Procedurally just policing and persons in behavioral crises: investigating public perceptions, stigma and emotion

Sean Patrick Roche, Angela M. Jones and Ashley N. Hewitt
School of Criminal Justice and Criminology, Texas State University, San Marcos, Texas, USA, and
Adam Vaughan
Department of Justice Studies, University of Regina, Regina, Canada

Abstract
Purpose – The police often respond to persons who are not in direct violation of the law, but are rather undergoing behavioral crises due to mental illness or substance abuse disorders. The purpose of this study is to examine how police behavior influences civilian bystanders’ emotional responses and perceptions of procedural justice (PPJ) when officers interact with these populations, which traditionally have been stigmatized in American culture.

Design/methodology/approach – Using a factorial vignette approach, the authors investigate whether perceived public stigma moderates the relationship between police behaviors (i.e. CIT tactics, use of force) and PPJ. The authors also investigate whether emotional reactions mediate the relationship between police behaviors and PPJ.

Findings – Regardless of suspect population (mental illness, substance use), use of force decreased participants’ PPJ, and use of CIT tactics increased PPJ. These effects were consistently mediated by anger, but not by fear. Interactive effects of police behavior and perceived public stigma on PPJ were mixed.

Originality/value – Fear and anger may operate differently as antecedents to PPJ. Officers should note using force on persons in behavioral crisis, even if legally justifiable, seems to decrease PPJ. They should weigh this cost pragmatically, alongside other circumstances, when making discretionary decisions about physically engaging with a person in crisis.

Keywords Substance use, Mental health, Emotions, Perceived public stigma

Paper type Research paper

Introduction
American police officers do not simply respond to formal violations of law (Lipsky, 2010). One key service function is responding to “people in behavioral crises” (Pew Research Center, 2017; Pollack and Humphreys, 2020). This broad label can include persons with developmental disabilities, substance abuse disorders (Werb et al., 2008), or mental illnesses (Teplin and Pruett, 1992; Livingston, 2016). These vulnerable populations have traditionally carried substantial stigma in American culture. Members of these populations may be perceived as unpredictable, morally deficient, or actively dangerous (Pescosolido et al., 2010; Swanson et al., 2015). As such, other people may hesitate to directly engage with these individuals and instead call for emergency services. Indeed, very few mental health calls for service are officer-initiated (Mitchell et al., 2022). Yet, over 10% of Americans with mental disorders have had contact with police (Livingston, 2016).

Recently, scrutiny of police behavior, especially use of force, has grown considerably (Brown, 2016). As tensions between some communities and their police agencies increase, police risk losing legitimacy (Weitzer, 2015) and policymakers have thus advocated for procedurally just policing across the United States (President’s Task Force on 21st Century Policing and persons in behavioral crises).
One proposal is the incorporation of Crisis Intervention Team (CIT) training into police education (Robinson, 2020). CIT often involves partnerships between police and mental health services and focuses on how to improve officer reactions to persons in behavioral crisis (Compton et al., 2008; Watson et al., 2008). CIT programs employ de-escalation and communication techniques so that police officers may interact in more procedurally just ways. In theory, interactions between vulnerable groups and CIT-certified officers should result in fewer and less serious uses of force and fewer arrests via, for instance, diversion to mental health services (Watson et al., 2019).

While attention to police procedural justice has increased in recent years, there remains substantial uncertainty over what the public expects from police services (Meares and Tyler, 2020), especially in situations involving civilians act in erratic or irrational ways. Much of the procedural justice literature has neglected perceptions of police officers’ behavior during interactions with vulnerable populations (cf., Kahn et al., 2017; Jones et al., 2022). The current study provides insights into how the public perceives police interactions with different types of vulnerable populations. Using a factorial vignette approach, we investigate whether observers’ emotional reactions mediate the relationship between police behaviors (i.e. officer tactics and use of force) and the observers’ perceptions of procedural justice (PPJ). We do this across two different kinds of mental health crisis. We also investigate whether perceived public stigma moderates the relationship between police behaviors and perceived procedural justice.

Perceptions of procedural justice
Procedural justice is the perception of how fairly one has been treated by authorities during a process or interaction (Lind and Tyler, 1988; Blader and Tyler, 2003). Authorities who act respectfully, make unbiased decisions and provide people with a voice, are perceived to be more procedurally just (Sunshine and Tyler, 2003; Tyler, 2004, 2011; Schulhofer et al., 2011). Procedurally just treatment affirms a valued social identity (Bradford et al., 2014) and promotes senses of belonging and security (Tyler and Lind, 1992; Tyler and Blader, 2003). This fosters shared values and increases the likelihood a person believes the law ought to be obeyed (Sunshine and Tyler, 2003; Tyler and Jackson, 2014). Conversely, when authorities operate in unfairly or capriciously, people become frustrated and resentful, weakening the perception these authorities should be obeyed (Tyler and Huo, 2002; Bradford et al., 2014) [1].

Questions remain about the antecedents of civilians’ perceptions of police procedural justice (Nagin and Telep, 2017; Pickett et al., 2018). First, research based on experimental studies suggests officers’ behavior impacts civilians’ encounter-specific perceptions (Mazerolle et al., 2013; Johnson et al., 2017). These experimental studies often contrast conditions featuring calm, polite officers with conditions where officers are hostile and verbally abusive (e.g. Roche, 2019). Less is known about how civilians react when officers’ behavior is merely curt and indifferent versus, consistent with CIT tactics, assuring and compassionate. Second, while findings supporting procedural justice theory have successfully replicated in many arenas, such as civil and criminal courts, interpersonal disputes and work environments (Casper et al., 1988; Tyler, 2017; Jones et al., 2019), none of these contexts allow for the legitimate use of physical force. In contrast, the use of physical force is legitimate course of action in policing. Third, while some studies assess perceptions of police use of force (see Kahn et al., 2017; Mourtgos and Adams, 2020), few have examined the implications of police use of force on PPJ (cf., Jones et al., 2022). Finally, there has been little attention to potential mediating and moderating factors for the relationship between officer behavior and civilian perceptions, such as encounter-specific emotional reactions (as a mediator), or more fundamental biases (as a moderator). These mediating and moderating factors are the focus of the current study.
The potential mediating role of emotions on perceptions of procedural justice

Most Americans have little direct contact with police (Roberts and Stalans, 1997; Roberts et al., 2003). Instead, they increasingly learn about policing from videos filmed and posted by civilian bystanders on social media of police-civilian interactions (Goldsmith, 2010). Research suggests the public’s attitudes and behaviors are influenced by vicarious exposure to these interactions (Rosenbaum et al., 2005), especially White Americans (Jackson et al., 2020). Bystanders can also influence how later audiences make sense of police actions by commenting on the scene (see Toch, 2012). Still, few studies have assessed bystander perspectives of police-civilian interactions (cf., Johnson et al., 2017; Maguire et al., 2017).

Police-civilian interactions can provoke strong emotions for those directly involved, as well as bystanders, and this may be especially true in situations involving persons in behavioral crisis. These emotional responses can be difficult to stifle (Nix et al., 2019) and may influence cognitive assessments by spurring a search for information that confirms the emotion (Lerner et al., 2015; Barnum and Solomon, 2019). Emotional reactions to police behavior may influence cognitive perceptions of whether that behavior was procedurally just, thus mediating the relationship between police action and PPJ.

Nevertheless, previous research has focused on another role for emotions — mediating the relationship between procedurally just treatment and compliance with officers (Murphy and Tyler, 2008; Barkworth and Murphy, 2015; Brown et al., 2022). This causal ordering comports with some research on the relationship between cognitive assessments and emotions (Loewenstein et al., 2001; Camerer et al., 2005), which argue cognitive assessments inspire the emotional states that are the proximate causes of behavior. Still, cognitive perceptions and emotions are likely reciprocal (see, e.g. Slovic et al., 2004), and it is possible that emotional states intercede at multiple points between officers’ initial actions, civilians’ perceptions of these actions and civilians’ reactions (Hegtvedt and Parris, 2014).

How might different emotional states influence PPJ? Given the definition of procedural justice, which stresses fairness and trust, positive emotional states may be associated with greater perceived procedural justice (Mullen, 2004). In contrast, negative emotional states may be negatively related to perceived procedural justice. For example, anger is associated with feelings of certainty and control and can influence individuals to perceive immediate risks as low (Lerner and Keltner, 2001), and to confront and remove obstacles (Carver and Harmon-Jones, 2009). Thus, police actions that spark anger may promote an urge to confront that action and pronounce it as procedurally unjust. Prior research suggests procedural justice and anger are negatively correlated among civilians assessing police officers (Murphy and Tyler, 2008) [2] and incarcerated persons assessing correctional officers (Beijersbergen et al., 2015).

In contrast, fear is associated with uncertainty and lack of control, and is inhibitory and pushes individuals to avoid threatening stimuli (Wake et al., 2020; Yüvrü et al., 2020). Thus, fear may not induce the same response as anger. In the current study, we explore its potential mediating role. Limited evidence suggests that, regardless of the timing of the response, procedural injustice and fear are positively related (Hellwege et al., 2022).

The potential moderating role of perceived public stigma on perceived procedural justice

Stigma is often defined as an attribute that greatly discredits an individual person, labeling them as reduced, tainted, or otherwise discounted (Goffman, 1963; Major and O’brien, 2005). A person may be stigmatized when others believe they possess one or more characteristics that are socially devalued (Crocker et al., 1998). The person is mired in damaging stereotypes (Jones et al., 1984) that are widely known in a society (Steele, 1997) and which become the basis for exclusion and other forms of discrimination (Hinshaw and Stier, 2008; Major and Eccleston, 2013).
Police are often first responders to vulnerable populations, such as persons with mental illness or substance abuse disorders, and these populations have traditionally carried substantial stigma in American culture (Pescosolido et al., 2010; Swanson et al., 2015). Indeed, persons who use substances are even more feared or disliked (Martin et al., 2000). The lives of stigmatized people may be affected in several ways (Major and O’brien, 2005), but in a policing context, direct negative treatment and discrimination by others (Sidanius and Pratto, 1999) is most salient.

While there is a dearth of research in this area, some social psychological underpinnings of procedural justice theory (i.e. need to belong, see Baumeister and Leary, 1995) suggests perceived public stigma may influence how bystanders view police-civilian interactions. If procedurally just treatment affirms social identity (Bradford et al., 2014) and promotes a sense of belonging in society (Tyler and Lind, 1992; Tyler and Blader, 2003), then when police engage in understanding and caring actions to a member of a stigmatized group, bystanders with strong stigma toward that group may be largely indifferent, not seeing the need to extend the courtesy. They may tolerate, or even support, disrespectful treatment by police because they do not perceive the need to extend belonging or a sense of value. In contrast, bystanders with little stigma may find caring actions to be procedurally just because they believe valued social identity and belonging are owed and would therefore find disrespectful treatment to be procedurally unjust. Nevertheless, our hypotheses here are driven largely by extrapolation from extant theory and are fundamentally exploratory in nature.

The current study
In the current study, we examine the effects of officers’ use of force and use of crisis intervention training (CIT) tactics on bystander PPJ in two hypothetical interactions with a person in behavioral crisis. The first scenario involved officers and a person with substance-induced psychosis. The second scenario involved officers and a person with psychosis resulting from mental illness. Previous research suggests that all else being equal, use of force decreases PPJ and use of CIT tactics increases PPJ (Jones et al., 2022). We build on this research to explore the potential mediating roles of emotions and the moderating roles of perceived public stigma. Hypotheses 1a – 1e concern the experimental manipulation of police use of force. Hypotheses 2a – 2e concern the experimental manipulation of police use of CIT tactics. See Figure 1 for a full etiological model.

**Figure 1.**
Etiological model of bystander reactions to police encounters with persons in crisis

**Source(s):** Figure by authors
Hypothesis 1:
1a. Use of force will reduce PPJ (direct effect).
1b. Use of force will result in more anger which, in turn, will reduce PPJ (mediating effect).
1c. Use of force will result in more fear which, in turn, will reduce PPJ (mediating effect).
1d. Use of force will reduce PPJ among those holding little stigma against persons with substance use disorders. For those with higher levels of stigma, use of force will not influence PPJ (moderating effect).
1e. Use of force will reduce PPJ among those holding little stigma against persons with mental illness. For those with higher levels of stigma, use of force will not influence PPJ (moderating effect).

Hypothesis 2:
2a. Use of CIT tactics will increase PPJ (direct effect).
2b. Use of CIT tactics will result in less anger which, in turn, will increase PPJ (mediating effect).
2c. Use of CIT tactics will result in less fear which, in turn, will increase PPJ (mediating effect).
2d. Use of CIT tactics will increase PPJ among those holding little stigma against persons with substance use disorders. For those with higher levels of stigma, use of CIT tactics will not influence PPJ (moderating effect).
2e. Use of CIT tactics will increase PPJ among those holding little stigma against persons with mental illness. For those with higher levels of stigma, use of CIT tactics will not influence PPJ (moderating effect).

Methods
Participants
In 2019, we conducted two rounds of data collection. We recruited 809 undergraduates from criminal justice and psychology courses at a large public university in the American southwest (Age range: 18–46; $M = 20.18$, $SD = 3.09$ years; 36% non-Hispanic White, 33% Hispanic White, 13% African American and 16% Other; 69% female). Students were compensated with course credit. We also collected a national online sample. We contracted with Qualtrics to recruit a sample of 569 participants whose age, race and sex represent the adult American population (Age range: 18 to 85; $M = 44.43$, $SD = 15.77$ years; 62% non-Hispanic White, 15% Hispanic White, 14% African American and 8% Other; 51% female).

Experimental design: situational manipulations of police tactics and use of force
The survey experiment consisted of a 2 (Cause of psychosis: mental illness vs substance use) $\times$ 2 (Officer tactics: conventional vs CIT tactics) $\times$ 2 (Use of force: no force vs force used) between-subjects factorial design. Participants read a vignette that asking them to imagine police were called to a party after a friend, Mike, started displaying signs of psychosis (see online Appendix A). Half of the participants were told Mike’s behavior was due to mental illness (i.e. paranoid schizophrenia) while the other half were told his behavior was due to a substance Mike had smoked (i.e. methamphetamine). Additionally, half of participants learned officers had specialized training to deescalate crisis situations and acted in accordance with such training (e.g. officers attempted to calm Mike down). For vignettes
where officers did not have this training, the respondents were told so, and the officers acted brusquely and were frustrated with Mike’s behavior. Finally, when attempting to detain Mike, half of respondents received were told officers used force, while the other half read officers handcuffed Mike without resistance. We conducted manipulations checks indicating the manipulations were successful (see online Appendix B). All materials, data and appendices are available on Open Science Framework [3]. See Table 1 for sample descriptive statistics.

**Dependent variable: perceived procedural justice**

Consistent with prior literature (Mazerolle et al., 2013), participants answered seven questions measuring situational PPJ (1 = strongly agree, 5 = strongly disagree). We recoded responses so higher values indicated greater PPJ. All questions and factor loadings are provided in online Appendix C.

**Proposed mediators: situational emotional affect response**

We adapted Mackinnon et al. (1999) ten-item condensed version of the Positive and Negative Affect Schedule (PANAS; see Watson et al., 1988) to measure emotional responses to the vignette. Participants indicated the extent to which they felt each feeling or emotion in response to the story they just read (1 = very slightly or not at all, 5 = extremely). We also included five terms used by Barkworth and Murphy (2015) — “frustrated,” “tense,” “angry,” “resentful,” and “anxious” to extend and replicate prior research on emotional affect and PPJ and legitimacy. Two factors emerged measuring fear and anger. All questions and factor loadings are provided in online Appendix C.

**Proposed moderators: perceived stigma**

For those assigned to the mental illness condition, we measured perceived public stigma towards persons with mental illness. Those assigned to the substance use condition answered questions regarding perceived public stigma towards persons with substance use disorders. We used Eisenberg et al. (2009) six-item scale, which was in turn adapted from Link’s popular perceived discrimination-devaluation (D-D) scale (Link, 1987; Link et al., 1989) to measure perceived stigma towards persons with mental illness. Using a six point-Likert

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<th>Variables</th>
<th>Substance use ($n = 689$)</th>
<th>Mental health ($n = 689$)</th>
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<tbody>
<tr>
<td></td>
<td>Mean or %</td>
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<tr>
<td>Mental health stigma</td>
<td>–</td>
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<tr>
<td>Substance use stigma</td>
<td>3.70</td>
<td>0.86</td>
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<td>Situational fear</td>
<td>2.45</td>
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<tr>
<td>Situational anger</td>
<td>1.96</td>
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<td>Perceived procedural justice</td>
<td>4.08</td>
<td>0.77</td>
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<tr>
<td>Age</td>
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<td>Male</td>
<td>36.5</td>
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**Note(s):** ABBREVIATIONS: SD = standard deviation  
**Source(s):** Table by authors

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scale (1 = strongly agree, 6 = strongly disagree), participants responded to six statements about how society views persons with mental illness. Before averaging across the items, we recoded responses so that higher values indicated greater perceived stigma.

For those assigned to the substance use condition, perceived stigma towards persons with substance abuse disorders was measured using an adaptation of Eisenberg et al. (2009) six-item scale. We substituted in terms like “drug addiction” and “drug abuse treatment” to construct six statements similar to the original scale. Using a six point-Likert scale (1 = strongly agree, 6 = strongly disagree), participants responded to six statements about how society views persons with substance abuse disorders. Again, before averaging across the items, we recoded responses so that higher values indicated greater perceived stigma. All questions and factor loadings are provided in online Appendix D.

Results
We assessed main effects using OLS regression. To test for moderation and mediation, we ran PROCESS Model 5 (Hayes, 2018) using bias-corrected bootstrap (k = 10,000) confidence intervals. As recommended by Hayes (2018), we report unstandardized regression coefficients. Analyses were conducted separately for each of the two causes of psychosis: (1) substance use and (2) mental illness.

Substance use disorder
We first examined how use of force on a person suffering from substance use influenced PPJ and the roles of stigma and emotions (see Figure 2). Consistent with Hypothesis 1a, use of force decreased PPJ, $b = -0.16, 95\% \text{ CI } [-0.27, -0.05]$. This effect was mediated by anger, $b = -0.10, 95\% \text{ CI } [-0.16, -0.05]$, but not fear, $b = 0.003, 95\% \text{ CI } [-0.03, 0.04]$. When officers used force, participants responded to the incident with more anger and more anger decreased PPJ, supporting Hypothesis 1b. Substance use stigma also moderated the relationship between use of force and PPJ, though contrary to Hypothesis 1d, $b = -0.12$.  

Note(s): Solid lines denote statistically significant pathways; dotted lines denote nonsignificant pathways. Sign of significant pathways is denoted with plus and minus symbols. Unstandardized regression coefficients are reported in-text

Source(s): Figure by authors
95% CI [−0.24, −0.01]. Use of force negatively affected PPJ at high levels (+1SD) of substance use stigma, \( b = -0.16, 95\% \text{ CI} [-0.31, -0.02] \), but not at average, \( b = -0.06, 95\% \text{ CI} [-0.16, 0.04] \), or low levels (−1SD), \( b = 0.04, 95\% \text{ CI} [-0.11, 0.18] \).

We next examined how substance use stigma and emotions influenced the relationship between officers’ use of CIT tactics and PPJ (see Figure 3). As predicted in Hypothesis 2a, CIT tactics increased PPJ, \( b = 0.55, 95\% \text{ CI} [0.44, 0.66] \). This effect was mediated by anger, \( b = 0.09, 95\% \text{ CI} [0.04, 0.15] \), but not fear, \( b = 0.01, 95\% \text{ CI} [-0.02, 0.04] \). Supporting Hypothesis 2b, when officers employed CIT tactics, participants responded to the incident with less anger and less anger increased PPJ. In contrast to Hypothesis 2d, substance use stigma did not moderate the effect of CIT on PPJ, \( b = -0.10, 95\% \text{ CI} [-0.02, 0.22] \). Instead, this stigma independently and negatively influenced PPJ, \( b = -0.08, 95\% \text{ CI} [-0.14, -0.01] \).

**Mental illness**
We then examined how mental illness stigma and emotions influenced the relationship between use of force and PPJ (see Figure 4). First, supporting Hypothesis 1a, we again found that use of force decreased PPJ, \( b = -0.38, 95\% \text{ CI} [-0.50, -0.26] \). This effect was mediated by anger, \( b = -0.16, 95\% \text{ CI} [-0.24, -0.09] \), but not fear, \( b = 0.01, 95\% \text{ CI} [-0.02, 0.05] \). Similar to persons with substance use disorders, when officers used force against a person suffering mental illness, participants became angrier, which in turn reduced PPJ. This result supports Hypothesis 1b. However, in contrast with Hypothesis 1e, mental illness stigma did not moderate the effect of use of force on PPJ, \( b = 0.01, 95\% \text{ CI} [-0.11, 0.12] \). Instead, mental health stigma independently and negatively affected PPJ, \( b = -0.11, 95\% \text{ CI} [-0.17, -0.04] \).

Finally, we examined how mental illness stigma and emotions influenced the relationship between officers’ use of CIT tactics and PPJ (see Figure 5). As predicted (Hypothesis 2a), CIT tactics increased PPJ, \( b = 0.88, 95\% \text{ CI} [0.76, 0.99] \). This effect was mediated by anger, \( b = 0.25, 95\% \text{ CI} [0.17, 0.34] \), but not fear, \( b = -0.02, 95\% \text{ CI} [-0.05, 0.02] \). Similar to the previous scenario and consistent with Hypothesis 2b, CIT tactics reduced participants’ anger, which in turn increased PPJ.

**Figure 3.** Bystander reactions to police CIT tactics with persons in crisis from substance use

**Note(s):** Solid lines denote statistically significant pathways; dotted lines denote nonsignificant pathways. Sign of significant pathways is denoted with plus and minus symbols. Unstandardized regression coefficients are reported in-text

**Source(s):** Figure by authors
While the interaction between mental illness stigma and CIT was significant $b = 0.15$, 95% CI [0.03, 0.26], it was in contrast to Hypothesis 2e. The effect of CIT tactics on PPJ became stronger as mental illness stigma increased from low levels of stigma ($-1SD$), $b = 0.51$, 95% CI [0.37, 0.66], to average levels, $b = 0.65$, 95% CI [0.54, 0.75], and finally to high levels of stigma ($+1SD$), $b = 0.78$, 95% CI [0.63, 0.93].
Discussion
Procedurally just treatment increases the public’s beliefs that the police are trustworthy and legitimate, and are thus more worthy to be obeyed (Sunshine and Tyler, 2003; Tyler, 2004, 2011; Schulhofer et al., 2011; Tyler and Jackson, 2014). Yet, this focus on the effects of procedurally just policing has largely neglected its antecedents. In the current study, we examined how certain police behaviors during interactions with persons in behavioral crisis influenced bystander perceived procedural justice (PPJ) and the roles of perceived public stigma and emotion in producing PPJ.

Direct and mediating effects
Regardless of whether participants read about police interactions with a person suffering a behavioral crisis due to substance use or mental illness, use of force resulted in participants perceiving the officer’s behavior as less procedurally just, while the officer using CIT tactics increased PPJ (supporting Hypotheses 1a, 2a). These effects were consistently mediated by anger (supporting Hypotheses 1b, 2b), though not by fear. Participants were angrier when police used force against a person and when police failed to use CIT tactics. Participants who reported higher levels of anger also reported lower levels of PPJ.

These findings suggest interactions where police use of force on persons in behavioral crisis, whether that force was justified or not, negatively affect public perceptions of the police. Likewise, an absence of CIT tactics, with officers instead treating the person in crisis in a brusque and business-like way, negatively affected public perceptions. Use of force and failure to use CIT tactics did not induce fear in participants, nor did fear predict PPJ (cf., Hellwege et al., 2022). Instead, these factors induced anger, driving down PPJ.

Practical implications
These findings have implications for police practice. First, officers should note that using force on persons in behavioral crisis, even if appropriate and justifiable under the law, seems to decrease PPJ. They should weigh this cost pragmatically, alongside other circumstances, when making discretionary decisions about physically engaging with a person in crisis. Second, our findings suggest that even seemingly neutral speech can have negative effects. We found that when officers talk in a professional, yet brusque and cold way, it also decreased PPJ. When possible, officers should avoid speaking to this population in a curt, terse, or cool manner. Our results suggest that approaching with empathy and understanding, when possible, will yield positive effects on PPJ. Finally, alongside instruction on CIT tactics (Robinson, 2020), discussion of these “collateral consequences” of force and speech on PPJ should be included in police training.

Theoretical implications
There are two potential theoretical explanations for our findings. First, we incorporated emotional response items from past research (Barkworth and Murphy, 2015). The emotional responses of “tense” and “anxious” from Barkworth and Murphy (2015) aligned more with fear, while the remaining negative emotions better aligned with anger. This more nuanced breakdown of emotional response may account for why our findings contrast with theirs. Alternatively, fear and anger may operate differently as antecedents of PPJ. Anger is an approach-related emotion that spurs individuals to confront and remove obstacles (Carver and Harmon-Jones, 2009), and thus may influence individuals to perceive and denounce injustices. In contrast, fear is an inhibitory emotion that pushes individuals to escape threatening situations or stimuli (Wake et al., 2020; Yüvrük et al., 2020). Thus, fear may discourage people from condemning inequalities and produce obedient but unjust societies (Tankebe and Meško, 2015, see also, Pösch et al., 2021; Reisig and Trinkner, 2023).
Perceived public stigma as a moderator
We also examined the moderating effect of perceived public stigma, measured using a scale of public attitudes. Some have suggested stigma is better measured personally (see Pedersen and Paves, 2014). Still, having prejudicial views of these vulnerable groups may itself no longer be considered socially acceptable, so we employed a more circumspect measure of stigmatic attitudes.

We hypothesized that use of force and CIT tactics would only affect PPJ among those holding little stigma. Under no circumstance was this hypothesis supported (Hypotheses 1c, 1d, 2c, 2d). Instead, among those who learned about an interaction with someone under the influence of drugs, we observed that use of force reduced PPJ only among those holding the strongest substance use stigma. Substance use stigma did not moderate the effects of CIT tactics on PPJ nor did mental illness stigma moderate the effects of use of force on PPJ. In these circumstances, both substance use and mental illness stigmas reduced PPJ regardless of police behavior. Finally, CIT tactics had the strongest effect on PPJ at high levels of mental illness stigma, though to a lesser extent CIT tactics also influenced PPJ at low and average levels of mental illness stigma. Thus, the potential influence of perceived public stigma on PPJ is not straightforward and merits further attention (see, e.g. Berryessa and Krenzer, 2020).

Limitations
Our study, like many others (e.g. Nix et al., 2017; Flippin et al., 2019) relied on experimental survey vignettes describing police-civilian interactions. While this design maximizes internal validity through random assignment, it may have limited external validity. For instance, in non-CIT experimental condition, respondents were told that the officers did not have specialized training to deescalate crisis situations. Real-world bystanders would not be privy to this information, and it may have primed some respondents to be more skeptical of the officers’ behavior. As well, vignettes do not fully represent the complex interactions police have with persons in behavioral crises or those where bystanders record. The use of more realistic modalities (e.g. virtual reality, see Van Gelder et al., 2019), may increase generalizability. Nonetheless, people often do form their opinions from vicarious sources (Pryce et al., 2021), which shape global perceptions of the police (Worden and Mclean, 2017) and can influence how future direct experiences with police are perceived (Rosenbaum et al., 2005).

Finally, our study did not employ a nationally representative probability sample. However, the Qualtrics sample did replicate the U.S. population in terms of age, race and sex and samples from online panels like this typically outperform other online recruitment platforms (Boas et al., 2020). Further, findings from our student sample largely replicated those of the Qualtrics sample, suggesting it is unlikely the findings are false positives (Murayama et al., 2014). Nevertheless, our student sample was recruited from criminal justice and psychology classes, and students in those fields may not hold the same views as other students, or those in the general population.

Notes
1. There are important ongoing debates about the operationalizations of legitimacy, procedural justice, and obligation to obey, and whether they are empirically distinct from one another (see, e.g. Nagin and Telep, 2017; Reisig and Trinkner, 2023). However, these are beyond the scope of the current study.
2. See also Barkworth and Murphy (2015) who looked at a composite of negative affect that included anger.
3. https://osf.io/ufs58/?view_only=e5df63119cf44647bac5445115756e82
References


Further reading


About the authors
Sean Patrick Roche is Associate Professor in the School of Criminal Justice and Criminology at Texas State University. His research interests include policing, public opinion about crime and criminal justice issues, survey methodology and offender decision-making. Sean Patrick Roche is the corresponding author and can be contacted at: sean.roche@txstate.edu

Angela M. Jones is Associate Professor in the School of Criminal Justice and Criminology at Texas State University. Her research interests lie at the intersection of psychology and the legal system. She applies expertise in experimental and survey methodology to design studies assessing public perceptions of procedural justice concerning police and courts, as well as evaluations of unreliable evidence that could lead to wrongful convictions. She also evaluates methods to improve juror decision-making, such as instructions, expert testimony and implicit bias training.

Ashley N. Hewitt is Assistant Professor in the School of Criminal Justice and Criminology at Texas State University. Her research interests largely focus on the application of environmental criminology principles to the study of sexual violence, as well as offender profiling and offender decision-making.

Adam Vaughan is Assistant Professor in the Department of Justice Studies at the University of Regina and adjunct professor with the Faculty of Health Sciences at Simon Fraser University. Through quantitative methodologies, his research focuses on the array of intersection points that exist between the criminal justice system and mental health and substance use.

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