INTER-AGENCY COLLABORATIONS AMONG MENTAL HEALTH AND LAW ENFORCEMENT PROFESSIONALS IN SAN BERNARDINO COUNTY DURING COVID-19: A QUALITATIVE STUDY

Sonya McIsaac

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INTER-Agency Collaborations Among Mental Health and Law Enforcement Professionals in San Bernardino County During COVID-19: A Qualitative Study

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Sonya M. McIsaac
May 2022
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ENFORCEMENT PROFESSIONALS IN SAN BERNARDINO COUNTY DURING
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Approved by:

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ABSTRACT

As first responders, law enforcement officers and mental health professionals are constantly sought after regarding the delivery of critical services to people in need. However, the COVID-19 pandemic brought almost everything to a halt. It is therefore important to understand how social services were delivered during the crisis. It has been assumed in the literature that interprofessional collaboration is an important service delivery framework. However, because COVID-19 is a relatively recent public health phenomenon, relevant studies on interprofessional collaboration between law enforcement officers and mental health professionals are scant, if not non-existent. This qualitative study addresses this gap by exploring (a) how mental health services had been delivered in San Bernardino County during the COVID-19 pandemic and (b) whether working collaboration between mental health and law enforcement professionals had impacted mental health service delivery in San Bernardino County during the COVID-19 pandemic. Semi-structured interviews were conducted with 21 police officers and mental health professions during the Spring 2022 Semester (N = 21). Thematic analysis of the data generated four major themes: (1) across San Bernardino County, mental health services had been delivered to a degree during the COVID-19 Pandemic; (2) mental health and law enforcement professionals utilized various strategies to cope with the challenges of the COVID-19 Pandemic; (3) a broad range of factors made the delivery of mental health service possible during the COVID-19 Pandemic; and
(4) inter-agency collaboration could prove to be useful during times of crisis. The qualitative findings carry major implications for social service organizations, law enforcement, social work, and public health.

*Keywords*: law enforcement, mental health, social work, COVID-19 pandemic, thematic analysis
ACKNOWLEDGEMENTS

I would like to acknowledge the MSW faculty and administrative staff at CSUSB. Thank you for the patience, understanding, and mercy you have graciously shown. I am forever changed because of it. I vow to extend it to others in times of need. To my cohort, I would like to thank you all for the support you have provided along this journey. I am grateful to have experienced your resiliency, passion, and desire for knowledge. I am confident the world will be a better place with you as social workers in it. To my TEST and Blue Diamond family, you have been the wind beneath my wings allowing me to soar to higher heights. I am forever grateful.
DEDICATION

To my daughter, Miyani. It is with infinite joy that I dedicate this project to you. You have inspired me beyond compare. Words cannot convey how you have changed my life. You have encouraged me to view the world through a different lens. Your unwavering support during my darkest hours enabled me to prevail. I am proud and honored to be your mother.
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Mental illness is one of the most common health conditions in the United States. According to the National Institute of Mental Health (2021), approximately 52 million adult Americans experienced a mental illness in 2019. Mental illness is a condition that affects a person's thinking, feeling, behavior or mood which deeply impacts day-to-day living and interactions with others. Causes of mental illness include but are not limited to genetics, environment, and lifestyle influences (National Alliance on Mental Illness [NAMI], 2021). An online screening of 1,093,519 individuals for depression and anxiety conducted by Mental Health America in 2020 revealed an increase in these mental health issues among minority groups, including Asian Americans/Pacific Islanders, African Americans, Hispanic Americans/Latinos, biracial Americans, and Native Americans (Mental Health, 2020). Figure 1 corroborates the aforementioned claim.
With the COVID-19 pandemic, more people are likely to experience mental health issues. In fact, in the United and across the entire globe, the pandemic has snatched away millions of lives, leaving surviving family members in disarray. There are countless of empty chairs at dinner tables. These chairs used to be occupied by loved ones who now no longer exist. Meanwhile, the pandemic limited the delivery of mental health services at a time when individuals need them the most. Taken together, these two scenarios potentially constitute a recipe for an increase in mental health, particularly among the underprivileged populations.
Interventions

There are many interventions to mental health. Some of the early precededented, legal interventions were The National Mental Health Act of 1946 and The Social Security Amendments of 1965. The Patient Protection and Affordable Care Act of 2010 and The Mental Health Parity and Addiction Equity Act of 2008 are more recent. All have ensured consumers adequate access to mental health services.

The National Mental Health Act of 1946, (NMHA) was instrumental in early research of mental illness as it funded studies that explored causes, diagnosis, and treatment of mental health and psychiatric disorders. These studies were conducted by the National Institute of Mental Health, (NIMH). Early research revealed high incidences of mental illness due to repressed feelings among veterans prior to military enlistment. This attracted federal attention due to the demands of veterans and their families and prompted immediate governmental interventions. State funding was redirected for federal research. The National Mental Health Act of 1946, (NMHA) catapulted the National Institute of Mental Health, (NIMH) to a leader in research and analysis of psychiatric disorders and the brain. (National Institute of Mental Health, 2017; US Congress, P.L. 79-487)

The Social Security Amendments of 1965 was another early intervention. It was signed into law by President Lyndon B. Johnson on July 30, 1965, and created two of the largest medical insurance providers, Medicare, and Medicaid. These providers have been considered possibly the largest payers of mental
health services. President Johnson accomplished what previous presidents, Roosevelt and Truman could not in the thirties and forties by ensuring that the law remained ever changing to address important matters related to consumers. (Centers for Medicare and Medicaid Services, 2020; US Congress, P. L. 89–97).

A more recent, legal intervention of mental health is The Mental Health Parity and Addiction Equity Act of 2008, (MHPAEA) passed by congress in 2008 which ensures equal coverage of treatment for mental illness and addiction within insurance plans. In November 2013, rules implementing the law was released by the federal government. Prior to this law, mental health treatment was often covered at considerably lower levels in health insurance policies compared to physical illness. (Substance Abuse and Mental Health Services Administration [SAMHSA], 2021).

The Affordable Care Act, (ACA), formally known as the Patient Protection and Affordable Care Act of 2010 is another recent legal, mental health intervention. This act was often referred to as Obamacare and was signed into law on Mach 23, 2010 by then President Barack Obama. It is the most significant revamping of medical coverage since the passing of Medicare and Medicaid in 1965 in that it allows medical coverage for individuals with mental health issues and pre-existing medical conditions. (US Congress, P. L. 111-148).

Significance of Study

The purpose of this study is to answer these two questions: (1) How have mental health services been delivered in San Bernardino County during the
COVID-19 pandemic? 2) Does interprofessional collaboration among mental health and law enforcement professionals’ impact mental health service delivery in San Bernardino County during the COVID-19 pandemic? The pandemic brought almost everything to a halt. It is important to understand how social services were delivered during the crisis. As first responders, law enforcement officers and mental health professionals are constantly sought after regarding the delivery of critical services to people in need. Because COVID-19 is a relatively recent public health phenomenon, relevant studies on interprofessional collaboration between law enforcement officers and mental health professionals are scant, if not non-existent.

This study, therefore, fills an important gap in the literature on service delivery during crises by exploring collaboration between two human service stakeholders in San Bernardino County: police officers and mental health professionals. This study has implications for the profession of social work whose primary goal is to serve people in need. Arguably, the pandemic accelerated the need for safety and mental health services. Social workers have an ethical obligation to assess the delivery of services to individuals and families. Social workers also have the obligation to advocate for services with and on behalf of their clients. Hence, this study is consistent with micro and macro social work practice.
CHAPTER TWO
LITERATURE REVIEW

Introduction

This chapter will consist of an examination of relevant research to inter-agency collaborations between mental health and law enforcement professionals. This chapter also identifies gap in the existing literature and critically analyzes the theoretical framework that guides this research project.

Existing Studies on Police-Social Work Collaboration

There is a decent amount of scholarship on collaboration between law enforcement and social work professionals (Buchbinder & Eisikovits, 2008; Fein & Knaut, 1986; Jacobs et al., 2021; Patterson, 2004; Patterson, 2007; Patterson, 2019; Patterson & Swan, 2019; Peaslee, 2009; Shapiro et al., 2015; Treger, 1981). However, police-social work collaboration does not receive universal approval in the literature, with some scholars (e.g., Bar-On, 1995; Jacobs et al., 2021) advocating vehemently against such practice. With the rise of the Black Lives Matter movement, one could expect more opposition against collaboration between law enforcement and social work. Controversy aside, several studies have shown support for the police-social work partnership.

In a review of the literature on social work practice in the criminal justice system in the United States, Patterson (2019) concluded that social work and law enforcement collaboration should be pursued when the goal is for the benefits of clients. For example, social workers can help the criminal justice system become
more restorative and not retributive (Patterson, 2019). This is consistent with the ethical values of the social work profession. The police-social work partnership was also found beneficial in elementary and secondary schools, particularly as a way to prevent and address youth delinquent behavior on school grounds (Patterson, 2007).

Similarly, Peaslee (2009) pushed for community policing and social service partnerships by illustrating the case of the Boston Strategy to Prevent Youth Violence and the New Haven Youth Oriented Policing Initiative. Peaslee (2009) considered the police a key first responding player regarding prevention and intervention services for youth. In other words, police officers can play many roles as part of a partnership with social service providers. Coordination and referral on behalf to services on behalf of youth are two key functions law enforcement officers can occupy in collaboration dyad.

Meanwhile, in a systematic review, Patterson, and Swan (2019) looked at a three-way collaboration involving law enforcement, social work, and social service organizations in addressing social problems in the United States. An outstanding 83 collaborations were found among these three entities, mostly between police and social service agencies (Patterson & Swan, 2019). The findings in Patterson and Swan’s (2019) systematic review indicate that interprofessional collaboration was essential in addressing interpersonal violence, mental illness, crime, juvenile delinquency, substance use. Patterson and Swan (2019) noted that law enforcement does not have the apparatus and
name recognition as do social work and social service. Yet, as first responders, the police remain a key player in the service delivery system.

In the same vein, Shapiro et al. (2015) conducted a review of the literature on collaboration between two types of co-responders—police and mental health professionals—with regard to successful interventions for emotionally disturbed persons. 21 scholarly non-scholarly materials were identified in Shapiro et al.’s (2015) review. Results revealed that collaboration between police officers and mental health professionals facilitated the referral of emotionally disturbed persons to available resources in the community, thereby allowing the criminal justice system to function more smoothly.

Regarding crisis intervention, the work of Patterson (2004) also illustrated the importance of police-social work collaboration. Analyzing data from a law enforcement agency in the northeastern part of the United States, Patterson (2004) found that such partnership facilitated the implementation of a variety of services. These included but were not limited to crisis intervention, short-term counseling, follow-up contacts, and linkages. Patterson (2004) concluded that the working alliance between different systems (police and social service) is a useful service delivery strategy.

However, a qualitative study conducted by Buchbinder and Eisikovits (2008) on police-social work collaboration in Israel showed the need for structure in the working alliance. The findings in Buchbinder and Eisikovits’ (2008) work revealed, among other themes, issues regarding boundary, accountability, and
lack of institutional endorsement. For more effective outcomes, social service agencies and lawmakers should clearly define boundaries and expectations of collaboration, which then should be administratively supported (Buchbinder & Eisikovits, 2008).

Limitations of Previous Research

The literature on collaboration between law enforcement and social work is limited in two major ways. First, existing studies (e.g., Buchbinder & Eisikovits, 2008; Patterson, 2004; Patterson, 2007; Patterson, 2019; Patterson & Swan, 2019; Peaslee, 2009; Shapiro et al., 2015) were conducted before the COVID-19 pandemic struck. These studies therefore did not assess collaboration that occurred during the pandemic. Second, the aforementioned studies were mostly conducted outside the state of California, the most populous in the United States. This study fills these two gaps in the literature by exploring whether police-social work collaboration impacted mental health service delivery in San Bernardino County during the COVID-19 pandemic.

Theoretical Framework Guiding This Research

The theoretical framework that guides this study is Systems Theory, one of the mostly used frameworks in the literature (Friedman & Allen, 2011; Greene, 2017; Hammond, 2010; Kondrat, 2002; Walby, 2007; Warren et al., 1998). Austrian biologist von Bertalanffy developed this theory in 1968 (von Bertalanffy, 1968). A system is a set of different elements that work together toward its equilibrium. Systems Theory considers the whole as more important
than the sum of its parts and emphasizes interconnection with other systems 
(von Bertalanffy, 1968). That is, a system tends to remain open to other systems. 
Hence, it can be argued that Systems Theory implies interdisciplinary 
collaboration. In this study, Systems Theory permeates the working alliance 
between law enforcement officers and mental health professionals. Working 
alliance is an important concept in service delivery (Ferreira & von Schönfeld, 
2020; Koch & Rumrill Jr, 1998; Koch et al., 2005; Tappenden et al., 2013).

Previous research has assessed the theoretical quality of Systems Theory 
with the Theory Evaluation Scale (TES). Developed by social work experts 
Rigaud Joseph and Mark J. Macgowan, the TES is the only instrument in the 
literature that assesses the quality of theories quantitatively (Joseph & 
Macgowan, 2019). In recent years, the social work has known a wave of 
scholarship on the TES (Contreras, 2019; Drew et al., 2021; Joseph, 2020a; 

Four social work scholars—Contreras (2019), Koehler and Parrell (2020), 
Navarro (2019), and Ramirez and Rodriguez (2019)—appraised the theoretical 
value of Systems Theory, using the nine criteria of the TES: coherence, 
conceptual clarity, philosophical underpinnings, historical development, 
testability, empirical evidence, scope of competence, utility, and human agency. 
In all four studies, Systems Theory fell within the range of 30 to 45 (Contreras, 
Under the TES, this range indicates an excellent overall theoretical quality.

Hence, this study utilizes a strong and appropriate theory to guide its findings.
CHAPTER THREE

METHODS

Introduction

The goal of this study is to explore interprofessional collaborations among mental health and law enforcement professionals in San Bernardino County regarding mental health service delivery during COVID-19. This chapter will demonstrate the steps taken to implement this study, particularly protection of human subjects, research design, sampling, data collection procedures, and data analysis.

Ethics/Protection of Human Subjects

The California State University San Bernardino Institutional Review Board (IRB) granted approval to conduct this study. Participant’s responses remained confidential throughout the research process. All data collected were reported without any personal and identifying information. All electronic, written, and audio data are stored in password-protected files and computers. All information is backed up, using the California State University San Bernardino’s cloud programs (Google Drive and Zoom). All collected data will be destroyed three years after the completion of this study.

Research Design

This qualitative study uses an exploratory research design to understand (a) how mental health services had been delivered in San Bernardino County during the COVID-19 pandemic and (b) whether working collaboration between
mental health and law enforcement professionals had impacted mental health service delivery in San Bernardino County during the COVID-19 pandemic. Despite its limitations in terms of potential for bias and lack of generalization, qualitative research allows researchers to assess participants’ feelings and experiences. In this study, this methodological approach helped the researcher obtain.

Sampling

The researcher took two non-probability sampling methods to recruit participants: convenience sampling and snowball sampling. First, the researcher recruited law enforcement officers and mental health professionals with whom there exists a working relationship. These participants then refer other colleagues to the study. The sample was limited to police officers and mental health professionals (social workers, family therapists, mental health counselors) who provided mental health-related services during the pandemic. All participants were people working with the County of San Bernardino. The final sample was made of 21 participants (N = 21).

Data Collection Instruments and Procedures

This study was conducted during the Spring 2022 Semester. The researcher developed an interview guide consisting of two sections. One section contains demographic questions: age, gender, race, education, and mental health training, while the other section has the interview questions. The open-
ended interview questions relate to the challenges faced in providing mental health services during COVID-19 pandemic and outcomes of inter-agency collaboration. Due to COVID-19 guidelines set by the Centers for Disease Control and Prevention, the researcher conducted the interview via Zoom. The research interviewed only participants who provided verbal participation consent via Zoom.

Data Analysis

First, the researcher transferred Zoom interview transcripts into a word document for data analysis purposes. Then the researcher employed thematic analysis procedures to analyze the transcribed data. The thematic analysis process was done through several steps, from coding the data to organizing the codes into categories and then the categories into larger themes. As for the demographic variables, the researcher used IBM-SPSS, Version 28, to obtain their frequency distributions. These variables were used for descriptive statistics only.
CHAPTER FOUR

RESULTS

Frequency Distributions

Table 1 shows the frequency distributions of the sample. The participants came from diverse backgrounds. From a racial point of view, two thirds of them were minority and one-third Caucasian. In terms of age, two-thirds of the participants reported being under the age of 50, with the remaining third 50 and over. Regarding gender, more than half of the respondents identified as female, and the rest as male. In terms of education, slightly over three-quarters of respondents earned less than a master’s degree. Finally, two thirds of participants reported 10 years of experience or more in providing social services.

Table 1

<table>
<thead>
<tr>
<th>Variables</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Race/Ethnicity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>7</td>
<td>33.3</td>
</tr>
<tr>
<td>Black</td>
<td>5</td>
<td>23.8</td>
</tr>
<tr>
<td>Hispanic</td>
<td>8</td>
<td>38.1</td>
</tr>
<tr>
<td>Asian</td>
<td>1</td>
<td>4.7</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 35</td>
<td>4</td>
<td>19.0</td>
</tr>
<tr>
<td>36 to 49</td>
<td>10</td>
<td>47.7</td>
</tr>
<tr>
<td>50 and Over</td>
<td>7</td>
<td>33.3</td>
</tr>
<tr>
<td>Gender</td>
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<td></td>
</tr>
<tr>
<td>Male</td>
<td>9</td>
<td>42.9</td>
</tr>
<tr>
<td>Female</td>
<td>12</td>
<td>57.1</td>
</tr>
<tr>
<td>Education Level</td>
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<td></td>
</tr>
<tr>
<td>Bachelor’s or less</td>
<td>16</td>
<td>76.2</td>
</tr>
<tr>
<td>Master’s or more</td>
<td>5</td>
<td>23.8</td>
</tr>
<tr>
<td>Years of Experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 10 Years</td>
<td>7</td>
<td>33.3</td>
</tr>
<tr>
<td>10 Years of More</td>
<td>14</td>
<td>66.7</td>
</tr>
</tbody>
</table>
Findings

Study Themes

This study sought to answer two questions: (1) How have mental health services been delivered in San Bernardino County during the COVID-19 pandemic? 2) Does inter-agency collaborations among mental health and law enforcement professionals’ impact mental health service delivery in San Bernardino County during the COVID-19 pandemic? The analysis of the data generated four major themes: (1) across San Bernardino County, mental health services had been delivered to a degree during the COVID-19 Pandemic; (2) mental health and law enforcement professionals utilized various strategies to cope with the challenges of the COVID-19 Pandemic; (3) a broad range of factors made the delivery of mental health service possible during the COVID-19 Pandemic; and (4) inter-agency collaborations could prove to be useful during times of crisis. Table 2 highlights these themes. The research describes each of them below.
Table 2

Study Major Themes

<table>
<thead>
<tr>
<th>Themes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theme 1</td>
<td>Across San Bernardino County, mental health services had been delivered to a lesser degree during the COVID-19 Pandemic.</td>
</tr>
<tr>
<td>Theme 2</td>
<td>Mental health and law enforcement professionals utilized various strategies to cope with the challenges of the COVID-19 Pandemic.</td>
</tr>
<tr>
<td>Theme 3</td>
<td>A broad range of factors made the delivery of mental health service possible during the COVID-19 Pandemic.</td>
</tr>
<tr>
<td>Theme 4</td>
<td>Inter-agency collaborations could prove to be useful during times of crisis.</td>
</tr>
</tbody>
</table>

Theme 1: Lesser Degree of Services

Across San Bernardino County, mental health services had been delivered to a lesser degree during the COVID-19 Pandemic. The pandemic strained the mental health system, resulting in less resources and longer processing times. Those in search of mental health services were delayed due to COVID-19 restrictions, often causing delays and interruptions in service delivery. Mental health and law enforcement professionals’ faced challenges in navigating systems of care and connecting individuals to pertinent resources as a result. Study participants could not provide mental health services in pre-pandemic fashion. Participants reported:

*We worked [were restricted] 6-8 hours in the office. (Participant A)*

*[With COVID-19, there was an] inability to respond to calls. (Participant C)*

*Challenges with medical clearances due to COVID-19. (Participant J)*
Lack of available resources. (Participant P)

[With COVID-19], everything was a domino effect. (Participant M)

It [COVID-19] handcuffed us, not having social workers to assess people. (Participant N1)

Theme 2: Various Coping Strategies Used During the Pandemic

The COVID-19 Pandemic struck the country hard, halting delivery of services globally, San Bernardino County was not exempt. COVID-19 strained the delivery of mental health services in San Bernardino County leaving mental health and law enforcement professionals with limited access to internal and external resources. Mental health and law enforcement professionals were restricted due to agency protocols because of the COVID-19 Pandemic. Policy changes limited collaborative support and access to mental health resources. Mental health professionals were restricted to providing mental health support to law enforcement and individuals via phone and virtually. Many mental health and law enforcement agencies worked with limited staff during the pandemic because of contracting COVID-19. Mental health and law enforcement professionals adapted strategies to deal with the challenges of the pandemic by utilizing alternative coping skills, personal and professional. Mental health and law enforcement professionals realized the importance of self-care during the pandemic to protect themselves and the individuals they served by adhering to California Department of Public Health’s, CDPH guidelines of practicing social
distancing and utilizing Personal Protective Equipment, PPE. Mental health and law enforcement professionals saw the value in inter-agency collaborations and community partnerships in sustaining mental health service delivery in San Bernardino County during the pandemic.

Participants expressed:

- Self-care, family, and agency support. (Participant C)
- Virtual Connection. (Participant C)
- Utilized DBH partners- “it was nice to have you guys to navigate through this” (Participant J)
- Accessed crisis facilities (Participant J)
- Acted like clinicians and counselors (Participant K)
- Increased CIT referrals to DBH (Participant P)

**Theme 3: Various Factors of Mental Health Services Delivery**

Mental health and law enforcement professionals were faced with many challenges during the COVID-19 pandemic. Mental health service delivery was strained and access to providers was limited. Respondents utilized coping skills and alternatives in maintaining request for mental health resources. A broad range of factors made the delivery of mental health services possible during the COVID-19 Pandemic:

- Self-Preservation. (Participant A)
- Law Enforcement learning from mental health. (Participant B)
- This [inter-agency collaborations] is what help looks like. (Participant B)
Explored, researched, and fostered better relationships. (Participant C)

Mental health accessible via phone. (Participant N2)

Utilized 24-hour resource-crisis facility. (Participant R)

I think it’s been a wonderful collaboration. (Participant T)

It will be interesting to see where mental health collaboration takes us.

( Participant N1)

Theme 4: The Importance of Inter-Agency Collaboration

Human connection is essential. Isolation diminishes mental health and alters daily functioning. The support of others is necessary, especially during times of crisis. Crises are inevitable and agencies must be prepared to intervene accordingly. Crisis can present in the form of a natural disaster or personal loss of a loved one, career, or place of residence Inter-agency collaborations could prove to be useful during times of crisis.

Need for a pandemic plan. (Participant A)

More communication between community partners. (Participant E)

Universal database for agencies and stakeholders. (Participant K)

Access to online services. (Participant K)

More mental health partners and 1st responders. (Participant O)

A team is better than 1. (Participant M)

Your position [mental health], takes pressure off us. (Participant Q)
CHAPTER FIVE
DISCUSSION

This study addresses this gap by exploring (a) how mental health services had been delivered in San Bernardino County during the COVID-19 pandemic and (b) whether working collaboration between mental health and law enforcement professionals had impacted mental health service delivery in San Bernardino County during the COVID-19 pandemic. Semi-structured interviews were conducted with 21 police officers and mental health professions during the Spring 2022 Semester (N = 21). Thematic analysis of the data generated four major themes: (1) across San Bernardino County, mental health services had been delivered to a degree during the COVID-19 Pandemic; (2) mental health and law enforcement professionals utilized various strategies to cope with the challenges of the COVID-19 Pandemic; (3) a broad range of factors made the delivery of mental health service possible during the COVID-19 Pandemic; and (4) interprofessional collaboration could prove to be useful during times of crisis.

Implications of the Findings

Implications of the Findings for Research

The literature on collaborations between law enforcement and social workers is limited in two major ways. First, existing studies (e.g., Buchbinder & Eisikovits, 2008; Patterson, 2004; Patterson, 2007; Patterson, 2019; Patterson & Swan, 2019; Peaslee, 2009; Shapiro et al., 2015) were conducted before the COVID-19 pandemic struck. These studies therefore did not assess collaboration
that occurred during the pandemic. Second, the aforementioned studies were mostly conducted outside the state of California, the most populous in the United States. This study fills these two gaps in the literature by exploring whether police-social work collaboration impacted mental health service delivery in San Bernardino County during the COVID-19 pandemic.

As first responders, law enforcement officers and mental health professionals are constantly sought after regarding the delivery of critical services to people in need. However, the COVID-19 pandemic brought almost everything to a halt. It is therefore important to understand how social services were delivered during the crisis. It has been assumed in the literature that interprofessional collaboration is an important service delivery framework. However, because COVID-19 is a relatively recent public health phenomenon, relevant studies on interprofessional collaboration between law enforcement officers and mental health professionals are scant, if not non-existent. The findings in this study therefore contribute significantly to the literature. Theme 4 is consistent with the existing literature on the importance of working collaboration between law enforcement and social workers (Buchbinder & Eisikovits, 2008; Fein & Knaut, 1986; Patterson, 2004; Patterson, 2007; Patterson, 2019; Patterson & Swan, 2019; Peaslee, 2009; Shapiro et al., 2015; Treger, 1981).
Implications of the Findings for Theory

The findings in this study have implications for theory. In particular, two themes—services were delivered to a lesser extent during the pandemic and interprofessional collaboration could prove to be useful during times of crisis—reflect premises of Systems Theory. Because most systems are open, COVID-19 starts from the public health system and permeates the social service system. The same can be said for interprofessional collaboration. Law enforcement and social work are two different systems, although both can play the role of first responders. The working relationship between these two systems had kept service delivery floating during the pandemic.

Implications of the Findings for Social Work Practice

This research is significant to the field of micro and macro social work by supporting the National Association of Social Workers (NASW) Code of Ethics, which compels social workers to make reasonable steps toward strengthening relationships for the welfare of society (NASW, 2021). Future social workers can learn from research findings on ways to effectively collaborate with law enforcement agencies to successfully deliver mental health services to individuals during a crisis. Social workers can identify best practices in providing mental health services during the next crises.

Macro social work practitioners can utilize the findings in this research to support pursuit of funding for interagency collaborations and to change currents
laws. County mental health and law enforcement agencies can create corrective action plans for future crisis based on the study’s findings. This research study is timely in that its findings can be used to combat the newly identified variant of COVID-19, BA.2. After all, the findings in this research findings identified several trends of mental health service delivery during COVID-19. These trends, which are described below, can inform macro policy.

Mental health and law enforcement professionals agreed that COVID-19 limited access to mental health services due to agency protocols and impacted alternative providers leaving hospitalization as an only resort. Participants reported challenges within mental health collaborations due to mental health policies preventing filed responses, transport, and hospital sits. Law enforcement professionals were left to navigate mental health systems of care without partners and relied solely on phone support. Participants agreed that availability of mental health service providers and partnerships would allow for better service delivery during another crisis. Participants also reported overcoming challenges by navigating mental health protocols efficiently. Participants reported utilizing mental health partners via phone and accessing alternative mental health resources for individuals via telehealth.

Limitations and Directions for Future Research

This study is not exempt from limitations. The convenience sampling is certainly one of them. The researcher could not rule out the possibility for bias in
respondents’ responses. Another limitation is geographic area from which the sample was drawn. All participants in this study were recruited from San Bernardino County. This situation implies that the findings in this study only reflect the perspectives of participants from this geographic location. In other words, this study’s findings are not applicable to the whole Southern California, let alone the State of California or the United States of America. Furthermore, by not capturing the views of LGTBQ+ members, this study is also limited in terms of diversity.

Future research can replicate the findings in this study, using different settings. Future research should pay attention to issues of diversity, equity, and inclusion. An effort should be made to recruit participants from various backgrounds, including racial and sexual minorities. Researchers should do their best to assess the impact of the pandemic on service delivery, using different methodologies. The mixed-methods research design is highly recommended. Those who wish to stick with the qualitative approach can attempt to go with Grounded Theory instead of thematic analysis.
APPENDIX A

INTERVIEW QUESTIONS

DEVELOPED BY SONYA MCISAAC
DEMOGRAPHICS

1. What is your age range?   a) 18-25   b) 26-34   c) 35-49   d) 50 and over

2. Gender (optional)? ___________________

3. What is your race / ethnicity? _____________________

4. What is the highest education level? __________________

5. How many years of mental health experience/training do you have? ______________

INTERVIEW QUESTIONS

1. Would you please describe challenges you faced providing mental health services during COVID19?

2. On a scale of 1-10 (1 as lowest and 10 as highest), how much has COVID19 impacted the delivery of mental health services? Why do you choose that number? Why not a higher number? A lower number?

3. How have you met these challenges?

4. What factors have helped you provide mental health services during COVID19?

5. What is your opinion about interagency collaborations during COVID19?

6. On a scale of 1-10 (1 as lowest and 10 as highest), how much has inter-agency collaborations helped the delivery of mental health services during COVID19? Why do you choose that number? Why not a higher number? A lower number?

7. What recommendations do you have for a successful delivery of mental health services during major crises?
APPENDIX B

INFORMED CONSENT
Adult Informed Consent

The study in which you are being asked to participate is designed to examine the effectiveness of inter-agency collaborations between mental health professionals and law enforcement agencies in San Bernardino County during the COVID-19 pandemic. This study is being conducted by graduate social work student, Sonya M. McIsaac, under the supervision of Dr. Rigaud Joseph, Assistant Professor in the School of Social Work at California State University San Bernardino. This study has been approved by the Institutional Review Board, California State University, San Bernardino.

PURPOSE: The goal of this study is to explore inter-agency collaborations among mental health and law enforcement professionals in San Bernardino County with regard to mental health service delivery during COVID-19.

DESCRIPTION: You will be asked questions about demographic characteristics and your experience delivering mental health services during the COVID-19 pandemic.

PARTICIPATION: Your participation is completely voluntary, and you do not have to answer any questions you do not wish to answer. You may skip or not answer any questions and can freely withdraw from participation at any time.

CONFIDENTIAL: Your responses will remain confidential throughout the research process. All data collected will be reported without any personal and identifying information. All electronic, written, and audio data will be stored in password protected files and in password protected computers. All information will be backed-up using CSUSB’s cloud programs (Google Drive and Zoom). You have the right to cancel your authorization of use of collected data. All collected data will be destroyed at the end of this study and/or if you request.

DURATION: It will take about 30 minutes to complete the interview.

RISKS: Although not anticipated, some questions may provoke negative feelings about your professional experiences. You are not required to answer any questions if you do not desire to do so. You may to skip questions or end your participation at any time.

BENEFITS: Your participation in this study has no direct benefits. However, findings from this study may contribute to knowledge in this area of research and provide feedback to mental health and law enforcement agencies and contribute to the betterment of society.

CONTACT: If you have any questions about this study, please contact Dr. Rigaud Joseph at (909) 537-5507 rigaud.joseph@csusb.edu

RESULTS: Results of the study may be found on the Pfau Library ScholarWorks database (http://scholarworks.lib.csusb.edu) at CSUSB.

VIDEO/AUDIO/PHOTOGRAPH: I agree to have this interview audio recorded ______ yes _____________ no

CONFIRMATION STATEMENT: I understand that I must be 18 years of age or older to participate in your study, have read and understand the consent document and agree to participate in your study.

SIGNATURE: Place an X _____________________________ Date: ________
APPENDIX C

IRB APPROVAL LETTER
October 22, 2021
CSUSB INSTITUTIONAL REVIEW BOARD
Administrative/Exempt Review Determination
Status: Determined Exempt
IRB-FY2022-52

Rigaud Joseph Sonya McIsaac
CSBS - Social Work
California State University, San Bernardino
5500 University Parkway
San Bernardino, California 92407

Dear Rigaud Joseph Sonya McIsaac:

Your application to use human subjects, titled “INTER-AGENCY COLLABORATIONS AMONG MENTAL HEALTH AND LAW ENFORCEMENT PROFESSIONALS IN SAN BERNARDINO COUNTY DURING COVID-19: A QUALITATIVE STUDY” has been reviewed and determined exempt by the Chair of the Institutional Review Board (IRB) of CSU, San Bernardino. An exempt determination means your study had met the federal requirements for exempt status under 45 CFR 46.104. The CSUSB IRB has weighed the risks and benefits of the study to ensure the protection of human participants.

This approval notice does not replace any departmental or additional campus approvals which may be required including access to CSUSB campus facilities and affiliate campuses. Investigators should consider the changing COVID-19 circumstances based on current CDC, California Department of Public Health, and campus guidance and submit appropriate protocol modifications to the IRB as needed. CSUSB campus and affiliate health screenings should be completed for all campus human research related activities. Human research activities conducted at off-campus sites should follow CDC, California Department of Public Health, and local guidance. See CSUSB’s COVID-19 Prevention Plan for more information regarding campus requirements.

You are required to notify the IRB of the following as mandated by the Office of Human Research Protections (OHRP) federal regulations 45 CFR 46 and CSUSB IRB policy. The forms (modification, renewal, unanticipated/adverse event, study closure) are located in the Cayuse IRB System with instructions provided on the IRB Applications, Forms, and Submission webpage. Failure to notify the IRB of the following requirements may result in disciplinary action. The Cayuse IRB system will notify you when your protocol is due for renewal. Ensure you file your protocol renewal and continuing review form through the Cayuse IRB submission system to keep your protocol current and active unless you have completed your study.

- Ensure your CITI Human Subjects Training is kept up-to-date and current throughout the study.
- Submit a protocol modification (change) if any changes (no matter how minor) are proposed in your study for review and approval by the IRB before being implemented in your study.
- Notify the IRB within 5 days of any unanticipated or adverse events are experienced by subjects during your research.
- Submit a study closure through the Cayuse IRB submission system once your study has ended.

If you have any questions regarding the IRB decision, please contact Michael Gillespie, the Research Compliance Officer. Mr. Michael Gillespie can be reached by phone at (909) 537-7588, by fax at (909) 537-7028, or by email at mgillesp@csusb.edu. Please include your application approval number IRB-FY2022-52 in all correspondence. Any complaints you receive from participants and/or others related to your research may be directed to Mr. Gillespie.

Best of luck with your research.
Sincerely,
Nicole Dabbs
Nicole Dabbs, Ph.D., IRB Chair
CSUSB Institutional Review Board
REFERENCES

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