

**HISTORICAL ANALYSIS OF POLICE SOCIAL WORK AND
COLLABORATIVE STRATEGIES BY POLICE DEPARTMENTS AND
SOCIAL SERVICE PROVIDERS**

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ABSTRACT

This historical analysis reveals that police social work has existed since 1893. Still, the focus on embedded social workers is new. Community policing has significantly changed how U.S. police departments have developed an emphasis on community relations. Kappeler and Gaines (2015) posit that “community policing rests on the belief that only by working together with people will the police be able to improve the quality of life for all members of a community” (p. 2). Community-oriented policing (COP) strategy differs from problem-oriented policing (POP). Regarding POP, “agencies develop strategies to prevent and reduce crime and disorder” (Development Services Group, 2023, p. 1). Therefore, in dealing with mental health challenges, many police departments have collaborative strategies that are designed to work effectively with social service providers. This study explored Minnesota as a case study because law enforcement and police departments include local, state, and regional districts in their composition.

Keywords: Historical analysis, police social work, embedded social workers, mental illness, law enforcement, and criminal justice.

1.0 INTRODUCTION

In describing the criminal justice system in the United States, it is essential to note that the 10th Amendment to the Constitution made provisions for the separation of powers between the federal and state governments (Morone & Kersh, 2016). States have reserved powers. Thus, the “police, prisons, and courts are also in each state’s hands” (Morone & Kersh, 2016, p. 122).

There are many law enforcement agencies. According to Gardner and Scotta (2022), “In June of 2018, a total of 17,541 state and local agencies performed law enforcement functions” (p. 1). City police officers are more conspicuous than other law enforcement agencies, such as sheriff's offices, tribal police departments, specialty law enforcement agencies, and state agencies. Since many people are socialized to call 911 for emergencies earlier in life, police officers are the primary responders to nearly all nonemergency and emergency calls (Lamin & Teboh, 2016). Friedrich (2023) posits, “the national 9-1-1 system was launched over 50 years ago to offer rapid response to emergencies, including crimes” (p. 1). Policing is complex, and police departments have jurisdictions that overlap with other law enforcement agencies (Eterno, 2011). In addition to crime fighting, police officers perform many social service roles (Lamin & Teboh, 2016; Patterson, 2022; Patterson & Swan, 2019). Hence, the reason for the various collaborative strategies by police departments is so that they can deal with mental and behavioral health issues. According to the National Center for Health Workforce Analysis (2023), mental health crises have increased considerably due to “unmet behavioral health needs” (p. 1). The need for behavioral health services is much greater than the available mental health professionals. While police officers are usually the first responders, social workers are the primary mental health professionals who collaborate with community-based crisis intervention services. Therefore, collaborative strategies and partnerships between police departments and social workers are essential to address the shortage of behavioral health workers and to provide responses to individuals experiencing health challenges and encountering law enforcement.

1.1 Police Social Work

Historically, the approach to police social work has varied depending on the political climate. The punishment and rehabilitation focus of police and prison systems has affected the development of a sustainable public policy and commitment to fund best practices in community and police department relations. Community policing embraces both incident-driven and problem-oriented policing perspectives. The two approaches are quite different. However, a fusion of both approaches may offer a holistic condition for sustainable co-building community transformation with other professionals and all community stakeholders. The police and police social work collaboration is an interdisciplinary approach that leads to making communities safer. Police social work was one of social workers' earliest areas of practice (Patterson, 2008, 2012, 2022). In 1919, August Vollmer delivered a speech and coined the term police social work. According to Patterson (2022), “Vollmer’s speech called for police officers to utilize social work knowledge and skills” (p. 45). Even before Vollmer’s speech, in the City of Cleveland, Ohio, “women served in the police department starting in 1893 with the creation of Police Matrons Service. Their roles expanded with the creation of the Women’s Bureau in 1924” (Cleveland Police Historical Society, 2024, p. 2). The officers in the Women’s Bureau worked with families, women, and children involved in criminal activity or those needing assistance. In 1957, the Cleveland Police permitted women to wear uniforms. In Cleveland, the Women’s Bureau unit was “disbanded in the early 1970s, and women were fully integrated into the force as equal officers” (CPHS, 2024, p. 2). The situation in Cleveland was not isolated, as other police departments stopped hiring women for such roles in their police departments.

Police social work was typical during the first few decades of the twentieth Century. Roberts and Springer (2007) observed that “by 1930, there were over five hundred policewomen

employed in approximately two hundred police departments in large cities throughout the United States” (p. 126). However, there was a decline in police social work in the 1950s due to changes in political leadership, misconceptions, sexism, and role strain (Roberts & Springer, 2007). With funding from the federal government after the Law Enforcement Assistance Administration (LEAA) of 1965 and through State Planning Agencies (SPAs), many police departments hired social workers (Robert & Springer, 2007). Around the 1980s, funding from LEAA was cut off, and this caused a decline in police social workers (Roberts & Springer, 2007). Through state criminal justice planning agencies, the federal Law Enforcement Assistance Administration (LEAA) funded most of the police social work collaboration programs. States also used the Block Action Funding to identify their needs and establish program priorities. According to Patterson (2022), a police social worker is a “professional social worker typically holding a graduate social work degree, employed in a law enforcement agency” (p. 52). However, police departments engage their community members in various ways.

Active engagement is essential to building trust and cohesion between police departments and local community residents. Fostering collaborative relationships can enhance confidence and promote shared responsibilities for safety. There must be open communication and transparency of current and planned improvements to ensure stability. Police departments must seek to understand their communities and be aware of the ever-changing cultural and individual needs of various population demographics (Lamin & Teboh, 2016).

1.2 Community Engagement

Many police departments have diverse types of community engagements. Community engagement shows the humane and social service functions of police departments, although the media needs to focus more on their service roles. One of the components of community-oriented policing (COP) is community partnerships. COP encourages partnerships with stakeholders in the community, including other government agencies (prosecutors, health and human services, child protection, and schools). COP has problem-solving as the second component. Thus, police departments are to develop solutions to underlying conditions that contribute to public safety problems rather than responding to crime only after it occurs. Thus, “problem-oriented policing was an alternative to incident-driven policing described by Herman Goldstein in 1987” (Eck & Spelman, 1987, p. xvi). In the 1960s, many studies focused on police attention on burglary, robbery, and other street crimes; the focus changed by the late 1970s and the 1980s. Researchers explored different areas of police interventions, such as “domestic violence, drunk driving, the mentally ill, and fear of crime” (Eck & Spelman, 1987, p. xviii); therein, police departments started focusing on other issues. COP encourages police departments to utilize the SARA model (Scanning, Analysis, Response, and Assessment). The SARA model utilizes Herman Goldstein’s Problem-Oriented Policing, developed by Eck and Spelman in 1987. An excellent example of this model was one of the reasons that led the Racine Police Department in Racine, Wisconsin, and the St. Cloud Police in St. Cloud, Minnesota, to build Community Outpost houses (COP Houses). Thus, community-oriented policing and problem-oriented policing postulate the significance of police-community relationships (Cox et al., 2023). The third component is organizational transformation. This includes agency management, organizational structure, personnel, information systems, and technology. Police departments now incorporate community policing into all agency areas, although many have

community engagement units. Police departments are encouraged to nurture relationships between the police and the community, utilizing proactive problem-solving (COPS, 2014).

1.3 Calls for Service

Many social service offices close at 5:00 pm on Fridays for weekends; hence, most police calls do not require detainment or arrest, but instead, they need assistance with social problems, which include social services (Cox et al., 2023; Lamb et al., 2022; Lamin & Teboh, 2016; Patterson, 2008, 2012). Many children are socialized by their parents or caregivers exceedingly early on to call 911 in an emergency. Approximately 96% of the geographic U.S. is covered by some type of 911. Friedrich (2023) posits that “the national 911 system was launched over 50 years ago to offer rapid response to emergencies. Thus, even when it is not an emergency, people will call 911 as it is their most accessible telephone number.

1.4 Collaborations

Patterson (2022) proposes two main types of collaborations: Police and social work collaboration and Police and social service collaboration. The first collaboration type is “established between a law enforcement agency and professional social work professionals who are not employees of the law enforcement agency” (Patterson, 2022, p. 53). The second type of collaboration, “police and social service collaboration, refers to law enforcement collaborations established with partners who are not law enforcement agency employees” (Patterson, 2022, p. 53). Collaborations between police departments and social services providers continue to increase as mental health issues have been prevalent since deinstitutionalization happened, with a decrease in state psychiatric hospitals, COVID-19, and other challenges that pose serious threats to the well-being and functioning of many people. The increase in the need for social services has increased police calls. Often, police departments and social service agencies collaborate to solve social problems, trauma-related, behavioral, and mental health challenges.

In response to people experiencing mental health problems, there are three standard models: (a) Crisis Intervention Teams (CITs), (b) Co-Responder Teams (CRT), and (c) Mobile Crisis Teams (MCTs) (James et al., 2022). Other collaborative engagements or partnerships include law enforcement-based case management, law enforcement-assisted diversion (LEAD), crisis resolution and home treatment teams, and EMS and ambulance-based responses. Law enforcement departments also engage people with behavioral health and developmental disabilities. However, Patterson and Swan (2019) theorize that police social work and social work still need a model that could be replicated. In 2002, the Springfield Bellows Falls and Brattleboro police departments partnered with Health Care and Rehabilitation Services (HCRS) staff to de-escalate individuals or make referrals (HCRS, 2024). Allen et al. (2023) suggest a community care, field education-based model for police social work in rural areas. Law enforcement and social service agencies have used many collaboration strategies, and the crisis intervention model is widely used. However, Patterson and Swan (2019) suggested that no brand-name Police Social Work and Social Services Collaboration model could be replicated.

1.5 Responses to Mental Health Crises

Nationally, mental health crises and challenges are pervasive, and police officers as first responders have used different “approaches to respond to calls involving individuals experiencing a mental health-related emergency” (James et al., 2022, p. 3). There are three main models that police departments use: Crisis Intervention Teams (CITs), Co-Responder Teams (CRTs), and Mobile Crisis Teams (MCTs). According to James et al. (2022), “there is considerable variation in program design and heterogeneity in the application of those programs across communities employing the same model” (p. 3). The Crisis Intervention Team (CIT) is the most popular strategy by police departments for responding to calls about people experiencing mental health crises. According to Patterson and Swan (2019), “the majority of collaborations found appear to be unique models implemented between law enforcement and social service agencies” (p. 863).

Effective services should address the need for police departments to secure constant and up-to-date training to effectively serve all members of the community, including those citizens with mental health challenges. Another increasing concern is the response by police officers towards individuals with Alzheimer’s and other types of dementia. As the population known as the Baby Boomers ages, more people are being diagnosed with various kinds of dementia. As the disease progresses, the individual may become more confused and paranoid, leading to erratic, challenging behavioral responses. To ensure a safe environment, social workers and law enforcement departments need to work together to decrease the fears and stigma while increasing the competency level of police interventionists (Sun et al., 2019).

1.6 Alternatives to Police Calls

Alternatives to police calls have increased. Thus, alternative responders are closely related strategies in which police social workers or behavioral health specialists participate along with or instead of police officers. They are not COPS. They do not carry guns, but they are responding to 911 calls. Thus, new 911 responses would reduce unnecessary police involvement.

1.7 Embedded social workers

Social workers embedded within a police department are a type of collaborative association that has increased extensively, especially after the killing of George Floyd in Minneapolis, Minnesota. However, the use of embedded social workers in Minnesota started some years before the unrest after the killing of George Floyd. A suitable number of police departments in Minnesota respond to mental health calls by taking along embedded social workers with behavioral health expertise. According to the Minnesota Hospital Association (2019), “embedded social workers join the police on their calls to provide a clinical assessment and help determine appropriate mental health care needs and resources” (para. 4). This problem-oriented policing model could be a practical approach to addressing how police intervene in domestic, mental health, and other social service type events. Group support and monitoring between police and police social workers could decrease the risk of inappropriate responses in high-stress situations.

Hennepin County, the largest government organization in Minnesota, has strategic ways of responding to crises, such as Community Response after Emergency (CORE). Social workers

collaborate with other teams in public health to conduct initial mental health screening of adults, children, and adolescents in crisis via phone to determine client needs (Hennepin County Jobs). A social worker in the CORE team is a resource for community members seeking information and assistance related to trauma response and resilience. Hennepin County also has the Diversion and Recovery Team (DART), an interdisciplinary team of social workers, case managers, peer recovery specialists, a nurse, and a vocational service worker. In this team, social workers focus on harm reduction, integrated care, and health equity. Hennepin County also has the Joint Community Police Partnership (JCPP). JCPP is a collaboration between Hennepin County and the cities of Bloomington, Brooklyn Center, Brooklyn Park, Crystal, Hopkins, and Richfield (Hennepin County, 2024). JCPP promotes and increases communication and understanding between the communities in their cities and law enforcement departments.

2.0 COURSES/ EDUCATION

Many police officers may not have taken a Human Behavior in Social Environment course, psychopathology, or other behavioral classes. They may find it challenging to identify the etiologies of mood disorders, depressive disorders, anxiety disorders, bipolar disorders, co-occurring disorders, or even fatigue and burnout (Russell & Beigel, 1976). Many police officers also may not have received the requisite education, training, and guidance when dealing with aging individuals with dementia. This can result in adverse outcomes for individuals and families who have dementia, including aggression (Brown et al., 2017). People rarely hear about police encounters with older people with dementia. Although the data review suggests that police do not report most incidents when interacting with dementia patients, statistics denote that currently, police are arresting more elderly individuals. Since older individuals have higher rates of cognitive deficits, police may be arresting many people with dementia (Goel, 2023). Brown et al. (2017) point out that police officers often receive calls related to “medically vulnerable older adults” (p. 2). By equipping these officers with the necessary education and support to address these issues, we can strive for safer outcomes (Goel, 2023), fostering a sense of hope and optimism in our communities.

Police departments may collaborate with agencies that provide treatment for mental health disorders or crises using evidence-based therapies administered in congregate locations and other facilities. Before now, as Patterson (2022) presents, “one perspective regarding the role of law enforcement agencies responding to mental health crisis suggests that patrol officers can provide this response without receiving specialized training” (p. 67). As such, many police departments did not see “the need for specialty-trained police officers” (Patterson, 2022, p. 67) to respond to mental health crisis calls. Besides, before 1980, many police departments only required recruits to have a high school diploma, which was sufficient education for the officer to write citations (Cox et al., 2023). As amended, the Omnibus Crime Control and SAFE Streets Act of 1968 created the Law Enforcement Education Program (LEEP). LEEP provided “education grants and/or loans to public law enforcement, criminal justice personnel, and students (USDOJ, 1973, p. 1). Working with individuals experiencing mental health challenges or behavioral health issues requires some form of higher education. However, many patrol officers or those who respond to calls for service do not usually have the knowledge and skills. Social workers work in many host settings, but rarely in police departments. Social workers with specialized training in police social work can fit into police departments, offering a

problem-oriented police perspective while attending to the day-to-day demands of incident-driven policing.

2.1 Conference Proceedings

Lamin and Teboh (2016) founded the Police and Social Services Conference. In the following year, the co-founders changed the name to Law Enforcement and Social Services Conference (LESSC) to include the other components of law enforcement agencies in Minnesota: Municipal Police Departments, Sheriff Offices, Specialty Law Enforcement Agencies, Tribal Police Departments, and State Agencies. Four conferences were held in St. Cloud, Minnesota, with the last in 2019.

2.2 Historical Analysis

According to Wyche et al. (2006), historical analysis is “an account of some past event or combination of events” (p. 37). Thus, historians use historical analysis to gain insights into social phenomena” (Wyche et al., 2006, p. 38). This study analyzed the history of police social work and police and social services collaborations.

2.3 Study Area

This study focused on Minnesota. Minnesota has 408 law enforcement agencies and 10,499 licensed and active Peace Officers: 298 Municipal Police Departments, 87 Sheriff's Offices, 8 Specialty Law Enforcement Agencies, nine tribal police departments, and six state agencies. The study analyzed collaborative strategies by police departments with over one hundred personnel as of 2023 (Minnesota Board of Peace Officer Standards and Training, 2023, p. 1). Municipalities with over 100 officers:

Table 1
Municipalities with More than 100 Officers

City	Number of Officers
Minneapolis	564
St. Paul	574
Duluth	139
Rochester	143
Bloomington	134
St. Cloud	115

2.4 Mental Health Issues

Severe mental illness (SMI) includes schizophrenia spectrum disorders, severe bipolar disorder, and major depression with psychotic features. Some individuals are diagnosed with co-occurring disorders. For instance, precipitating factors that put individuals at risk for criminalization are both a mental health disorder and substance use disorder (Hector & Khey, 2018; Patterson, 2022). Data for Minnesota shows 151,700 individuals with severe mental illness, but only 62,934 received treatment each year. 1955 Minnesota had 11,449 psychiatric hospital beds, but it had dwindled to a mere 192 (ACT, 2024).

3.0 FINDINGS

According to NAMI Minnesota, mental illnesses are prevalent, and “one in five adults will develop a mental illness during their lifetime (p. 5). The commonality of mental health crises has increased police calls. There are 87 counties in Minnesota; each county has a 24-hour Mental Health Crisis phone line for adults and children. Some 24-hour phone lines serve more than one county. In addition to 24-hour crisis phone lines, counties also have mobile crisis response teams. Mobile teams of two or more licensed mental health professionals or practitioners. The counties have designed crisis teams to be accessible anytime to anyone in the community. Thus, the crisis teams respond to and address the situation by assessing and making referrals. There is also the Officer-Involved Community-Based Care Coordination (OICC), a “Medical Assistance (MA)-covered service that pays counties to address an individual's mental health, chemical health, social economic, and housing needs, or any identified needs by connecting the individual to ongoing treatment, care coordination services” (Minnesota Department of Human Services, 2024, para. 1). This program was created so that uninsured individuals can be assisted with the requisite care.

3.1 Community Engagement

Every police department has many programs for community engagement, such as School Resource Officers (SROs). SROs have instructor duties, assist with school counseling, especially about disruptive behaviors, and provide alternative solutions for disciplinary problems. They offer security protection as they patrol school compounds, or the police vehicles are conspicuously parked in locations to deter intruders who could pose safety problems or concerns. School resource officers attend miscellaneous public school activities such as athletic meetings, prom events, and other social gatherings.

3.2 Saint Paul Police Department

In 2018, the Saint Paul Police Department (SPPD) established a Mental Health Unit based on collaborations between police and mental health providers through case management practices. In 2019, SPPD changed the name to Community Outreach and Stabilization Team (COAST) to best reflect the department’s programming goals and vision for the future. The COAST unit comprises the Mental Health Resources Team (MHRT) and the Recovery Access Program (RAP). MHRT is a collaborative response between the Saint Paul Police Department and community-based resource partners. The team has embedded licensed clinical social workers who work with specially trained mental health officers to conduct follow-up and outreach on non-criminal incidents where mental health is believed to be a factor. RAPP provides opportunities to connect individuals living with a substance use disorder to community-based programs and support promoting health and wellness. RAP partners a sworn officer with a licensed alcohol and drug counselor during outreach efforts following an overdose event (Saint Paul, Minnesota, 2024).

3.3 Minneapolis Police Department

The Minneapolis Police Department (MPD) has a behavioral crisis team that deals with mental health crises. The BCR has three transportation types: (a) voluntary, (b) emergency, and (c) transportation holds. A strategy launched a few years ago clearly states that the city’s response

to emergency calls must improve to meet the needs of all residents. Thus, data on residents who are Black, Indigenous, and People of Color (BIPOC) shows that “BIPOC residents represent about 37% of the Minneapolis population. BIPOC residents represent 52% of behavioral health calls” (City of Minneapolis, 2023). Based on this, the City of Minneapolis decided to award a vendor, Canopy Mental Health and Consulting, which provides “culturally informed therapy for services for the historically underserved and marginalized population” (Canopy Mental Health and Consulting, 2024, para 1).

3.4 St. Cloud Police Department

The St. Cloud Police Department, in collaboration with the Southside Boys and Girls Club, has the Police Activity League (PAL), which started in 2016 and provides an avenue for school kids to interact with police officers and play games together. Local organizations offer snacks, and outdoor barbecuing occurs on the final day. The St. Cloud Police Department has a Community Engagement Division Internship Program. Thus, “in addition to learning about law enforcement, interns experience community policing in action. The program exposes interns to the duties of school resource officers, the Crime Impact Team (CCIT), and the Community Response Team (CRT). The St. Cloud Police co-responder team conducts evaluations on scene and then “connect people with proper resources, which can include primary care, social services, chemical and mental health treatment and housing services” (Baker, 2020, para. 11). Former Chief of Police, William Blair Anderson as keynote speaker at the Law Enforcement and Social Services Conference remarked that the St. Cloud Police Department works with community partners to provide services to individuals in mental health crisis than to take them to jail. Anderson also stated that he had to change the motto of the St. Cloud Police Department from “To Protect and to Serve” to “To Serve and to Protect.

3.5 Brooklyn Park Police Department

The Brooklyn Park Police Department launched an Alternate 911 Response team in December 2022. that responds to calls if crimes are not being committed and there is a risk of violence. The team sends out social workers and paramedics, who sometimes work with police officers. The Alternate Response Team deals with social service needs, substance abuse concerns, trespassing, indecent exposure, self-harm, and welfare checks. ART also deals with low-level mental health concerns. The BPPD also has an embedded social worker who assists in early identification and intervention for individuals with mental health, medical, and substance use needs who reside in congregate living facilities and have contact with emergency response systems such as law enforcement, fire, or emergency medical services (EMS). BPPD is part of the Joint Community Police Partnership.

3.6 Bloomington Police Department

The Bloomington Police Department's Mental Health Rapid Response Program provides community members with immediate in-home therapy at no cost. BPD also deals with calls about substance use, specifically opioids. BPD was the first police department in Minnesota to include two licensed marriage and family counselors embedded within the department to provide services to individuals. The therapists also supervise interns completing their clinical practice requirements. BPD is part of the Joint Community Police Partnership.

3.7 Duluth Police Department

The Duluth Police Department (DPD) has unique collaborations with its community, such as Mending the Sacred Hoop, an initiative where it works closely with the Native American community. This nationally recognized initiative works to change society and end violence against Native women. DPD also has the Person-Centered Incident Matrix, which is part of its person-centered approach to case management. Once an incident occurs, the team assesses the situation and determines whether it is a physical or mental health issue. If it is a mental health issue, the matrix states that they contact the internal support that may be available to the person to manage the crisis.

3.8 Implications for Education

Social work programs are accredited by the Council on Social Work Education (CSWE) to teach police social work courses as a specialization. Programs can even design graduate certificates in police or criminal justice social work, as many police officers are not social workers. They can also help create a social work and criminal justice model that police departments can replicate easily. For instance, many years ago, only a few social workers worked in child welfare or child protection. However, with funding from the federal government through Title IV E, social work departments receive money to train social workers and even receive stipends to incentivize them to sign. Thus, designing courses specifically for social workers who desire to work in police departments or with police officers will help to reduce the dependency on clinical social workers or behavioral health workers, especially as there is a shortage of workers. Thus, non-clinical social workers can assess the danger to themselves and others and use de-escalation techniques. Social workers can utilize tips such as LEAP (NAMI Minnesota, 2019, p. 10):

Table 2
LEAP Acronym

Key Word	Explanation
Listen	Without judgment.
Empathize	For someone to consider your point of view, you need to understand theirs.
Agree	Find common goals you can agree on.
Partner	Partner with the person to develop an action plan to meet agreed-upon goals.

Police social workers may need to learn about mental hygiene laws and what constitutes mental hygiene arrests. For instance, in Minnesota, MN, Statute 253. B.05 deals with Emergency Admission, and Subdivision 1 concerns Emergency holds. States have voluntary treatment and admission procedures, data privacy laws, and the civil commitment process. Police social workers can also learn about the forensic services in their state, especially when individuals are civilly committed by the courts as mentally ill and dangerous (MI&D). Police social workers

can learn about forensic mental health programs, forensic nursing homes, court-ordered evaluations, and community-integrated services.

3.9 Implications for Practice

Police social work specialization could provide direct practice settings for students to do their practical education at police departments or other law enforcement agencies, such as sheriff's offices, specialized police, or state entities. Police departments should revert to the days when they hired police social workers who were fully trained and integrated into police operations and culture. People cannot just conjecture that clinical social workers can fit in police departments; police social workers require both clinical expertise and associated holistic police social work community engagement skills as well. For instance, to qualify as a school social worker requires years of education and supervised experience before passing the state-specific licensing examination by the Association of Social Work Board (ASWB). The certification for School Social Workers (C-SSSW) may be required in some states. A national Police Social Work Certification would be the next addition to specializations for social workers.

Police social workers can also work in the three primary specialized responses to mental health crises: (a) Crisis Intervention Teams (CITs), (b) Co-Responder Teams (CRTs), and (c) Mobile Crisis Teams (MCTs) (James et al., 2022).

The lack of funding was the primary reason for reducing the number of social workers hired. Therefore, counties and cities should find alternative ways of funding the embedded social worker positions and not reduce the allocation to police funds depending on the volume of calls.

4.0 RECOMMENDATIONS AND CONCLUSION

Thus, hiring police social workers is returning to the roots where it started many years ago. From 1893 to 1957, the Police Matron Service attended to families, women, and children involved in criminal activity and those needing assistance. Police officers often carry out social service functions in the line of duty. In 1965, police departments hired social workers until the 1980s, when the Reagan Administration passed legislation that resulted in funding cuts that eliminated social work positions from police departments. However, a few departments nationwide had minuscule units with one or two social workers.

What might the duties of police social workers be in the police department? The answer raises several questions. Different regions have problems that require different solutions. There is a growing awareness that interdisciplinary collaboration between police departments and the communities they serve is cost-effective and has the potential for co-building community transformation with professionals and stakeholders. Universities can partner with local police departments to train police social workers, reducing the demand for mental health therapists and counselors, which is already in short supply.

The Police Social Worker position could be the police department's position that weaves a network of citizens to address community issues underpinning criminal activity and respond to calls for mental health crises and social services. Areas in which police social workers can prove to be cost-effective colleagues of police officers in the funding of police work include

the following: (a) assistance in crisis intervention in the community, (b) support for victims of domestic violence and substance abuse, (c) counsel residents who have loved ones or suffered property damage (d) design program for at-risk youth,(e) provide training in stress management, mental illness, substance abuse, domestic violence, and make referrals (f) provide counseling services to police officers and their families, and (g) assist in sustainable co-building community transformation by working with community policing colleagues to engage community professionals and stakeholders in addressing community needs.

Police social workers can provide continuing education for police officers to follow the SARA model in crises on the street. Based on the history of police social work, what are the implications for the 21st-century police social worker regarding job functions? These are concerns for further study and exploration.

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