Illness, <https://www.nami.org/Your-Journey/Identity-and-Cultural-Dimensions/Black-African-American> (last visited Mar. 8, 2021) [hereinafter *National Alliance of Mental Illness*].
39. *Mental Health by the Numbers*, Nat'l All. Mental Illness (Mar. 2021), <https://www.nami.org/mhstats>.
40. *National Alliance of Mental Illness*, *supra* note 38.
41. *Id.*
42. Thomas A. Vance, *Addressing Mental Health in the Black Community*, Colum. University: Dep't Psychiatry (Feb. 8, 2019), <https://www.columbiapsychiatry.org/news/addressing-mental-health-black-community>.

ENDNOTES (CONTINUED)

43. *National Alliance of Mental Illness*, *supra* note 38.

44. *Id.*

45. *Id.*

46. *Id.*

47. *Id.*

48. *Id.*

49. *Id.*

50. *Id.*

51. Vance, *supra* note 38.

52. *Black Mental Health*, *supra* note 21.

53. *Id.*

54. *Mental Health by the Numbers*, *supra* note 39.

55. *Id.*

56. *Mental Illness*, Nat'l Inst. Mental Health (Jan. 2021), <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>.

57. 2019 NATIONAL SURVEY ON DRUG USE AND HEALTH: AFRICAN AMERICANS, SUBSTANCE ABUSE & MENTAL HEALTH SERVS. ADMIN., 4 (Sept. 2020), <https://www.samhsa.gov/data/sites/default/files/reports/rpt31099/2019NSDUH-AA/AfricanAmerican%202019%20NSDUH.pdf> (This data set does not include children younger than 180).

58. *Id.*

59. *Black Mental Health*, *supra* note 21.

60. Jacob Bor, Atheendar Venkataramani, David Williams & Alexander Tsai, *Police Killings and Their Spillover Effects on the Mental Health of Black Americans: a Population-Based, Quasi-Experimental Study*, *The Lancet* (Dec. 2018), available at [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31130-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31130-9/fulltext).

61. *Id.*

62. Kenya Downs, *When Black Death Goes Viral, It Can Trigger PTSD-Like Trauma*, PBS (July 22, 2016), <https://www.pbs.org/newshour/nation/black-pain-gone-viral-racism-graphic-videos-can-create-ptsd-like-trauma>; Monica T. Williams, *The Link Between Racism and PTSD*, *Psychology Today* (Sept. 6, 2015), <https://www.psychologytoday.com/us/blog/culturally-speaking/201509/the-link-between-racism-and-ptsd>.

63. Kim Mills, *'We Are Living in a Racism Pandemic,' Says APA President*, *Am. Psychol. Ass'n* (May 29, 2020), https://www.apa.org/news/press/releases/2020/05/racism-pandemic?utm_source=facebook&utm_medium=social&utm_campaign=apa-press-release&utm_content=racism-pandemic.

64. Bor, *supra* note 60.

65. *Id.*

ENDNOTES (CONTINUED)

66. Ana Sandoiu, *Police Violence: Physical and Mental Health Impacts on Black Americans*, Medical News Today (June 22, 2020), <https://www.medicalnewstoday.com/articles/police-violence-physical-and-mental-health-impacts-on-black-americans>.
67. Anthony Bui, Matthew Coates & Ellicott Mathay, *Years of Life Lost Due to Encounters with Law Enforcement in the USA, 2015–2016*, 72 J. Epidemiology & Community Health 715 (2018).
68. Amanda Geller, Jeffrey Fagan, Tom Tyler & Bruce Link, *Aggressive Policing and the Mental Health of Young Urban Men*, 104 Am J. Pub. Health 2321 (2014).
69. *Id.*
70. *Id.*
71. *Id.*
72. Bor, *supra* note 60.
73. My Good, mygood.org (last visited May 1, 2021).
74. Love Not Blood Campaign, <http://www.lovenotbloodcampaign.com/family-support/> (last visited May 1, 2021).
75. Families United 4 Justice Network, <https://fu4jgroup.website/index.html> (last visited May 1, 2021).
76. Dignity and Power Now, <http://dignityandpowernow.org/> (last visited May 1, 2021).
77. Michael O.D. Brown We Love Our Sons & Daughters Foundation, <https://michaelodbrown.org/> (last visited May 1, 2021).
78. The Boris Lawrence Henson Foundation, <https://borislhensonfoundation.org/> (last visited May 1, 2021).
79. Anti-Police Terror Project, <https://www.antipoliceterrorproject.org/> (last visited May 1, 2021).
80. S.B 299, 2021–2022 Leg., Reg. Sess. (Cal. 2021).

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