

Title: Nurses should oppose police violence and unjust policing in healthcare

Authorship Group Name: USA Nurses in Health Services Research

Authors:

Kia Skrine Jeffers, PhD, RN, PHN^{a,b}
 Hafifa Siddiq, PhD, MSN, RN^c
 Adrienne S. Martinez-Hollingsworth, PhD, MSN, RN, PHN^{c,d}
 Shoshana V. Aronowitz, PhD, CRNP^e
 Laura Sinko, PhD, RN^e
 Jasmine L. Travers, PhD, RN^f
 D. Anthony Tolentino, PhD, RN-BC^{g-i}
 Jade Burns, Ph.D., RN, CPNP-PC^{h,j}
 Sue Anne Bell, PhD, FNP-BC, NHDP-BC^{h,k}
 Dana C. Beck, PhD, FNP-BC^{g,h}
 Jose I. Gutierrez Jr., PhD, FNP-BC^l
 Dominique Bulgin, PhD, RN^m
 Kirstin A. Manges, PhD, RN^e
 Lisa N. Mansfield, PhD, RN^c
 Amanda P. Bettencourt, PhD, APRN, CCRN-K, ACCNS-P^{g,h}
 Jin Jun, PhD, RN^{g,h}
 Alex J. Fauer, PhD, RN, OCN^c
 Rachele K. Lipsky, PhD, CRNP, PMHNP-BC^m
 Gillian I. Adynski, PhD, RN^m
 Kristen R. Choi, PhD, MS, RN^{a,c}

- a. School of Nursing, University of California, Los Angeles, 700 Tiverton Ave, Los Angeles, CA, 90095, USA
- b. Center for the Study of Racism, Social Justice & Health, Fielding School of Public Health, University of California, Los Angeles, USA
- c. National Clinician Scholars Program, University of California, Los Angeles, 1100 Glendon, Suite 900, Los Angeles, CA, 90024, USA
- d. Urban Health Institute, Charles R. Drew University, 1748 E. 118th Street, LSRNE Building N149, Los Angeles, CA 90059, USA
- e. National Clinician Scholars Program, University of Pennsylvania, 423 Guardian Drive, 1310 Blockley Hall, Philadelphia, PA 19104, USA
- f. Rory Meyers College of Nursing, New York University, 433 1st Avenue, New York, NY 10010, USA
- g. National Clinician Scholars Program, University of Michigan, 2800 Plymouth Road, North Campus Research Complex (NCRC), Building 16, Ann Arbor, MI 48109, USA
- h. Institute for Healthcare Policy and Innovation, University of Michigan, 2800 Plymouth Road North Campus Research Complex (NCRC), Building 16, Ann Arbor, MI 48109, USA
- i. School of Nursing, San Francisco State University, 1600 Holloway Ave, San Francisco, CA 94132, USA

- j. Department of Health Behavior & Biological Sciences, School of Nursing, University of Michigan School of Nursing, 400 N. Ingalls, Ann Arbor MI 48109, USA
- k. Department of Systems, Populations, and Leadership, School of Nursing, University of Michigan School of Nursing, 400 N. Ingalls, Ann Arbor MI 48109, USA
- l. National Clinician Scholars Program, University of California, San Francisco, 533 Parnassus Ave, San Francisco, CA 94143, USA
- m. National Clinician Scholars Program, Duke University, 40 Duke Medicine Circle, Durham, NC 27705, USA

Conflicts of Interest: None

Funding: No funding is associated with this article.

Acknowledgements: Drs. Siddiq, Martinez-Hollingsworth, Aronowitz, Sinko, Tolentino, Beck, Gutierrez, Bulgin, Mansfield, Bettencourt, Jun, Fauer, Adynski, and Lipsky acknowledge fellowship support from the National Clinician Scholars Program (NCSP). Dr. Bell acknowledges support from the National Institute on Aging of the National Institutes of Health under award number K23AG059890 (Bell, PI). Dr. Choi acknowledges support from the Agency for Healthcare Research and Quality and the Patient-Centered Outcomes Research Institute under award number K12HS26407-01 (Ong & Gould, Co-PI). Dr. Siddiq acknowledges support from the UCLA/Charles R. Drew University Resource Center for Minority Aging Research Center for Health Improvement of Minority Elderly under award number P30-AG021684 (Magione & Duru, Co-PI). The contents of this article are solely the opinions of the authors and do not represent the official views of NCSP or its partners, including the U.S. Department of Veterans Affairs and the United States Government, or the National Institutes of Health.

Correspondence: Dr. Kristen Choi, krchoi@ucla.edu, (310) 794-7493, 700 Tiverton Ave, Los Angeles, CA, 90095

Nurse Should Oppose Unjust Policing

As nurses in the United States (US) with an ethical obligation to promote public health, we strongly oppose police brutality against Black Americans. We stand against the 8:46-minute killing of George Floyd by a police officer in Minneapolis, Minnesota; the ambush and murder of Breonna Taylor while she slept in her home in Louisville, Kentucky without any subsequent police accountability; the civilian hunting and killing of Ahmaud Arbery and complicit police cover-up in Glynn County, Georgia; as well as countless other instances of publicly witnessed police brutality against unarmed Black Americans. These acts are rooted in a long, violent history of racism in policing that originated in slavery and organized control of Black Americans (Potter, 2013). As the world has witnessed unjustified, persistent assaults upon Black Americans, health professionals and global communities-at-large are calling for dismantling and defunding police departments that advance a legacy of racism.

Nurses should be active participants in this movement while also confronting our profession's relationship to systems of policing (American Academy of Nursing, 2020). Nursing is one of many health professions that has a history of participation in racist profiling of patients, unnecessary and excessive restraint and detention, and other forms of inhumane treatment in healthcare towards the Black patients we claim to serve (Barbee, 1993; Bennett et al., 2019; Cottingham et al., 2018; Smith, 2020). These systems of patient policing in healthcare are fundamentally violent, racist, and antithetical to nursing's ethical contract with the public (Jee-Lyn Garcia & Zulfacar, 2015). While supporting calls to defund and dismantle unjust law enforcement policing systems, nurses must take parallel action to dismantle systems of unjust policing in healthcare (American Public Health Association, 2018; Black Lives Matter, 2020). The healthcare ideal of "safety" is often a justification for violence and control, especially of Black patients. Nurses can promote patient well-being through non-violent, non-punitive means by re-imagining systems of policing inside and outside of healthcare towards restorative and transformative justice.

Nurse-Police Partnerships and Community Health

In the US, police officers have entrenched roles in community health and safety where they often partner with nurses (Maxey, 2003; van Dijk & Crofts, 2017). Although nurses and police officers share a responsibility to protect and serve the public, the practice partnerships nurses share with police officers at the interface of communities and health can be *de facto* and tenuous. Nurse-law enforcement practice partnerships have been used for mental health crisis intervention, violence response, and injury surveillance in communities (Allen et al., 2014; Campbell et al., 2012; Jacoby et al., 2018a). There is evidence for some success of these partnerships (Campbell et al., 2012; Ellis, 2011); however, research suggests that police officers do not view themselves as healthcare or mental health responders and prefer not to function in these roles (Lane, 2019).

The role law enforcement has come to play in community health response is dangerous for communities of color (Ehrenfeld & Harris, 2020). Police encounters with Black Americans are more likely to result in injury, violence, and death than encounters with their White counterparts (Feldman et al., 2016; Patterson & Swan, 2016). The health harm of historical trauma and racism are compounded by police killings, which are associated with poor birth outcomes, psychological distress, depression, and posttraumatic stress among Black communities (Bor et al., 2018; Jones et al., 2020; Legewie, 2019; Tynes et al., 2019). These long-term negative health effects are a direct result of racism-related toxic stress and exposure to the harshest, most frequent forms of police violence (Alang et al., 2017; Rothstein & Morsy, 2019). It is clear that police officers are not well-suited as healthcare responders and that the “safety” they promote is not distributed fairly to Black Americans.

The profession of nursing has its own history of participation in systems of policing in healthcare in the name of health and safety. *Parens patriae* (“parent of the country”) is a legal doctrine in the US that allows states to intervene to protect the health and well-being of populations the state determines to be vulnerable (Batson, 2017; Pomeranz & Brownell, 2011;

Rustad & Koenig, 2011; Thomas, 2016). Under *parens patriae* and other protection and safety policies, nurses are often agents of policing and enforcement. Nurses may detain patients involuntarily for psychiatric treatment; place patients into seclusion or restraints at the order of a physician or nurse practitioner; or surveil patients in their homes to enforce treatment compliance (Bartol, 1981; Howie, 2017; Swartz & Swanson, 2020). They may function as gatekeepers between patients and healthcare resources such that patient movement and agency are policed (McArthur & Montgomery, 2004). They may criminalize mental illness and substance use disorders (Jessup et al., 2019). Necessary medications and treatment may be withheld because of racial biases and stigma (Jenerette et al., 2015; Smith, 2020; Symons & McMurray, 2014). As mandated child welfare reporters, nurses may make culturally incompetent judgments about the safety of children of color and disrupt family cohesion (Fraser et al., 2010; Roberts & Sangoi, 2018). They may also participate in reporting of violent crimes (i.e. rape, assault, domestic violence) whether or not the affected individual is interested in criminal justice intervention (Davidov et al., 2012; Jacoby et al., 2018b). These functions are legally sanctioned and carried out in the name of benevolence, protection, and safety. However, it is critical that we ask the question: Safety for whom?

Nurse policing can harm patients in a similar manner to policing in communities (Saks, 2008). Patients who commit the healthcare “crimes” of being noncompliant, nonadherent, assaultive, drug-seeking, risk-taking, substance-using, or otherwise deemed problematic receive substandard care and swift judgment (Dickinson et al., 2017). The judgments we cast in health records can follow patients in all their future healthcare encounters, burdening them with the medical equivalent of a criminal record and eroding their care. Experiences of bias and stigma in healthcare can prevent people from seeking care to avoid further discrimination and manifest as toxic stress (Geronimus, 2006; Haywood et al., 2014a; Haywood et al., 2014b). If we achieve “safety” for only a privileged few patients, we have fallen short of our responsibilities as nurses and reinforced structural violence against our patients.

Applying Restorative and Transformative Justice to Policing

Nurses are well-positioned to offer interventions for promoting community health and re-imagining systems of policing towards restorative and transformative justice (Waite et al., 2020). *Restorative justice* is a “problem-solving approach to crime which involves the parties themselves, and the community generally, in an active relationship with statutory agencies.” (Marshall, 1999). *Transformative justice* takes this approach a step further, viewing criminal justice systems as inherently responsible for the violent oppression of marginalized communities and advocating for violence solutions to come directly from communities (Kim, 2018). Experts have proposed applying a restorative justice framework to law enforcement and other societal institutions (e.g., schools) in the US and re-imagining a new, community-based system of accountability that does not include policing at all (Austin, 2020; Darling-Hammond et al., 2020; Kurki, 2000; Nicholl, 1999). Restorative and transformative justice frameworks must be applied to systems of patient policing in healthcare. Under such an approach, nurses would engage patients and their family members in shared decision-making; interrogate the ways structural racism, classism, and other intersecting systems of oppression dehumanize patients and affect their health; invite patients’ experiential knowledge and value their sources of strength and resilience; not accept health disparities as unchangeable norms and prioritize disease prevention; and partner with patients to achieve health as they define it beyond a biomedical framework (Skrine Jeffers et al., 2019).

A re-imagined system of nursing would renounce our historical complicity in structural racism in healthcare and end policing of patients that promotes an unfair distribution of safety. It would de-emphasize hospital nursing as the face of our profession and strengthen nursing roles in settings where there is partnership with communities to co-create illness prevention and wellness. A re-imagined system of nursing would also end racist gatekeeping of our profession and welcome those with “living” experiences of structural racism and its consequences to become nurses. The enormity of dismantling the current system of patient policing in healthcare

will require dedication and work to train nurses in a new community-focused, anti-racist model of healthcare.

Conclusion

During this time of international outrage over racist police killings of Black Americans and renewed calls for police reform in the US, nursing has a key role. Nurses must advocate for anti-racist policing reform and re-imagination in communities such that structural racism and violence are eliminated. They must take responsibility for developing new, anti-racist, restorative- and transformative-oriented models of nursing care to eliminate our own unjust systems of policing, and break ties with systems that reinforce injustice and inequity for Black people. By acknowledging and confronting our profession's complicity in structural racism in healthcare via systems of policing, nurses can uphold our ethical code and maintain societal trust with our actions (Waite et al., 2020).

References

- Alang, S., McAlpine, D., McCreedy, E., & Hardeman, R. (2017). Police brutality and Black health: Setting the agenda for public health scholars. *American Journal of Public Health, 107*(5), 662–665.
- Allen, D. E., Harris, L. F. N., & de Nesnera, A. (2014). Nurse-police coalition: improves safety in acute psychiatric hospital. *Journal of Psychosocial Nursing and Mental Health Services, 52*(9), 27-31.
- American Academy of Nursing. (2020). Racism affects health and wellness and it must be addressed. <https://www.aannet.org/news/press-releases/position-statement-on-racism>
- American Public Health Association. (2018). Addressing law enforcement violence as a public health issue. <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2019/01/29/law-enforcement-violence>
- Austin, J. (2020). Restorative justice as a tool to address the role of policing and incarceration in the lives of youth in the United States. *Journal of Librarianship and Information Science, 52*(1), 106-120.
- Barbee, E. (1993). Racism in U.S. nursing. *Medical Anthropology Quarterly, 7*(4), 346-362.
- Bartol, C. R. (1981). PARENS PATRIAE: Poltergeist of Mental Health Law. *Law & Policy, 3*(2), 191-207.
- Batson, R. C. (2017). Addressing the Opioid Crisis in Indian Country with A Parens Patriae Action in Tribal Court. *Albany Government Law Review, 11*, 106.
- Bennett, C., Hamilton, E.K., & Rochani, H. (2019). Exploring race in nursing: Teaching nursing students about racial inequality using the historical lens" *OJIN: The Online Journal of Issues in Nursing, 24*(2).
- Bor, J., Venkataramani, A. S., Williams, D. R., & Tsai, A. C. (2018). Police killings and their spillover effects on the mental health of black Americans: a population-based, quasi-experimental study. *The Lancet, 392*(10144), 302-310.

- Campbell, R., Bybee, D., Kelley, K. D., Dworkin, E. R., & Patterson, D. (2012). The impact of sexual assault nurse examiner (SANE) program services on law enforcement investigational practices: A mediational analysis. *Criminal Justice and Behavior, 39*(2), 169-184.
- Cottingham, M., Johnson, A., & Erickson, R. (2018). "I can never be too comfortable": Race, gender, and emotion at the hospital bedside. *Qualitative Health Research, 28*(1), 148-158.
- Darling-Hammond, S., Fronius, T. A., Sutherland, H., Guckenburg, S., Petrosino, A., & Hurley, N. (2020). Effectiveness of Restorative Justice in US K-12 Schools: a Review of Quantitative Research. *Contemporary School Psychology, 1-14*.
- Davidov, D. M., Nadorff, M. R., Jack, S. M., Coben, J. H., & NFP IPV Research Team. (2012). Nurse home visitors' perceptions of mandatory reporting of intimate partner violence to law enforcement agencies. *Journal of Interpersonal Violence, 27*(12), 2484-250.
- Dickinson, J. K., Guzman, S. J., Maryniuk, M. D., O'Brian, C. A., Kadohiro, J. K., Jackson, R. A., ... & Funnell, M. M. (2017). The use of language in diabetes care and education. *The Diabetes Educator, 43*(6), 551-564.
- Ehrenfeld, J. M. & Harris, P. A. (2020). Police brutality must stop. American Medical Association. <https://www.ama-assn.org/about/leadership/police-brutality-must-stop>
- Ellis, H. A. (2011). The Crisis Intervention Team—A Revolutionary Tool for Law Enforcement: The Psychiatric-Mental Health Nursing Perspective. *Journal of Psychosocial Nursing and Mental Health Services, 49*(11), 37-43.
- Feldman, J. M., Chen, J. T., Waterman, P. D., & Krieger, N. (2016). Temporal trends and racial/ethnic inequalities for legal intervention injuries treated in emergency departments: US men and women age 15–34, 2001–2014. *Journal of Urban Health, 93*(5), 797-807.

- Fraser, J. A., Mathews, B., Walsh, K., Chen, L., & Dunne, M. (2010). Factors influencing child abuse and neglect recognition and reporting by nurses: A multivariate analysis. *International Journal of Nursing Studies*, 47(2), 146-153.
- Gallup. (2019). Honesty/ethics in professions. <https://news.gallup.com/poll/1654/honesty-ethics-professions.aspx>
- Geronimus, A. T., Hicken, M., Keene, D., & Bound, J. (2006). "Weathering" and age patterns of allostatic load scores among blacks and whites in the United States. *American Journal of Public Health*, 96(5), 826–833.
- Haywood, C., Diener-West, M., Strouse, J., Carroll, C. P., Bediako, S., Lanzkron, S., ... & Wilks, J. (2014a). Perceived discrimination in health care is associated with a greater burden of pain in sickle cell disease. *Journal of Pain and Symptom Management*, 48(5), 934-943.
- Haywood, C., Lanzkron, S., Bediako, S., Strouse, J. J., Haythornthwaite, J., Carroll, C. P., ... & IMPORT Investigators. (2014b). Perceived discrimination, patient trust, and adherence to medical recommendations among persons with sickle cell disease. *Journal of General Internal Medicine*, 29(12), 1657-1662.
- Howie, S. (2017). CDHB/Police Watch-house Nurse Initiative. *International Journal of Integrated Care*, 17(3).
- Jacoby, S. F., Kaufman, E. J., Richmond, T. S., & Holena, D. N. (2018a). When healthcare and trauma intersect in law enforcement, what rules apply? *Health Affairs Blog*. <https://www.healthaffairs.org/doi/10.1377/hblog20180926.69826/full/>
- Jacoby, S. F., Kollar, L. M. M., Ridgeway, G., & Sumner, S. A. (2018b). Health system and law enforcement synergies for injury surveillance, control and prevention: a scoping review. *Injury Prevention*, 24(4), 305-311.
- Jee-Lyn García, J., & Sharif, M. Z. (2015). Black lives matter: a commentary on racism and public health. *American Journal of Public Health*, 105(8), e27-e30.

- Jenerette, C. M., Pierre-Louis, B. J., Matthie, N., & Girardeau, Y. (2015). Nurses' attitudes toward patients with sickle cell disease: a worksite comparison. *Pain Management Nursing, 16*(3), 173–181.
- Jessup, M. A., Oerther, S. E., Gance-Cleveland, B., Cleveland, L. M., Czubaruk, K. M., Byrne, M. W., ... & Martinez-Rogers, N. (2019). Pregnant and Parenting Women with a Substance Use Disorder: Actions and Policy for Enduring Therapeutic Practice. *Nursing Outlook, 67*(2), 199-204.
- Jones, S. C., Anderson, R. E., Gaskin-Wasson, A. L., Sawyer, B. A., Applewhite, K., & Metzger, I. W. (2020). From “crib to coffin”: Navigating coping from racism-related stress throughout the lifespan of Black Americans. *American Journal of Orthopsychiatry, 90*(2), 267.
- Kim, M. E. (2018). From carceral feminism to transformative justice: Women-of-color feminism and alternatives to incarceration. *Journal of Ethnic & Cultural Diversity in Social Work, 27*(3), 219-233.
- Kurki, L. (2000). Restorative and community justice in the United States. *Crime and Justice, 27*, 235-303.
- Lane, R. (2019). “I’m a police officer not a social worker or mental health nurse”: Online discourses of exclusion and resistance regarding mental health-related police work. *Journal of Community & Applied Social Psychology, 29*(5), 429-442.
- Legewie, J. (2019). Police violence and the health of black infants. *Science Advances, 5*(12), eaax7894.
- Marshall, T. F. (1999). Restorative justice: An overview. London. Home Office Research Development and Statistics Directorate.
- Maxey, W. (2003). Cops and nurses: Partnership for safety. *Journal of Psychosocial Nursing and Mental Health Services, 41*(6), 6-7.

- McArthur, M., & Montgomery, P. (2004). The experience of gatekeeping: a psychiatric nurse in an emergency department. *Issues in Mental Health Nursing*, 25(5), 487-501.
- Nicholl, C. G. (1999). Community policing, community justice, and restorative justice: Exploring the links for the delivery of a balanced approach to public safety. US Department of Justice, Office of Community Oriented Policing Services.
- Patterson, G. T., & Swan, P. G. (2016). Police shootings of unarmed African American males: A systematic review. *Journal of Human Behavior in the Social Environment*, 26(3-4), 267-278.
- Pomeranz, J. L., & Brownell, K. D. (2011). Advancing public health obesity policy through state attorneys general. *American journal of public health*, 101(3), 425-431.
- Potter, G. W. (2013). *The History of Policing in the United States*. Retrieved from: <http://plsonline.eku.edu/insidelook/history-policing-united-states-part-1>
- Roberts, D. & Sangoi, L. (2018). Black families matter: How the child welfare system punishes poor families of color. Retrieved June 23, 2020 from <https://theappeal.org/black-families-matter-how-the-child-welfare-system-punishes-poor-families-of-color-33ad20e2882e/>
- Rothstein & Morsy. (2019) Toxic stress and children's outcomes: African American children growing up poor are at greater risk of disrupted physiological functioning and depressed academic achievement. *Economic Policy Institute*. <https://www.epi.org/publication/toxic-stress-and-childrens-outcomes-african-american-children-growing-up-poor-are-at-greater-risk-of-disrupted-physiological-functioning-and-depressed-academic-achievement/>
- Rustad, M. L., & Koenig, T. H. (2011). Reforming Public Interest Tort Law to Redress Public Health Epidemics. *Journal of Healthcare Law and Policy*, 14, 331.
- Saks, E. (2008). *The Center Cannot Hold*. Hachette Books, New York, NY.

- Skrine Jeffers, K., Cadogan, M., Heilemann, M., & Phillips, L.R. (2019). Assessing informal and formal diabetes knowledge in the care of older African Americans with uncontrolled diabetes. *Journal of Gerontological Nursing, 45*(2):35-41.
- Smith, K. (2020). Facing history for the future of nursing. *Journal of Clinical Nursing, 29*, 1429-1431.
- Swartz, M. S., & Swanson, J. W. (2020). Mandated Community Treatment in Services for Persons with Mental Illness. In *The Palgrave Handbook of American Mental Health Policy* (pp. 171-196). Palgrave Macmillan, Cham.
- Symons, V. C., & McMurray, A. (2014). Factors influencing nurses to withhold surgical patients' oral medications pre-and postoperatively. *Collegian, 21*(4), 267-274.
- Thomas, M. S. (2016). Parens Patriae and the States' Historic Police Power. *SMU Law Review, 69*, 759.
- Tynes, B. M., Willis, H. A., Stewart, A. M., & Hamilton, M. W. (2019). Race-related traumatic events online and mental health among adolescents of color. *Journal of Adolescent Health, 65*(3), 371-377.
- van Dijk, A., & Crofts, N. (2017). Law enforcement and public health as an emerging field. *Policing and Society, 27*(3), 261-275.
- Waite, R., Sawyer, L., & Waite, D. (2020). A call to action for community/public health nurses: Treat structural racism as the critical social determinant of health it is. *Public Health Nursing, 37*(3), 470-470.