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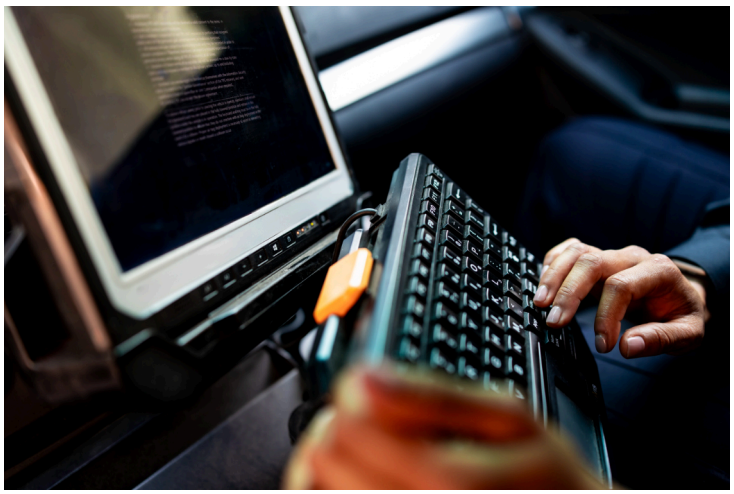
RÉSEAU CANADIEN DU SAVOIR POLICIER

# ANNUAL LITERATURE REVIEW

## Emerging Trends and Areas of Interest in Police Research and Education










Department of Innovation

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# Executive Summary

This literature review identifies 2025 policing research trends with practical implications for the Canadian Police Knowledge Network's (CPKN) future police education and professional development priorities. An examination of peer-reviewed, open-access academic literature published in English in 2025 revealed four key themes: police wellness, police training, police legitimacy and public trust, and co-response models for policing mental health. Across these themes, the literature emphasizes the need to translate research into practical learning, observable competencies, training transfer, and measurable outcomes.

## Police Wellness

Police wellness continued to be a significant focus in 2025. Researchers framed officer mental health and physical readiness as career-long, organization-wide issues shaped by trauma exposure, organizational stress, inclusion, help-seeking barriers, fatigue, specialized assignments, and career transitions. The literature points to the importance of wellness competencies that are reinforced throughout the career cycle rather than treated as one-time awareness training.

## Police Training

Police training research has emphasized learning transfer to practice. Training is strongest when technology, recruit preparation, field training, and ongoing professional development are grounded in realistic scenarios, adaptive decision-making, structured reflection and feedback, evaluation beyond completion, and reinforcement in practice. Researchers have also cautioned that simulation, artificial intelligence (AI), extended reality (XR), virtual reality (VR), and body-worn camera footage should support human judgement, instructor facilitation, and realistic practice but not be treated as a replacement for live training.

## Police Legitimacy and Public Trust

Research on police legitimacy highlighted that public trust is unevenly distributed and shaped by race, disability, age, mental health, sexuality, income, prior police contact, anticipated treatment, service quality, and public interpretation of police conduct. Trust is built or weakened through everyday encounters, including whether officers communicate respectfully, use authority proportionally, explain decisions clearly, and provide service that communities experience as fair, protective, and accountable.

## Co-Response Models for Policing Mental Health

Co-response research framed police mental health work as a systems-capacity issue rather than a policing issue alone. Effectiveness depends on role clarity, shared risk, coordinated thresholds, service pathways, downstream care, and evaluation beyond call clearance. The literature also emphasizes relational competencies for co-response success, including crisis communication, trauma-informed practice, cultural competence, de-escalation, referral decision-making, and connection-to-care behaviours.

## Conclusion

These four themes demonstrate the continued evolution of policing research and reinforce CPKN's role as a knowledge translation and professional development partner for the Canadian public safety community. Across all four themes, the strongest opportunity is to move from awareness-based learning toward demonstrated competencies, supported transfer, and outcome evaluation. Priority areas include modular learning pathways, realistic scenarios, plain-language research translation, job aids, refreshers, competency-based assessment, technology safeguards, and evaluation tools that help partners assess whether learning improves judgement, communication, safety, wellness, legitimacy, and connection to care. Appendix A provides detailed literature-based training and evaluation recommendations for police.

# Introduction

Policing continues to evolve in response to societal change, technological advancement, and a growing research base on effective practice. As a leading Canadian online learning provider for public safety professionals, CPKN has an important role in translating this evidence into relevant, practical professional development.

This literature review aims to provide an updated overview of the international open-access academic research landscape from 2025, highlighting emerging trends and areas of interest in policing with implications for police training and professional development. The main body presents a research synthesis, while detailed recommendations for police training and research are provided in Appendix A.

# Methodology

This review used a systematic approach to identify, select, and analyze research on policing issues with implications for education and professional development. Google Scholar was the primary source, supplemented by manual searches of policing-specific journals.[1]

Initial Boolean searches and truncations, including "polic* OR law enforcement," "polic* AND training," and "polic* AND education," were used to identify open-access, peer-reviewed English-language studies published in 2025 with clear implications for Canadian police training and related research. Canadian studies were prioritized, but comparator jurisdictions were included where policing systems were similar (commonwealth countries), Canadian evidence was limited, or where findings were clearly relevant to Canadian policing, recognizing that international findings required careful interpretation.

# Literature Review

CPKN's previous annual review identified four themes shaping police education and professional development: police militarization and use of force, police mental health and wellness, technologies for policing, and social media impacts on police-public relations.

The 2025 literature shows both continuity and a shift in emphasis. Police wellness remains a central concern, but new themes have emerged on training practice, public legitimacy and trust, and co-response models for policing mental health.

## Police Wellness

The 2025 police wellness literature frames officer wellbeing as more than an individual health concern. Across the evidence, mental health, organizational culture, and physical readiness are interconnected conditions that shape whether officers can learn, perform, recover, and remain healthy throughout their careers.

[1] *Applied Police Briefings*, *Policing: A Journal of Policy and Practice*, *Police Practice and Research*, *Policing and Society*, *The Police Journal: Theory, Practice and Principles*, *Journal of Community Safety and Well-Being*, *International Journal of Police Science*, *Journal of Police and Criminal Psychology*, and *Journal of Criminal Justice Education*.

**Implication for training and research:**

Police wellness learning should focus on career-long competencies, psychologically safe supervision, inclusive leadership, fatigue and recovery practices, and evaluation of whether training transfers into healthier help-seeking, recovery, and readiness behaviours (see Appendix A).

## Mental Health Risk Across the Career Cycle



**Anxiety** and **depression** can emerge as early as **cadet training**

Recent literature presents police mental health as a career-spanning, system-level issue. Anxiety and depression are evident as early as cadet training, with one study of Ghanaian police cadets reporting high rates of job-related anxiety and depression (Anum et al., 2025). Among Royal Canadian Mounted Police (RCMP) members, lifetime and past-year suicide ideation and planning have increased compared with previous RCMP and public safety personnel samples (Nisbet et al., 2025). Police mental health risk is also shaped by cumulative operational and organizational stress, with evidence linking trauma exposure, post- traumatic stress disorder (PTSD) symptoms, alcohol misuse, and organizational barriers to police officers seeking mental health support across the career cycle through retirement (Birch, 2025; Borko et al., 2025; Dougherty et al., 2025; Grumley Traynor & Rydon-Grange, 2025).



**Officers in remote Canadian postings** may face **higher risks of suicide planning** than those in urban areas, and **relationship status** can influence **lifetime suicide ideation**

Mental health risks vary by work conditions and social context. RCMP members in remote postings have reported higher odds of suicide planning than those in urban environments, and separated or divorced RCMP officers were more likely than single officers to report lifetime suicide ideation (Nisbet et al., 2025). Risk may be further concentrated in specialized assignments: personnel working on child sexual abuse material, sudden unexpected infant death investigations, and emergency response or tactical operations face sustained direct and vicarious trauma exposure (Rimer et al., 2025; Snippen et al., 2025; Towns & Ricciardelli, 2025).

Trauma exposure can be more intense when it intersects with broader structural pressures and evolving police–community relationships. Experiences of racism among Black, Indigenous, and People of Colour (BIPOC) first responders have been associated with higher levels of depression, anxiety, and PTSD symptoms (Jin et al., 2025). Increasing police–community divides and ambush-related incidents have been linked to moral injury and mental health impacts that may go beyond what traditional critical incident stress debriefing is designed to address (Milliard et al., 2025).

Persistent barriers to support compound these risks: officers with PTSD symptoms may be less likely to seek help, and some officers may use alcohol to cope following critical incidents and high organizational stress (Dougherty et al., 2025; Grumley Traynor & Rydon-Grange, 2025). Evidence-informed wellness interventions offer one practical response. Mindfulness-based interventions have been shown to reduce police stress, depression, anxiety, and burnout, with




benefits sustained over time (Gaskin et al., 2025). Mindfulness training has also been found to support officer well-being by strengthening emotional regulation (Plisson & Ferguson, 2025). These programs tend to be most effective when delivered in structured, sustained formats tailored to policing contexts and supported by ongoing practice (Gaskin et al., 2025; Hancock & Clifton, 2025; Plisson & Ferguson, 2025; Tessier & Genest, 2025).

Overall, this literature suggests that police wellness cannot be understood primarily as individual resilience or pathology. Mental health risk is shaped by the conditions in which officers work, the supports they trust, and the cultures that influence whether distress is recognized, disclosed, or addressed. Effective strategies therefore need to combine individual treatment and wellness supports, including mindfulness where appropriate, with attention to work design and organizational culture.

## Organizational Culture, Inclusion, and Help-Seeking

Organizational culture shapes wellness, retention, inclusion, and help-seeking. Workplace norms, hierarchy, leadership, psychological safety, and informal expectations influence whether officers feel they belong, can progress, disclose concerns, and access support without career penalty (Charman, 2025; Workman-Stark, 2025). These dynamics are also influenced by gender, race, rank, family status, and retirement status, with research linking inclusion, representation, harassment, and police culture to officer wellbeing and retention (DeWitt & Gasparini, 2025; Porter & Lee, 2025; Tayor & Mumford, 2025).




Representation matters when paired with cultural and structural change. Women remain underrepresented despite evidence linking women officers to lower use of force, fewer complaints, and stronger community engagement (DeWitt & Gasparini, 2025). Pressures to fit in, hierarchy, harassment, and stalled progression continue to limit retention of women working in policing (Charman, 2025; Tayor & Mumford, 2025). At the same time, evidence suggests that increasing women's representation may shift some cultural dynamics only once their presence is no longer tokenistic. One large United States (U.S.) study found that male officers' sense of police solidarity began to shift once women made up about 13 per cent of the workforce (Marier et al., 2025). This suggests that broader cultural change is more likely to come from increasing representation than relying on individual women to influence attitudes (Marier et al., 2025).

Psychological safety and fair treatment connect culture directly to wellness. Lower psychological safety has been linked to weaker organizational identification among women, minority officers, and non-supervisory officers (Workman-Stark, 2025). Workplace social support is strongly associated with wellbeing for both mothers and fathers in policing (Illias et al., 2025). However, women appear to experience higher levels of anxiety, depression, and sleep disturbance even where flexible work uptake is higher, suggesting that social support

alone may not fully offset gendered caregiving pressures (Illias et al., 2025; Padilla et al., 2025). More broadly, organizational stressors, including poor leadership and inadequate support, may be more harmful to well-being than operational stressors alone (Borko et al., 2025; Porter & Gavin, 2025).




Organizational culture also influences police decisions to seek support or care for their mental health (i.e., help-seeking). Stigma, perceived career consequences, distrust in services, confidentiality and management concerns, and lack of time or resources repeatedly appear as barriers across the literature (see Basham & Whittington, 2025; Gavin & Porter, 2025; Hancock & Clifton, 2025; Tessier & Genest, 2025). Retired officers have also continued to describe help-seeking barriers linked to the "tough cop" mentality, indicating that stigma around mental health compounds over time and persists after members leave the force (Porter & Lee, 2025).

Some of these cultural and organizational conditions also shape physical wellness. Leadership, staffing, shift design, equipment demands, and access to support affect whether officers can maintain physical readiness, recover from fatigue, and remain healthy across different assignments and career stages.

### Physical Readiness, Fatigue, and Career-Stage Health

Police physical health is increasingly shaped by changing work patterns, including increased screen-based work and administrative tasks that reduce physical activity during service hours and contribute to wider international concerns about declining police fitness. Activity levels and physical demands vary by assignment, while fitness standards differ across jurisdictions, complicating consistent expectations for occupational readiness (Franco et al., 2025; Orr et al., 2025).

Fatigue, recovery, shift schedules, sleep opportunity, workload, and administrative demands also affect safety and performance, meaning physical wellness cannot be separated from operational design (James et al., 2025).

Career-stage factors add further risk. Ageing officers face cumulative injuries, slower recovery, and fatigue from heavy operational gear, while some female officers may experience additional challenges after age 40 due to physiological changes associated with perimenopause (Birch, 2025). Overall, readiness depends on fitness, role design, assignment variation, fatigue management, equipment burden, ageing, gendered physiological change, and organizational support (see Birch, 2025; Franco et al., 2025; James et al., 2025; Orr et al., 2025).

## Police Training

If police wellness describes the conditions that enable officers to learn and perform, training is the mechanism for translating research into field practice. The 2025 training literature therefore focuses less on content exposure alone and more on transfer: how realistic scenarios, reflection, feedback, technology, recruit preparation, and evaluation shape whether learning changes judgement, behaviour, safety, and service quality.

**Implication for training and research:**

Police training should prioritize realistic practice, adaptive decision-making, instructor-supported reflection, technology safeguards, competency assessment, and evaluation of whether learning changes field behaviour and operational outcomes (see Appendix A).

## Technology-Supported Training and Transfer

Technology can expand realism, repetition, feedback, and access to complex scenarios, but it may not automatically improve transfer. In one Canadian study, officers made more lethal-force errors in video simulations than in live scenarios, with lower maximum heart rates suggesting reduced stress arousal and weaker transfer to real-world conditions (Andersen & Di Nota, 2025). Conversely, scaffolded virtual simulation formats for policing mental health incidents supported confidence, competence, reflective practice, and perceived preparedness when sequenced from computer-based video simulations to live tactical scenarios (Davies & Burnes, 2025).

Virtual simulation appears most useful when it supports experiential learning, reflection, and feedback, rather than replacing real-world practice. For example, VR integrations may be valuable for training on sensitive subjects like coercive and controlling behaviour. VR has been found to increase learner comprehension, confidence, empathy, and victim perspective-taking, but practical barriers such as set-up time, image quality, and headset distraction have remained limitations (Ashworth, 2025).



**Video simulations** may produce weaker **stress responses** and **less effective** skill transfer than **live training scenarios**

Pursuit simulation using XR technology offers another example. It can safely expose officers to dangerous, resource-intensive scenarios and standardize practice, but implementation depends on instructor buy-in, scenario fidelity, and management of motion sickness or gaps between simulated and real driving conditions (Howard et al., 2025; Ingrell & Mellgren, 2025). These examples reinforce the need to design technology-supported training carefully, as XR can create training risks when sensory input is incomplete, scenarios are repetitive, or available action options are too constrained (Stubbs, 2025).

In live training simulations (i.e., mock villages), body-worn cameras (BWCs) have enabled evidence collection and self-reflection (Davies & Burnes, 2025). They have also been found to enhance learners' understanding of feedback, help clarify areas for improvement, and build learners' confidence in their performance (Porter et al., 2025). This is particularly important as learners may lack self-awareness during high-stress scenarios, and rewatching body-worn camera footage promotes more realistic self-assessments. However, learners may also experience negative emotional states if they performed poorly in the scenario and feel uncomfortable rewatching the footage, emphasizing the importance of instructor facilitation (Porter et al., 2025).

Finally, AI and large language model (LLM) tools may support varied, adaptive, communication-heavy scenarios, with particular value for crisis negotiation, suspect interrogation, and high-stakes communication training (Violakis, 2025). Despite their benefits, these tools also raise concerns about bias, limited emotional nuance, technical reliability, validation, and over-reliance on automation (Violakis, 2025). Broader AI use in policing requires careful planning, ethical review, testing, skilled users, good data, and ongoing validation. Systems can make errors and may not be reliable enough for critical decisions without safeguards (Halford, 2025; Skipanes et al., 2025). Technology should therefore remain a support for instructor-led learning, not a replacement for realistic practice, human judgement, and evaluated transfer.

**Technology** should be used as a **support** for **instructor-led learning,** not a replacement for **realistic practice, human judgement,** and **evaluated transfer**



## Recruit Training, Professionalization, and Field Readiness

Recruit training research highlights a central question: how can academies prepare officers for field realities while supporting professionalization, safety, recruitment, and equity? Academy structure appears to matter for officer safety, as college-affiliated academies and more experienced sworn instructors have been linked to lower post-graduation injury rates and better safety outcomes (AlSabah & Wolff, 2025). Field training also matters because informal supervision helps recruits connect classroom learning to patrol realities. Field training provides immediate reflection, mental preparation, debriefing, and psychologically safe feedback, but its unstructured nature can limit consistent skill development (Andreasen et al., 2025).



**Field training** provides immediate reflection, mental preparation, debriefing, and **psychologically safe feedback,** but its unstructured nature can **limit consistent skill development**

These findings connect recruit training to broader debates about professionalization and police entry pathways. Contemporary training must develop more than legal knowledge and tactical competence. It also needs to build judgement, discretion, communication, and critical thinking. These capabilities support professionalism, ethical decision-making, problem-solving, and adaptability in the field (Hill, 2025).

International debates about degree, apprenticeship, graduate-entry, and non-degree routes reflect a persistent tension between raising educational standards and responding to recruitment pressures (Pepper et al., 2025). This tension matters because entry standards alone cannot professionalize policing if the workplace does not allow new officers to use what they have learned. When organizational culture or command-and-control management restricts junior officers' autonomy, discretion, critical thinking, and moral agency after training, the benefits of higher education or stronger recruit preparation may be weakened in practice (McCanney & Taylor, 2025).

Recruit preparation should therefore be aligned with the actual demands of contemporary policing. Plain-language communication and the ability to respond to health, mental health,

substance use, and crisis-related needs are increasingly important because officers routinely encounter people whose needs extend beyond legal or tactical response (Squires & Ross, 2025). At the same time, academy standards and assessments need to be scrutinized for relevance and equity. Gendered academy completion patterns suggest that inherited measures, including some physical fitness requirements, may disadvantage women without clear relevance to contemporary street-level policing (Sloan & Paoline III, 2025). This reinforces the need for training standards, pedagogy, and assessment to be inclusive, job-relevant, and evidence-informed.

### Training Pedagogy, Scenario Design, and Evaluation

Training pedagogy research shifts attention from content delivery to learning design, practice, reinforcement, and evaluation. Officers need to be able to adapt and make sound decisions depending on the situation, and models like constraints-led conflict training can develop their adaptability by varying tasks, as well as environmental and interpersonal conditions (Koerner & Staller, 2025). Transfer has been shown to improve when technical skills are embedded in realistic decision contexts, such as threat recognition in marksmanship training or shared situational awareness in active-shooter response (Borglund & Hansson, 2025; Lair & Cooper, 2025). Scenario-based practice has also been found to support courtroom testimony when officers rehearse the communicative, procedural, and emotional demands of presenting evidence (Davies & McCarthy, 2025).

Combining **practical experience** with **evidence, feedback,** and ongoing adaptation creates the **strongest learning opportunities**



Effective training blends practitioner experience with empirical evidence, feedback, and continuous adaptation (Engelmann & Tatnell, 2025). Across diverse operational contexts, the literature suggests that training is most effective when it is grounded in the realities practitioners face and designed around the competencies required to perform under real-world conditions. For example, research on cyber investigation training found that curricula should address identified knowledge gaps, reflect operational demands, and be continuously refined through evaluation and feedback, highlighting the central role of needs assessments in curriculum design (Krupa et al., 2025). Similar principles are evident in training for vehicle cybersecurity incidents and cybercrime disruption, where role-specific scenarios, decision-support tools, and cross-disciplinary collaboration help prepare practitioners for emerging technical threats (Pamarthi et al., 2025; Whelan et al., 2025). Likewise, tactical emergency care training emphasizes repeated scenario-based exercises that integrate medical assessment, threat management, communication, and team coordination under operational stress (Thodelius et al., 2025). Collectively, these studies suggest that effective training is not defined by content delivery alone, but by its alignment with operational realities, deliberate practice, and ongoing evaluation.

Pedagogy also depends on educator confidence, cultural responsiveness, careful facilitation, and psychological safety, particularly in trauma-informed police education (Lonbay & Cavener, 2025). These conditions are especially important when training addresses bias, disability, race, autism, and youth-related vulnerability. However, racial bias training should be sustained and evidence-informed, connecting individual practice to organizational context rather than relying on one-off awareness sessions (Samuels-Wortley et al., 2025). Similarly, autism- and youth-

focused training should use scenario-based, culturally responsive instruction to help officers avoid misinterpreting autistic behaviours, trauma responses, adolescent behaviour, or racialized vulnerability as defiance or threat (Yates Flanagan et al., 2025).

These findings point to a broader call to action in training design: learning should be realistic, psychologically safe, culturally responsive, and structured for transfer.

## Police Legitimacy, Public Trust & Perceptions

Public trust is multidimensional and unevenly distributed. It depends on whether the public perceive and experience police as fair, effective, responsive, transparent, accountable, and representative (Bradford et al., 2025b). Public confidence data also suggests that trust should be understood as part of a wider "moment" in policing, where public assessments reflect not only personal encounters but broader concerns about institutional performance and fairness (Bradford et al., 2025c). Trust is also shaped by race, disability, age, mental health, sexuality, income, exposure to crime, prior police contact, anticipated treatment, and broader social disruption (see de Bourbon et al., 2025; Madon, 2025; Morgan, 2025; Prince et al., 2025; Roché & Fleming, 2025; Yates Flanagan et al., 2025).

**Implication for training and research:**

Learning focused on police legitimacy should develop observable trust-building behaviours in everyday encounters and evaluate whether training improves respectful communication, proportionality, service quality, community engagement, and trust-related outcomes (see Appendix A).

### Uneven Trust and Everyday Police Encounters

Research on police legitimacy shows that public trust is shaped by both community experience and everyday service quality. Trust is not distributed evenly across the public; it is influenced by direct police contact, anticipated treatment, vicarious judgments, historical harm, perceived service quality, and whether police are seen as capable of meaningful reform (Davenport-Klunder et al., 2025; Kyprianides & Bradford, 2025a; Madon, 2025). For some communities, police interactions may feel risky rather than protective. For example, Black caregivers of autistic children worry that behaviours may be misinterpreted or escalated by police (Yates Flanagan et al., 2025), while young people with mental illness and 2SLGBTQ+ individuals report higher levels of distrust and avoidance of police (Morgan, 2025; Scott et al., 2025). Similarly, youth of colour and lower-income or racialized residents have been found to describe more negative interactions and perceptions of policing (de Bourbon et al., 2025; Spencer, 2025).

Trust is shaped not only by what people personally experience, but also by what they expect or observe. Expectations about future police conduct influence whether marginalized communities feel able to trust police (Madon, 2025). Indirect exposure to procedural injustice occurs when people witness or learn about unfair treatment directed at someone else and interpret it as a warning about how police may treat them or their community. For example, a bystander who sees officers dismiss a victim's concerns, speak disrespectfully, or fail to explain their decisions may view the encounter as both unfair and psychologically harmful (Kyprianides & Bradford, 2025a). These perceptions can then reduce trust, perceived



**Public trust in police** is shaped by both **personal experiences** and **broader perceptions of fairness,** which can **deepen distrust** when people witness or anticipate **unjust treatment**

legitimacy, and identification with police (Kyprianides & Bradford, 2025a). When such experiences align with broader concerns about police culture, conduct, or inadequate reform, distrust may deepen into resistance, disengagement, and apathy (Davenport-Klunder et al., 2025).

Everyday service quality can either reinforce or repair these perceptions. Communities value visible but meaningful neighbourhood presence. This means timely response, fair and proportionate treatment, engagement with local contexts, and referral to non-police services where issues such as housing insecurity, substance use, or mental health require broader support (Bradford et al., 2025b). Effectiveness and communication during police operations also influence public perceptions of police legitimacy. For example, cooperation with homicide investigations has been linked to perceived and actual clearance rates (Bocanegra & Gottlieb, 2025). Brief transparency statements can also reduce perceived threat and improve trust during community-police interactions (Dobson et al., 2025). Finally, trauma-informed practice can reduce distress and re-traumatization in routine and crisis encounters (Huppe & Lair, 2025).

Community policing and internal legitimacy are central to public trust because confidence in police depends not only on what communities experience, but whether officers are organizationally supported to practice procedural justice. Community policing appears most effective when it moves beyond visibility alone to include meaningful engagement, responsiveness to local concerns, fair treatment, shared problem-solving, and opportunities for communities to shape safety priorities (Bradford et al., 2025b; Savka, 2025). At the same time, the literature indicates that community-facing reform depends on internal organizational conditions. Officers are more likely to support community policing and procedural justice when they perceive themselves as legitimate, believe the public supports police, experience procedural justice from supervisors, and identify with the communities they serve (Meško & Hacin, 2025; Pass et al., 2025). Together, these findings suggest that trust-building cannot be treated solely as an external community engagement strategy; it also requires organizational cultures that foster officer legitimacy, community identification, and procedurally just practice in everyday interactions.

From a broader sociopolitical lens, police legitimacy can also shift during periods of crisis or social disruption. During the disruptive period from 2020 to 2024, assaults against police in Australia involved more youth, more incidents triggered by personal crises, and a sharp rise in intentional assaults, although assault severity and injuries did not escalate (Prince et al., 2025). These moments are sometimes called “shocks:” some are caused by policing itself, such as misconduct or fatal shootings, while others come from external political, economic, or social disruptions (Roché & Fleming, 2025). Police-related shocks often damage trust quickly, while wider social shocks have more mixed effects depending on whether the public attributes blame to police, political leaders, or broader systems (Roché & Fleming, 2025). In either case, these moments can reshape public trust, police tactics, and institutional legitimacy over time (Prince et al., 2025; Roché & Fleming, 2025).

## Representation, Reform Signals, and Interpretation of Police Conduct

Public trust is also shaped by how people interpret police conduct and whether reform efforts appear meaningful or symbolic. The literature suggests that legitimacy depends not only on what police do, but on whether officers communicate respectfully, exercise authority fairly and proportionally, explain their actions, and operate within systems of credible accountability (Bradford et al., 2025b; Dobson et al., 2025; Zare et al., 2025). Public interpretations of use-of-force encounters are influenced by situational facts, such as civilian noncompliance, as well as prior attitudes toward police legitimacy and authoritarianism (Flick et al., 2025). In these interactions, officers' use of profane language can reduce civilians' perceptions that force was reasonable, even when the physical force itself does not change (Johncox & Martaindale, 2025). Public education may improve understanding of use-of-force dynamics and may increase perceived legitimacy, but it cannot substitute for accountability or fair practice (Khanizadeh et al., 2025).



**Public interpretations** of **use-of-force** is judged not only by the **act itself**, but also by **context** and the **language** used during the encounter



Research links **women officers** with lower use of force, fewer complaints, and **stronger community engagement**, which works to **improve public trust**.

Representation and reform signals affect legitimacy when they are tied to implementation and accountability. Studies on public trust suggest that women officers may reduce perceptions of corruption or misconduct when the public interprets their presence as a sign of change from traditional police culture (Barnes et al., 2025; García & Berens, 2025). Research also links women officers with lower use of force, fewer complaints, and stronger community engagement (DeWitt & Gasparini, 2025). These perceptions can improve views of police effectiveness and reduce concerns about misconduct, especially among people exposed to crime, fear, corruption, or abuse (Barnes et al., 2025; García & Berens, 2025). However, representation alone is not enough: legitimacy gains depend on whether women's inclusion is supported by supervision, accountability, culture change, and meaningful career pathways. This implementation challenge also appears in broader accountability reform. After George Floyd's murder in 2020, accountability policy activity expanded across U.S. states, but reforms remained uneven. Moving beyond symbolic reform required oversight, advocacy, training, technology, and community engagement (Zare et al., 2025).

Technology integrations further illustrate implementation challenges. Body-worn cameras can support transparency, supervision, and professional accountability, but inconsistent activation and officer surveillance concerns can weaken that promise (Adams, 2025; Oglesby-Neal et al., 2025; Taeho, 2025; Thompson et al., 2025). Body-worn cameras can also create survivor-centred privacy and revictimization risks in violence against women cases, as survivors fear that cameras may capture trauma responses that could be used against them in court (Couture-Carron & Saulnier, 2025). Beyond body-worn cameras, AI tools may support efficiency and standardization, but public support for this technology depends on whether automated reporting feels procedurally fair, trustworthy, and capable of providing clear explanations rather

than simply replacing human interaction (Bradford et al., 2025a; Guler et al., 2025; Haley & Burrell, 2025).

Overall, the legitimacy literature shows that public trust is built or weakened through everyday encounters, not through reform signals alone. Trust is uneven across communities and shaped by direct experience, anticipated treatment, observed unfairness toward others, service quality, respectful communication, and whether police respond proportionally and transparently. Representation, technology, public education, and accountability policy can support legitimacy, but only when they are implemented in ways that change behaviour, protect vulnerable communities, create meaningful oversight, and give the public credible reasons to believe that police conduct will be fair, effective, and accountable.




## Policing Mental Health: Co-Response Models

Co-response models are coordinated approaches in which police work with mental health, social service, or community partners to respond to crisis-related calls, assess risk, support de-escalation, and connect people to appropriate care rather than relying on police response alone. These models respond to the growing overlap between policing, mental health crisis care, community safety, and public health. The central issue is not whether police encounter mental health-related demand, but how systems allocate responsibility, coordinate risk, build competencies, and evaluate whether co-response, diversion, and trauma-informed practices reduce harm rather than shifting workload between under-resourced services.

**Implication for training and research:**

Co-response training should build shared role understanding, crisis communication, referral decision-making, cultural competence, and competency-based assessment, while research should test whether models improve connection to care and reduce harm beyond call clearance (see Appendix A).

### Mental Health Demand, Role Boundaries, and System Capacity




The co-response literature frames policing mental health-related issues as a system-capacity challenge rather than a narrow policing problem. One Canadian study asserts that police work extends well beyond crime response, with mental health-related calls consuming significant officer time and resources (Deveau et al., 2025). Similarly, another study has shown that people experiencing mental health challenges encounter police in multiple roles, including as victims, offenders, people in need, and otherwise vulnerable community members (Kyprianides & Bradford 2025b). As such, police

often become the visible first responders because crisis care, housing, social services, and community supports lack sufficient capacity.



**Police** and **mental health practioners** may understand risk and responsibility differently, making the **role boundaries** within co-response models **complex**

Role boundaries within co-response models are often complex because police and mental health practitioners may understand risk and responsibility differently. Police may feel pressure to act once they know about a risk, especially because they face personal accountability, reputational consequences, and organizational scrutiny (Smith, 2025). Conversely, mental health practitioners must decide when to intervene while also trying to preserve trust, relationships, and continuity of care in an under-resourced crisis-care system (Smith, 2025). Co-response models also vary widely across jurisdictions in Canada, Australia, the U.S., and the United Kingdom (U.K.), with inconsistent training expectations, responder prerequisites, professional standards, and evidence of operational effectiveness (Eloi et al., 2025). Given that co-response models operate in a fragmented service environment, responsibility, authority, and capacity are often unevenly distributed.

## Co-Response Design, Service Pathways, and Frontline Competencies

Evidence on embedded, co-responder, and diversion models suggests that program design, service access, and frontline competencies matter as much as team presence. In the U.S., embedded police social work was shown to reduce arrests and hospital transports, but was still constrained by repeat contacts and limited service capacity (Kruelle & McClure, 2025). An evaluation of the Effective Mental and Behavioral Health Emergency Diversion (EMBHED) project found that a hybrid officer-referral and walk-in diversion model became institutionalized, but officer-referral attrition and unsuccessful follow-up persisted, suggesting ongoing capacity constraints (Shjarback & Swan, 2025).The walk-in pathway also produced a higher proportion of active clients receiving services, suggesting that how people enter the pathway affects whether diversion leads to sustained service connection despite capacity constraints (Shjarback & Swan, 2025).

Research highlights the importance of matching response models to call type, risk level, and available follow-up services. In the U.S., diversion through mental health co-response has been shown to reduce reliance on jails, emergency departments, and other high-cost systems (Donnelly et al., 2025). At the same time, needs vary widely, and no single model fits all situations. Effective responses may range from officer-led de-escalation to clinician involvement, referral, outreach, or longer-term support (Gill et al., 2025). Hybrid Crisis Intervention Team or co-response programs can improve officer understanding, empathy, collaboration, and alternatives to enforcement, even when short-term effects on calls for service or incidents are difficult to demonstrate (Gill et al., 2025). Overall, the evidence suggests that co-response and diversion for mental health calls are

**Co-response is strongest** when it is **integrated into operations,** connected to real service capacity, and **evaluated beyond immediate call clearance**



strongest when they are integrated into operations, connected to real service capacity, and evaluated beyond immediate call clearance (see Donnelly et al., 2025; Gill et al., 2025; Kruelle & McClure, 2025; Shjarback & Swan, 2025).



Instead of formulaic checklists, evidence highlights **unconditional respect**, **curiosity**, **appropriate questioning** and **active perspective-taking** as stronger foundations for **crisis communication**

The same evidence base shows that pathway design depends on how responders communicate and assess crisis situations. A rapid literature review on formulaic crisis communication checklists ("hooks and triggers" approaches) found these tools lack empirical validation, oversimplify crisis communication, and may encourage static assumptions about people in crisis (Zaiser, 2025). Instead, the evidence highlighted unconditional respect, curiosity, appropriate questioning, and active perspective-taking as stronger foundations for crisis communication (Zaiser, 2025). Another study similarly emphasized empathic and respectful rapport-building, showing that genuine connection, politeness, and respect support trust and information gathering in high-stakes police interactions (Pounds, 2025).

Competency assessment helps connect relational skills to response model effectiveness. In Canada, Lavoie and colleagues (2025) have developed the DePICT tool as a 14-item observer-rated measure for assessing police responses to mental health crises in live-action simulations. The tool focuses on observable de-escalation and relational skills, rather than training completion alone. This is important because it shifts evaluation from participation to demonstrated performance. The tool also offers a practical way to assess whether crisis-response training produces behaviours that can be observed, rated, and improved through feedback.

Finally, culturally competent trauma-informed practice is also critical, as crisis response and follow-up are shaped by trauma history, cultural context, and trust in institutions (Crawford et al., 2025). Overall, effective co-response depends not just on team structure or training, but on demonstrated communication, de-escalation, cultural competence, and connection-to-care behaviours.

## Conclusion

Officer wellness depends on career-long competencies and psychologically safe supports. Training is strongest when realistic scenarios, feedback, reflection, and evaluation are built into learning design. Legitimacy is built through everyday communication, service quality, fairness, and accountability. Co-response depends on role clarity, service pathways, relational competencies, and outcomes beyond call clearance.

Because this review is limited to open-access, peer-reviewed English-language literature published internationally in 2025, future work should expand the literature scope and continue testing how these findings apply in Canadian policing. CPKN can support that work by mapping catalogue coverage, reinforcing existing training offerings, and partnering on research that measures training transfer, wellness outcomes, legitimacy outcomes, and co-response effectiveness.

# Appendix A : Research Recommendations for Police Training and Evaluation

## Police Wellness

| Recommendation Area | Recommendations for Training and Evaluation |
|---|---|
| **Career-long wellness competencies** | • Build career-long wellness competencies, starting with emotional regulation and stress recognition in recruit training (Anum et al., 2025).<br>• Develop supervisor mental health literacy and retirement transition training (Birch, 2025; Gavin & Porter, 2025).<br>• Strengthen peer support and critical incident response training (Milliard et al., 2025).<br>• Create role-specific supports for specialized units exposed to high-risk trauma, including child sexual abuse material and sudden unexpected infant death investigations (Rimer et al., 2025; Snippen et al., 2025). |
| **Wellness training transfer and outcomes** | • Examine which learning models improve help-seeking, confidentiality trust, stigma reduction (Basham & Whittington, 2025; Tessier & Genest, 2025), organizational-stress coping and alcohol-related risk (Borko et al., 2025; Dougherty et al., 2025), culturally informed support (Jin et al., 2025), and stress management practices such as mindfulness (Gaskin et al., 2025).<br>• Evaluate training transfer and longer-term wellness outcomes rather than course completion alone (Basham & Whittington, 2025; Gavin & Porter, 2025; Milliard et al., 2025; Tessier & Genest, 2025). |
| **Inclusive and psychologically safe leadership** | • Train leaders and supervisors to build inclusive teams, respond to harassment, support mentorship, strengthen psychological safety, and recognize how identity, rank, family status, and culture shape wellness and retention (Charman, 2025; DeWitt & Gasparini, 2025; Tayor & Mumford, 2025; Workman-Stark, 2025).<br>• Evaluate whether inclusive leadership training improves psychological safety and organizational identification (Workman-Stark, 2025), mentorship access and perceived fairness as representation changes (Marier et al., 2025), and wellbeing across ranks, identities, and family-status contexts (Illias et al., 2025; Padilla et al., 2025). |

| | |
|---|---|
| **Physical readiness, fatigue, and recovery** | • Develop practical competencies in sleep, recovery, and shift-work health (James et al., 2025; Taylor et al., 2025), fitness maintenance and assignment-specific activity demands (Franco et al., 2025; Orr et al., 2025), and career-stage readiness, injury prevention, and ageing-related risk (Birch, 2025).<br>• Evaluate changes in knowledge, habits, perceived preparedness, fatigue risk, and injury-prevention behaviours (Birch, 2025; James et al., 2025; Orr et al., 2025; Taylor et al., 2025). |

## Police Training

| Recommendation Area | Recommendations for Training and Evaluation |
|---|---|
| **Evidence-informed recruit and field training** | • Connect academy learning to field realities using evidence-informed instruction, experienced instructors, and measures of post-graduation safety, injury, and readiness (AlSabah & Wolff, 2025).<br>• Structure field supervision to support reflection, psychological safety, and consistent skill development (Andreasen et al., 2025).<br>• Build critical thinking, discretion, plain-language communication, health literacy, and recognition of mental health, substance use, and crisis-related needs (Hill, 2025; Squires & Ross, 2025).<br>• Test whether standards and assessments are job-relevant, inclusive, and supportive of recruitment, retention, legitimacy, and readiness (Sloan & Paoline III, 2025). |
| **Technology as a scaffold for realistic practice** | • Use technology to support realistic practice, not replace it; sequence simulation from lower- to higher-intensity formats with structured reflection and debriefing (Davies & Burnes, 2025).<br>• Use realistic, regularly updated source material for high-fidelity simulation, especially in pursuit training (Howard et al., 2025; Ingrell & Mellgren, 2025).<br>• Avoid relying on VR or video simulation where live scenarios better reproduce stress conditions for high-pressure decisions (Andersen & Di Nota, 2025). |

| | |
|---|---|
| | • Prevent training scars by avoiding repetitive, low-fidelity, or overly constrained extended reality scenarios (Stubbs, 2025).<br>• Pilot AI-supported tools only with clear learning goals, skilled users, validation, human oversight, and safeguards (Halford, 2025; Skipanes et al., 2025).<br>• Use body-worn camera review with context and constructive reflection, especially when footage creates discomfort (Deck et al., 2025; Porter et al., 2025).<br>• Apply safeguards for bias, emotional realism, technical reliability, and over-reliance in AI-supported communication scenarios (Violakis, 2025). |
| **Adaptive practice and measurable transfer** | • Vary task, environmental, interpersonal, and information conditions so learners practice flexible decision-making under uncertainty (Koerner & Staller, 2025).<br>• Design role-relevant, needs-based scenarios for situation awareness, courtroom testimony, threat recognition, cyber investigations, vehicle cybersecurity incidents, tactical emergency care, and cybercrime disruption (Borglund & Hansson, 2025; Davies & McCarthy, 2025; Krupa et al., 2025; Lair & Cooper, 2025; Pamarthi et al., 2025; Thodelius et al., 2025; Whelan et al., 2025).<br>• Support instructors as learning facilitators who create psychologically safe and trauma-informed learning environments (Lonbay & Cavener, 2025).<br>• Connect practitioner experience with research evidence and continuous organizational learning (Engelmann & Tatnell, 2025).<br>• Build evaluation into training from the outset by assessing changes in knowledge, attitudes, and investigative practice for complex interpersonal offences (Lapsey Jr. et al., 2025), and field outcomes such as use-of-force patterns, injury outcomes, officer safety, and unintended trade-offs (Orosco et al., 2025). |

## Police Legitimacy and Public Trust

| Recommendation Area | Recommendations for Training and Evaluation |
|---|---|
| **Legitimacy competencies for everyday encounters** | • Develop observable competencies in respectful communication (Johncox & Martaindale, 2025), use-of-force proportionality (Flick et al., 2025), trauma-informed practice (Huppe & Lair, 2025), and recognition of anticipated distrust or indirect exposure to unfair policing (Kyprianides & Bradford, 2025a; Madon, 2025). |
| **Scenario-based service quality and community engagement** | • Use scenarios to practice timely response and appropriate referral to non-police supports (Bradford et al., 2025c), clear purpose statements (Dobson et al., 2025), investigative transparency (Bocanegra & Gottlieb, 2025), and shared problem-solving with community members (Savka, 2025). |
| **Training transfer and legitimacy outcomes** | • Assess whether legitimacy-focused learning changes service quality, officer communication, and community engagement (Bradford et al., 2025c; Scott et al., 2025).<br>• Evaluate whether training improves public use-of-force understanding (Flick et al., 2025; Khanizadeh et al., 2025).<br>• Assess privacy protection, bias safeguards, procedural fairness, and trust outcomes in technology-supported policing (Guler et al., 2025; Zare et al., 2025).<br>• Use community-specific measures rather than relying only on broad confidence scores (Bradford et al., 2025b; Scott et al., 2025). |

## Co-Response Models

| Recommendation Area | Training and Research Recommendations |
|---|---|
| **Joint training and crisis-response competencies** | • Develop standardized joint training for police and mental health responders, with local adaptations for dispatch, ambulance, embedded social workers, and community partners (Eloi et al., 2025; Kuehl et al., 2025).<br>• Clarify legal authority, risk thresholds, confidentiality limits, safety responsibilities, and accountability across roles (Smith, 2025).<br>• Build observable crisis-response competencies such as respect, curiosity, perspective-taking, and empathic rapport (Pounds, 2025; Zaiser, 2025). |
| **Service pathways and referral decisions** | • Train responders to choose triage, referral, follow-up, and diversion pathways based on mental health demand, call type, risk, prior contact, medical need, service availability, and the most appropriate response role (Deveau et al., 2025; Gill et al., 2025; Kyprianides & Bradford, 2025b).<br>• Use scenarios that reflect officer referral, walk-in diversion, embedded police social work, clinician involvement, and non-police alternatives where available (Kruelle & McClure, 2025; Shjarback & Swan, 2025). |
| **Competency assessment and model outcomes** | • Measure whether joint training improves communication, rapport, respect, curiosity, perspective-taking, de-escalation, safety planning, referral decisions, cultural competence, and connection-to-care behaviours (Crawford et al., 2025; Pounds, 2025; Zaiser, 2025).<br>• Use tools such as DePICT to support competency-based assessment in simulation and field-relevant scenarios (Lavoie et al., 2025).<br>• Study whether co-response training and implementation affect arrests, transports, emergency department use, jail bookings, service connection, system cost, use of force, injuries, repeat calls, client engagement, follow-up, officer time, practitioner workload, rural access, and lived-experience assessments of safety and respect (Donnelly et al., 2025; Gill et al., 2025; Kruelle & McClure, 2025; Shjarback & Swan, 2025; Smith, 2025). |

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