

**The Potential Impact of Differences in Client-Counselor Perceptions
of Police-Inflicted Violence**

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Abstract

This paper emphasizes the importance of the counselor's awareness of personal biases and understanding of how police-inflicted violence impacts marginalized populations. The impact of loss of life and trauma from enduring police-inflicted brutality disproportionately impacts communities of Color and those with mental health challenges. Due to individual experiences and volatile political discourse, there are widely divergent views on the state of current policing in the U.S. Counselors, given the nature of their work with populations at risk for experiencing police-inflicted violence, must be equipped to address such traumatic events with their clients.

Keywords: police brutality, trauma, bereavement, counselors

The Importance of Counselor Awareness of Prevalence, and Perceptions of Police-Inflicted Violence

In recent years, there has been increased media attention on police killings of Black men in the US. In September 2020, Rochester, NY was confronted with the news of such a killing in its own community. Daniel Prude was experiencing a substance use and mental health crisis when the police pinned him naked to the snowy, cold street (Nir, 2021). The pressure on his lungs prevented the intake of oxygen and Prude lost consciousness. He was removed from life support a week later. Prude's killing by police highlights the ongoing issue of police treatment not only of People of Color but also of citizens experiencing interpersonal or mental health crises (American Public Health Association, 2018; DeGue et al., 2016; Miller, 2015).

Ongoing research indicates that police use of force disproportionately impacts men of color (DeGue, Fowler, & Calkins, 2016), and individuals experiencing a mental health crisis are more likely to experience the use of force (Miller, 2015). While there is data on the public's attitudes toward law enforcement and police brutality (Gilberstadt, et al, 2020), the attitudes of counselors on this issue are of unique importance as counselors are likely to work with populations disproportionately impacted by police violence. Furthermore, the bias and attitudes of a counselor can negatively impact the client and the helping relationship (American Public Health Association, 2018; DeGue et al. 2016; DeVyleder, 2017; Schlossberg & Pietrofesa, 1973). A specific understanding of the often traumatic impact of police encounters on individuals is vital for professionals providing mental health-related services.

This paper aims to explore the impact of differences in client and counselor perceptions of police violence and explain how these differences could potentially impact the therapeutic space and client outcomes. We will discuss the prevalence of police-inflicted violence among

People of Color and those with mental health challenges and the impact these incidents have on the mental health of both populations. We will then explore the demographics of the mental health practitioners providing treatment to a diverse clientele, and the potential differences in counselor and client perceptions of police. Finally, we will demonstrate why awareness and understanding of these differences in perceptions are vital to the counseling process and client outcomes.

Prevalence of Experiences with Police Inflicted Violence

For the years 2015-2016, killings by law enforcement constituted 24% of violent deaths in the U.S (Outland, 2021). Marginalized and vulnerable populations of people are at heightened risk for violent or fatal police encounters (American Public Health Association, 2018; DeGue et al. 2016; DeVyleder, 2017). While media attention has highlighted the killings of African American men by police officers, many groups of people experience disproportionate rates of violence during encounters with law enforcement; this includes men and women of Color, people experiencing homelessness, those in mental health crisis, and members of LGBTQ+ communities (American Public Health Association, 2018; DeGue et al. 2016). When examining data on the overall prevalence of police killings, the populations most at risk for fatal encounters with law enforcement are young Black men and individuals living with mental illness (DeGue et al., 2016; DeVyleder, 2017; The Counted Editorial Team, 2015).

Prevalence of Police Brutality in Communities of Color

Data from a variety of sources on rates of police violence towards community members demonstrate People of Color experience higher rates of violence and death from law enforcement (American Public Health Association, 2018; The Counted Editorial Team, 2015; DeGue et al., 2016). Evidence further suggests that policing of predominantly Black neighborhoods is more

likely to include violent tactics (DeVyleder, 2017). According to DeVyleder (2017), “people residing in counties with greater population density, lower median incomes, and a greater proportion of Black residents were at particularly high risk for being shot by police, which could not be attributed to differences in crime rates” (p.1).

DeGue et al. (2016) examined data from the National Violent Death Reporting System from 2009-2012. Most victims of police lethal force are White (52%). However, victims are disproportionately Black (32%). In fact, the fatality rate is 2.8 times higher for Blacks, and Black victims of police killings were more likely to be unarmed (DeGue et al.). The data also suggests Black people are three times more likely to experience use of force during a law enforcement encounter (DeGue et al., 2016).

In an extensive investigative report called *The Counted*, the Guardian (an international news publication) tracked the number of people killed by the police in the U.S. from 2015-2016 (The Counted Editorial Team, 2015). This is the most complete record of people killed by law enforcement for the year 2015, as The Guardian set out to document every single fatality caused by law enforcement. It reveals underreporting by the FBI on the number of killings by law enforcement in the US. Among their findings, Black Americans were two times more likely to be killed by law enforcement than White Americans. Furthermore, Native Americans were three times more likely to be killed by law enforcement compared to White Americans. The project also reported higher rates of non-fatal violence by officers against Black and Latino individuals.

Prevalence of Police Brutality Among Individuals with Mental Health Challenges

Police officers frequently act as first responders for people experiencing a mental health crisis. An officer responds to a person in mental health crisis an average of 6.4 times each month (DeGue et al., 2016). Furthermore, people experiencing mental illness have contact with police

at a higher rate than the general population (DeGue et al.). Frequently, these encounters involve the use of force or restraint; 20% of individuals hospitalized with severe mental illness had an encounter with the police in the previous four months (DeGue et al.).

Meanwhile, police officers have reported feeling unprepared for encounters with those living with mental illness. Research on attitudes of police officers towards those living with mental illness shows high rates of stigma with officers perceiving those with mental illness as “dangerous, incompetent, and irresponsible” (Jones & Thomas, 2019). Such attitudes are associated with increased use of force by officers (Jones & Thomas,). This raises concerns about the safety of people with mental illness during police encounters (DeGue et al., 2016). In fact, data from the National Violent Death Reporting System suggest that in one of five killings by police officers, the victim exhibited clear symptoms of substance use or mental health challenges during the encounter (DeGue et al.). Yet, many times such encounters with law enforcement were initiated by someone concerned for the safety of the victim (DeGue et al.). The frequency at which people with mental illness experience violence from police is alarming. From 2000–2012, 42% of people shot by law enforcement in Maine had a mental health disorder. Many were killed within the first few minutes of the encounter, despite officers’ knowledge of the mental health crisis (Bouchard, 2012).

The Editorial Team from The Counted (2015) cite concerns regarding encounters frequently described as “suicide by cop,” when the victim is reported to intentionally provoke the use of lethal force in order to end their own life; officers in some cases reported feeling threatened by the victim to justify their use of fatal force. However, The Counted’s (2015) investigation discovered that in only one in six cases deemed “suicide by cop” did the victims display clear suicidal intent prior to the encounter. In the majority of encounters in this category,

officers responded to a person experiencing an active mental health crisis but not necessarily exhibiting suicidal intent (The Counted Editorial Team, . According to DeGue et al., (2016) “suicide by cop” fatalities account for 17.9% of killings by police. While it is not always clear if a mental illness directly impacted the behavior of the victim, The Counted’s (2015) reporting raises concerns that law enforcement justifies their use of lethal force by claiming the victim was suicidal or mentally disturbed.

Across the country between 25-50% of individuals who were killed by police had a mental illness; (DeGue et al., 2016; Mather & Queally, 2016; Bouchard, 2012). Rates vary by location, reliability of data, and inconsistent reporting of incidents, with many locations reporting even higher percentages. For instance, in Albuquerque, New Mexico, data from 2006 to 2010 revealed that 54% of people shot by police had a history of mental illness. In 2011, 75% of individuals shot and killed by police in Portland, Oregon were experiencing a mental health challenge (Bouchard, . During the same year in New Hampshire, 80% of those shot and killed in an encounter with law enforcement had a mental illness (Bouchard, .

When comparing racial demographics, White people are killed in mental health or substance use-related encounters at three times the rate of Black people; in incidents described as “suicide by cop”, White people are killed at seven times the rate of Black people (DeGue et al., 2016). In fact, the majority of victims killed in suicide by cop encounters are older White men (The Counted Editorial Team, 2015). Overall, the statistics of individuals shot or killed by police while experiencing a mental health crisis is staggering.

This concerning high prevalence is also evidenced in non-fatal violent encounters with police. In 2015, over a third of individuals shot by (fatally and non-fatally) police in Los Angeles had signs of mental illness; during the same time period, about a quarter of use-of-force

encounters involved a person whom the officer reported to be showing signs of mental disturbance (Mather & Queally, 2016). Sixty percent of people shot by police in 2011 in Syracuse NY had a mental health disorder (Bouchard, 2012). The data overwhelmingly raises concerns about the overall treatment by police of individuals during a mental health crisis. Given this concern and the high prevalence of encounters between the mentally ill and law enforcement, counselors are likely to encounter individuals who have had multiple negative encounters with police and who are at risk of being further victimized (DeGue et al., 2016). As such, it is imperative that counselors give special attention to the impact of police encounters in their work.

The Impact of Police Violence on Mental Health

Given the prevalence rates of police-inflicted violence noted above, “the elevated risk of police violence currently experienced by US civilians is a significant mental health concern” (Devylder, 2017). Ongoing fatalities continue to subject individuals and communities to the sudden loss of loved ones. While survivors of police-inflicted violence and their loved ones deal with the lingering impact of trauma and increased risk of mental health symptoms, the impacts of such losses ripple through communities as people across the nation routinely experience the trauma of police-inflicted violence.

Impact on Individuals Dealing with Loss of Loved One Due to Police Violence

The sudden and violent loss of a loved one can adversely affect mental health in a substantial number of bereaved people. In fact, killing by police often leads to the development of Post-Traumatic Stress Disorder (PTSD) in the victim’s loved ones. Other mental disorders such as anxiety, depression, or complicated grief commonly occur as survivors grapple with the horrifying loss of their loved one (Kristensen et al., 2012). Mental health symptoms are elevated

after sudden death, can cause an increase in impaired functioning, and the trajectory of recovery seems slower when compared to a naturally occurring loss. Adolescents are particularly at risk for PTSD, anxiety, depression, and substance abuse; the challenges in coping with such a loss are exacerbated by economic stressors, relational strain amongst family members, and the intrusion of media or justice systems (Rheingold et al., 2011). It can reasonably be deduced that the loss of a loved one from police violence will have similar mental health outcomes.

Many bereaved re-experience or repeatedly imagine the violent death causing significant distress (Kristensen et al., 2012). Other common features of grief after sudden and violent loss include rumination about how the death could have been prevented, which may also lead to self-blame; these intense grief and mental health symptoms frequently take longer to subside after a violent death (Kristensen et al.,). Furthermore, death caused by homicide frequently involves media coverage and ongoing court cases causing loved ones to re-live the trauma repeatedly; these drawn-out processes are associated with higher levels of complicated grief and PTSD symptoms (Kristensen et al.,). Additionally, continued encounters or harassment from law enforcement can exacerbate the mental health symptoms for survivors of police brutality and loved ones of those lost to police killings (Outland, 2021).

Police Brutality Increases Risk of Mental Health Symptoms in Vulnerable Populations

Coverage of the police killings of Black men has a widespread impact not only on people's perception of the police but on mental health outcomes (Devylder, 2017). This may be particularly true for communities of color, as continued exposure to traumatic events is associated with increased levels of depression (Devylder). Psychological harm from brutal policing is inflicted on individuals and communities in a variety of ways, including sexual violence, inappropriate traffic stops, non-fatal injuries, and students in schools experiencing

violence from school resource officers (American Public Health Association, 2018; Devylder,). Black individuals residing in states with highest levels of police killings also report experiencing higher rates of mental health symptoms (American Public Health Association,).

Experiences with the police have a powerful influence in shaping perceptions of the police; when individuals feel threatened during encounters with law enforcement, it can lead to hypervigilance, stress, and distrust (DeGue et al., 2016; Outland, 2021; Staggers-Hakim, 2016). People living with mental illness report negative attitudes toward the police based on their prior experiences with law enforcement, specifically describing negative encounters with concerns that they were not given a voice or treated with dignity by the officers involved (DeGue et al., 2016).

Additionally, youth of Color demonstrate higher levels of distrust toward police officers due to the systemic lack of accountability for officers who are violent (Outland, 2021; Staggers-Hakim, 2016). In other words, police officers are believed to kill with impunity, being repeatedly absolved of guilt by the legal system and in many cases, they continue to police and patrol the very same community where they took a life. The ongoing presence of such officers leads to heightened levels of distress and hypervigilance for the entire community and particularly for the loved ones of victims of police violence (Outland, 2021; Staggers-Hakim, 2016).

A “non-violent” traffic stop that feels intrusive or discriminatory perpetuates psychological harm, sometimes leading to anxiety, depression, and PTSD (American Public Health Association, 2018). In fact, the symptoms of post-traumatic stress (such as flashbacks, intrusive thoughts, nightmares, and irritability) frequently appear in young Black males after “non-violent” encounters with the police (Aymer, 2016). This stems from high levels of fear provoked during the encounter, the unfairness of being stopped without having committed an

infraction, and the over-response of officers, such as patting down, drawing a weapon, etc. (Aymer, 2016; Outland, 2021). In fact, stop-and-frisk policies and regular use of force are associated with higher levels of psychological distress among men living within these communities (American Public Health Association, 2018). Overall, Black individuals are more likely to report these forms of stress than their White counterparts after an encounter with law enforcement (American Public Health Association, 2018).

There are further concerns about how police killings impact the trajectory of development for boys of Color as they are repeatedly exposed to traumatic police violence (American Public Health Association, 2018; Outland, 2021; Stagers-Hakim, 2016). Outland (2021) emphasizes that both the historical and the ongoing perpetuation of police violence have a significant impact on young people in communities of Color. He raises concern that lack of accountability for officers who perpetuate violence “permits the destruction of innocent lives by those in power” (Outland, 2021, p. 232) under the guise of protecting citizens. Stagers-Hakim (2016) conducted a study of teenage African American boys, to examine the impact of police killings. The boys reported concerns that they are perceived as a threat, which puts them at risk for becoming a victim of a police-inflicted killing. The boys reported ongoing fear for themselves and their friends, expressing the need to be particularly careful when around law enforcement, and to avoid any type of confrontation in order to “get home alive” (Stagers-Hakim, 2016). Such learned hypervigilance combined with the lack of officer accountability essentially places the responsibility of preventing police violence on the people most likely to be victimized. The ongoing threat of violence and lived experiences of communities of color with police-inflicted harassment creates an ongoing distrust for and hypervigilance of police, beginning in key developmental years.

Counselors understand (and research supports) that repeated exposure to traumatic experiences leaves individuals at heightened risk for the development of mental health symptoms. While there is limited data on other populations who are repeatedly subjected to police-inflicted violence, it can be reasonably understood that these as well may be living with the negative impact of trauma.

Potential Differences in Client and Counselor Demographics

It is important to understand that the differences in mental health practitioners' demographics and that of their clients can result in a significant difference in cultural beliefs and perceptions, and implicit biases, which can impact the therapeutic space and client outcomes. According to Zippia (2022), 76.4% of mental health practitioners are White, 6.3% are Hispanic or Latino, 4.1% are Black or African American, and .4% are American Indian and Alaska Native. Individuals seeking mental health treatment are demographically quite different than the mental health practitioners providing their treatment. The annual National Survey on Drug Use and Health (NSDUH) indicates that individuals that identify as having two or more races are the most likely to utilize mental health services, followed by American Indian or Alaska Natives, then Whites, Black or African Americans, Hispanic or Latinos, and finally Asians (Center for Behavioral Health Statistics and Quality, 2021). These statistics demonstrate that there is a clear difference in the demographic makeup of practitioners providing mental health services and individuals seeking them out. .

Differences in Perceptions of Police and Policing based on Demographics

The US Commission on Civil Rights & Government (2019) highlights why understanding the differences of experiences and perceptions of police among different marginalized groups is increasingly important:

The relationship between law enforcement and many communities in the U.S. is fraught and challenging, particularly for those who experience violent crimes coupled with intensive police presence and surveillance...For the first time in decades, the country has witnessed ubiquitous and sustained protests by young people, communities of Color, and other impacted populations in cities all across the country. (p. 1)

Mainstream perceptions of police include the belief that the police are friendly, treat civilians fairly, are trustworthy, unbiased, and care about the communities they serve. Less positive perceptions of police have been linked to poorer mental health, less social support, and a reluctance to report crimes (Taylor et al., 2020). A significant public shift in the perception of police officers and organizations has occurred over the past several years. While the recent murder of George Floyd was not the first of its kind, polls have shown that more people believe that this incident is indicative of a larger systemic and cultural problem in policing than after similar killings involving Michael Brown and Eric Garner in 2014 (Kelley et al., 2021).

According to a survey conducted in 2020, there is a decrease in the percentage of people who believe that officers are held accountable for their actions, use the proper amount of force, and treat racial and ethnic groups impartially. Two-thirds of Americans also believe that civilians should be able to sue police officers for excessive use of force (Pew Research Center). This shift occurred over a relatively brief period of time in response to high-profile killings of Black Americans by police officers in 2020. It is also important to consider that often, research on the perceptions of law enforcement is likely to survey the general population and can be apt to underrepresent the opinions or stances of those who are the most impacted by harsh policing

practices, which may result in underreporting of negative perceptions of police (U.S. Commission on Civil Rights & Government, 2019).

A recent study conducted by the US Commission on Civil Rights & Government (2019) targeted low-income urban populations across six major US cities, indicates that communities of Color and poor communities are among the most highly targeted and surveilled by police. Individuals in these communities often do not trust the police or believe officers are there to protect them (US Commission on Civil Rights & Government, 2019). Due to an increase in public awareness around the lack of accountability for officers who use excessive force, and the lack of transparency regarding decisions around police accountability, public trust in the police has been negatively impacted, particularly in these groups. According to the same study, only a small percentage of people believed that police departments adhere to the principles of community policing. Respondents in the study did not feel safe around police or find them trustworthy and did not believe that police behaved in legitimate ways or acted in accordance with the law (US Commission on Civil Rights & Government).

According to Kelley et al (2021), Black people are found to be less trusting of the police due to racially unjust treatment by the police. Individuals are likely to develop positions on the police based on their group identity, the perception of harm or threat to their group, and the potential of institutions to protect the status quo that favors advantaged groups and disfavors marginalized groups (Kelley et al., 2021). Individuals from historically marginalized groups are much more likely to have negative perceptions of police when compared with other more socio-culturally privileged people; these negative perceptions may in part be due to bias and discrimination against marginalized groups in policing (Taylor et al., 2020).

A stark political divide has emerged in attitudes and beliefs towards policing. While Democrats' views of police have become more negative over the past few years, Republicans' views have stayed the same or improved (Pew Research Center, 2021). It is important to recognize that the demographic makeup of political parties impacts this divide. Black individuals and members of other marginalized groups are much more likely to be Democrats than White individuals and given the politicization of issues around policing and law and order it is worth noting that some of these demographic differences may translate to underlying political differences (Kelley et al., 2021).

While studies clearly indicate that marginalized groups have increasingly negative perceptions of police, White Americans continue to hold a more positive view of law enforcement. White individuals are more likely to view the police force as a vital social institution, not in small part due to the role that police have historically played and continue to play in maintaining White dominance and may even go as far as to perceive support for the police in the face of recent events as patriotic (Taylor & Wilcox, 2021).

It is evident that recent attention around police violence is much less likely to have changed the positive perceptions of police that Whites, and specifically White counselors, expectedly hold (Taylor & Wilcox, 2021) in comparison to the attitudes of clients who are members of vulnerable groups such as clients of Color that they serve (Kelley et al., 2021). As Mental Health practitioners are most likely to be White (Zippia, 2022), it is probable that they will hold views around police and law enforcement that are significantly different from the clients they work with.

Counselor's Attitudes and Beliefs Impact on Treatment

In a counselor-client relationship, counselors hold a position of power in relation to the client, and counselor perceptions, beliefs, and attitudes have been shown to have a significant impact on client outcomes (Charnin, 2015). Bias and discriminatory beliefs against marginalized groups have been shown to negatively impact mental health assessment and intervention, resulting in a barrier to positive client outcomes (Merino et al., 2018).

In addition to explicit bias and discriminatory beliefs, counselors often hold implicit biases, which while unintentional, can be harmful to the therapeutic alliance and detrimental to client outcomes. Counselors' implicit bias and beliefs around policing can result in the attribution of client responsibility as the cause of the police violence and brutality perpetrated against the client (Charnin, 2015). Implicit biases can be of particular concern in mental health practitioners due to heavy reliance on providers' discretion for diagnosis and treatment. These biases may affect a counselor's engagement in patient-centered care, and adherence to evidence-based practices when serving diverse populations. Counselors' attitudes about groups, including those marginalized groups that are most likely to have negative interactions with police, can have significant obstructive consequences for individuals seeking mental health treatment (Merino et al., 2018).

When it comes to groups who are disproportionately impacted by police brutality and harassment, counselor perceptions may result in pathologizing the client's vigilance around police officers. A provider, based on their personal beliefs and biases, may interpret this behavior as paranoia, rather than recognize it as a natural result of racial profiling and discrimination. This difference in how counselors may view the same concern can significantly alter treatment planning, diagnosis, assessment, and interpretation of symptoms (Merino et al., 2018), resulting in significant discrepancies in client outcomes and quality of care.

Not only can mental health practitioners' beliefs impact client outcomes, but they may also prevent certain groups from seeking out, accessing, or adhering to mental health treatment. Therapy is often provided in a one-on-one setting, which results in a single practitioner being the gatekeeper to treatment and quality of treatment. Clients from marginalized groups with mental disorders are more likely to report inferior quality of care from mental health practitioners. These negative experiences can impact client adherence to treatment and deter clients from seeking out treatment due to past negative experiences or reported negative experiences of other community or group members (Merino et al., 2018).

Conclusion

Counselors will likely encounter clients who are disproportionately impacted by police-inflicted violence. Due to the differences in demographics of clients and counselors, it is likely that White counselors will have different perceptions of law enforcement than their diverse clientele. As such, counselors must be mindful that negative attitudes toward police frequently come from lived experience and the very real threat of violence from law enforcement. Counselor beliefs, attitudes, and biases can impact every aspect of mental health treatment, including screening, diagnosis, treatment, adherence to evidence-based practices, and quality of care. Counselors who maintain generally positive attitudes toward the current state of policing may be apt to misunderstand or be suspicious of client accounts of police interactions and may downplay the trauma inflicted on marginalized people in police encounters. These beliefs around police held by counselors may be incongruent with client realities and could directly impact the quality of treatment as well as client outcomes; this makes it important to understand and be aware of counselor beliefs and attitudes held around police violence, particularly due to the

increased likelihood that individuals from marginalized groups, including those with mental disorders, are more likely to have negative experiences and perceptions of police.

We recommend that further research focus on understanding the issues presented here, including how to reduce police violence (particularly when at risk groups are targeted), counselor perceptions of police, how diverse populations are impacted by police violence (including Native Americans, Middle Eastern people, Latinx people, women, immigrants, and sexual minorities), effective community interventions for reducing police violence, and the experiences of clients who have been impacted by police violence in the therapeutic space.

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