

How police use of force at arrest can lead to greater mental health problems among prison inmates.

In many arrests, police use force to restrain suspects, often when suspects are not resisting. But what are the long-term effects of the use of force on those who are arrested? [Benjamin Meade](#), [Benjamin Steiner](#), and [Charles Klahm](#) examine the effects of exposure to police use of force, finding that it is significantly associated with increased mental health problems among prison inmates. Such inmates were more likely to experience a greater number of both manic and depressive symptoms compared to those who were not exposed to violence upon arrest. They write that in light of their findings, police administrators may wish reexamine existing use of force policies, and prison administrators should identify inmates who were exposed to police use of force so that they might be assessed for trauma related needs.



Research examining police use of force has almost exclusively focused on the immediate consequences of instances of police use of force, such as [injuries](#) sustained to the officer or suspect. Very little research has focused on the potential long-term effects of police use of force. In a recent study, we discovered that individuals exposed to police use of force experienced mental health problems following the incident.



A large body of research has uncovered that exposure to violence among [adolescents](#) is associated with increased levels of mental health problems, including internalizing symptoms, such as depression, mania, anxiety, as well as lower self-esteem, and symptoms of [PTSD](#), such as recurrent recollections or dreams of the traumatic event, avoidance, detachment, irritability, hyper vigilance, difficulty sleeping, and psychosis-related delusions/hallucinations. A smaller number of studies have also found that exposure to violence can have [mental health consequences for adults](#), and in some instances, persist for years after a violent victimization. Exposure to violence, or violent victimization, may be related to mental health problems for a couple of reasons. First, victimization may influence individuals' sense of agency and self-efficacy, resulting in feelings of helplessness and experiences of depression and low-self esteem. Second, victims may experience anger or irritability at their perceived loss of control, which could result in restlessness, sleep disturbances, or other symptoms of anxiety or mania.

There are a number of [similarities](#) between police use of violent force and violence in general, and so the consequences for individuals exposed to violent force may be similar to the consequences (e.g., mental health problems) associated with direct exposure to other forms of violence. In an [autoethnographic](#) account by one researcher of his experience with police use of force, he described feeling mentally and emotionally overwhelmed, increasingly angry, and having recurring nightmares involving a claustrophobic assault. Exposure to police use of force could be particularly traumatic for prisoners, who are [most likely to experience](#) use of force during their arrest, more likely to experience more serious forms of force, and have correctional officers constantly present who may be identified with police officers as sources of threat and mistrust.



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In our research, we examined the effects of exposure to police use of force on mental health problems among prison inmates. The data for the study were collected from the 2004 Survey of Inmates in State Correctional Facilities. The survey is collected by the U.S. Census Bureau, and for the purposes of our study, included 12,023 inmates across 242 correctional facilities. The specific outcomes measured included manic symptoms (irritable mood, racing thoughts, less sleep, increased agitation) and depressive symptoms (depressed mood, decreased appetite or other activity, feelings of worthlessness, and suicidal thoughts).

Our study results revealed that exposure to police use of force during arrest was significantly associated with increased mental health problems. Inmates who experienced force during their arrest were more likely to experience a greater number of both manic and depressive symptoms than inmates who were not so exposed. In other words, we found evidence that inmates who had force used against them were more likely to report being angry and temperamental than their counterparts and report feelings of numbness, emptiness, and isolation from others, as well as a change in overall activity level, and increased consideration of suicide.

Our findings indicate that police use of force is a traumatic experience, akin to violent victimization, and is related to the long-term mental health symptoms. These findings are consistent with the [literature](#) on the developmental impacts of victimization for children and adolescents, and the [findings](#) of the few available studies on the long-term effects of victimization on mental health for adults. Our findings also lend support to the argument that exposure to violence in general may be associated with inmates' reduced ability to cope with the confinement experience. The measure of police use of force reflected violent actions by police (e.g., kicking a suspect, hitting a suspect with their hand or something in their hand) as opposed to nonviolent compliance techniques (e.g., verbal commands, handcuffing, and patdowns). Thus, the observed association between exposure to violence by the police and mental health problems is seemingly consistent with existing study findings that suggest experiencing violent victimization can [interfere with adjustment](#).

Our results are relevant for both police and correctional policy. Police administrators may wish reexamine existing use of force policies in an effort to reserve the use of violent force for suspects who are actively resisting. In our data, for example, a large number of inmates who reported experiencing police use of force reported no resistance. Additional training could emphasize using force only when necessary (e.g., against active resisters), and, in addition, aid officers in developing and/or refining communication skills that can de-escalate volatile encounters with suspects before force is required. Reducing the use of violent force by the police could reduce the onset of mental health

problems among suspects, which is important for these individuals' long-term well-being. Of course, this is not to say that we are implying that legitimate or reasonable force is an unacceptable means of responding to some suspects' behavior. We recognize that police use of force is [necessary and legitimate](#) in many instances.

In terms of correctional policy, it may be worthwhile to identify inmates who were exposed to police use of force so that they might be assessed for trauma related needs. Such an assessment could facilitate placement decisions, inform supervision strategies, and direct inmates into appropriate treatments that could help to alleviate their mental health problems. Prison officials may also wish to consider enhancing the role of mental health staff in the supervision and discipline of inmates who have had histories of forceful encounters with criminal justice officials. For example, treatment teams comprised of both mental health and security staff or less formal consultations between corrections officers and mental health workers in prisons may help to alleviate some of the difficulties of dealing with inmates with mental health problems, while still being sensitive to their past experiences related to exposure to police use of force and/or violence in general.

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