

The Memphis Model as Pedagogy: Transforming Confrontation into Collaboration

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Abstract:

Introduction: This study explored relationships between compassion fatigue, compassion satisfaction, and care behaviors in Memphis Police Department Crisis Intervention Team officers.

Methods: A quantitative correlational cross-sectional approach was used.

Results: Compassion satisfaction was a statistically significant predictor of care behaviors among Memphis Police Department Crisis Intervention Team officers.

Discussion: The Memphis Model is an iconic evidence-based pedagogic roadmap for police and community partnership.

Limitations: Officers were purposively chosen due to the historic significance of the Memphis Model and to explore the continued relevance of the model.

Conclusions: Study results provide a pedagogic roadmap to transform confrontation to collaboration.

Key words: care behaviors, Memphis model, police reform, compassion fatigue.

Introduction

The Memphis Police Department Crisis Intervention Team has played a crucial role in police reform, accountability, and adaptation to social change since the inception of the Memphis Model in 1988. Since pedagogy may provide a foundation for effective professional practices (Ryabchikova, 2018), this study

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identifies opportunities to improve the quality of mental health care and community service in the global community (Andersen & Papazoglou, 2015; Bloomberg et al., 2020; CIT International, 2017; Dupont et al., 2007; Ellis, 2014; Lynch et al., 2021; Thompson & Borum, 2006; Tomitsch, 2022; Usher et al., 2019; White et al., 2021). In the face of dwindling numbers of law enforcement officers and police retention challenges (Drew et al., 2025), the time is right for actionable pedagogy. Study results describe relationships between compassion fatigue, compassion satisfaction, and caring behaviors in the Memphis Police Department's Crisis Intervention Team and provide evidence-based pedagogic recommendations for training law enforcement professionals and educating community stakeholders.

Compassion fatigue is a profound emotional peril that affects care-providing professionals, particularly those involved in emergency and community response roles (Cocker & Joss, 2016; Dewey, 2019; Lai et al., 2020; Lanier & Brunt, 2019; Racine et al., 2023; Rauvola et al., 2019; Roach, 2023). Compassion satisfaction is inversely related to compassion fatigue (Andersen et al., 2019; Ray et al., 2013; Stamm, 2012, 2016). It is reflected in positive feelings that come from helping others versus negative feelings that arise from helping others, resulting in compassion fatigue (Stamm, 2012, 2016). Despite the importance of these elements, previous studies have not examined the caring behaviors of police officers as well as community stakeholders. This study contributes to an identified gap in the literature and recommends pedagogical practices for teaching and learning.

1 Literature review

1.1 The Memphis Model

The Memphis Police Department Crisis Intervention Teams (MPDCIT), also known as the international best practice Memphis Model, is a collaborative community voluntary outreach police program that works with families and consumers of mental illness services, and is the standard-bearer for jail diversion and safe passage to mental health facilities for mental health consumers (National Alliance on Mental Illness, 2016; Usher et al., 2019; Watson, et al., 2008; Watson & Fulambarker, 2012; Young, 2015). The core operational elements of the Memphis Model are officer volunteerism to become a member of the Crisis Intervention Team, response specialization, officer characteristics, skills, and training requirements for the successful implementation of the model (Dupont et al., 2007; Usher et al., 2019). De-escalation specialization training has been reported to increase deeper understanding and compassion for individuals suffering from serious mental illnesses (CIT International, 2017; Watson et al., 2008; Usher et al., 2019; Young, 2015).

1.2 Police officer psychological impact

The psychological impact of stress, work-related deaths, and traumatizing encounters on police officers has been widely validated (Kyron et al., 2022; Lee & Wu, 2024; Nam et al., 2025), highlighting a need for targeted interventions and increased mental health support. Pedagogy predicated on practical training that strengthens compassion satisfaction, reduces compassion fatigue, and presents law enforcement as a positive social and community presence represents a first step toward actionable solutions. The next step could be educating law enforcement leadership on the advantages of organizational learning as a technique for developing new solutions (Senge, 1990) that include community stakeholders and experiential learning processes (Blumberg et al., 2019; Lu & Petersen, 2023; Wilson & Grammich, 2024).

Focusing on the present study's target population of police officers, Papazoglou et al. (2018) examined the personality traits, compassion satisfaction, and compassion fatigue of Finland's national police officers. Close to half of the participants observed low levels of compassion satisfaction. Only a small percentage of the participants reported high compassion fatigue and satisfaction levels. Results revealed that compassion fatigue was negatively correlated with compassion satisfaction. Moreover, negative personality traits (i.e., Machiavellianism, narcissism, burnout, and psychopathy) were found to affect the compassion satisfaction and fatigue of police officers (Anderson et al., 2019; Griffin & Bernard, 2003; Laguna et al., 2010; Papazoglou et al., 2018; Tuttle et al., 2019).

Negative personality traits were positively correlated with compassion fatigue, with a larger percentage of police officers showing moderate and high levels of Machiavellianism and narcissism, respectively. Meanwhile, the percentage of police officers who exhibited burnout and psychopathy was reported to be low. These results indicated that nearly half of the study participants reported having low compassion satisfaction. Further, close to half of the study participants reported having negative issues with work enjoyment and, of true importance, a lack of empathy for those who owed a genuinely honorable duty of care. Hence, focused individualized and organizational mental health awareness training and development aimed at decreasing negative personality traits, manifesting compassion satisfaction, and increasing compassion satisfaction are highly recommended for police officers. How police officers view their professional roles, and the importance of their work, can be negatively affected by compassion fatigue, moral injury, and any associated traumatic experiences, causing compassion satisfaction to become stunted or under-developed. This means police work, social cohesion (Pető, 2025), and community services can suffer or experience negative outcomes (Tuttle et al., 2019).

Andersen et al. (2019) examined the compassion fatigue, satisfaction, and authoritarian attitudes of North American police officers. They found compassion fatigue to correlate positively with authoritarian attitudes. Compassion fatigue was reported to be high, while compassion satisfaction was high and extreme. Compassion fatigue and compassion satisfaction were shown to be negatively correlated. Meanwhile, compassion fatigue and burnout were found to be positively correlated. According to them, compassion fatigue and authoritarian attitudes were not statistically significant, dispelling a theory long held by the general public that police officers inherently have authoritarian attitudes (Andersen et al., 2019; Griffin & Bernard, 2003; Laguna et al., 2010). Compassion fatigue and satisfaction were shown to co-occur and were reported at high and extreme levels as well as showing a positive correlation with authoritarian attitudes.

Individuals with authoritarianism can also be judgmental, and isolative, which can further exacerbate compassion fatigue to the point of severely diminished capacity to care, thereby putting the public at risk. Police officers with authoritarian attitudes require increased vigilance. Job rotation is recommended to provide a change or break in experiences and actively encourage new evidenced-based knowledge, skills, abilities, and work opportunities that increase compassion satisfaction. The actions of people in powerful positions during their interactions with vulnerable communities determine the ethical care provided by institutions (Andersen et al., 2019; Toombs et al., 2017; Tronto, 2010).

As noted above, education can be a key to positive change. Effective teaching has been described as a synthesis of academic (subject matter expertise), social (interpersonal skills), and pedagogic (methodology) competencies (Orgoványi-Gajdos & Kovács, 2020). Results of this study suggest the effectiveness of practical, experiential training to enhance engagement and content retention.

2 Theoretical framework

2.1 Theory of the Ethics of Care

Gilligan's (1982) theory of the ethics of care has foundations in moral psychology and provides the theoretical framework for this study. Meaningful interactions and encounters with those who are considered weak or vulnerable characterize the theory of the ethics of care (Toombs et al., 2017; Tronto, 2010). Social structures, both large and small, can utilize components of this theory to establish peaceful outcomes (Krek & Zabel, 2017; Mutlu, 2018; Noddings, 2012; Vázquez, 2019). Ethical care can also be a well-developed plan of action for the use of physical aggression. Ethical care ensures that all human rights are upheld (Held, 2006; Toombs et al., 2017; Tronto, 2010).

The concept of caring encompasses ethical relationships, determines habitual moral responses, judicial impartiality, and cultivates positive responsiveness (Mutlu, 2018, Nicholson & Kurucz, 2019; Noddings, 1984, 2012; Toombs et al., 2017; Tronto, 1993, 2010, 2013, 2012; Vazquez, 2019). Ethical care replaces one's natural proclivity when acting in service to a stranger (Krek & Zebel, 2017, Mutlu, 2018, Nicholson & Kurucz, 2019; Noddings, 1984, 2012; Vazquez, 2019).

2.2 Jean Watson's Transpersonal Theory of Nursing Care

According to Watson (2012), nursing science is the science of humans, and their health/illness experiences with interventions, by professionals, based on science, as well as moral, and ethical considerations. Caring, which is essential in nursing, begins with a nurse approaching others with compassion (McKenna et al., 2014; Pajnkihar et al., 2017a, 2017b; Watson, 2012). Pairing nursing methodologies and caring philosophies allows nursing to further develop by incorporating new research, education, and practices (Gunawan, 2022; Pajnkihar et al., 2017b; Watson, 2012).

2.3 Care behaviors

The key dimensions of care behaviors are respectful deference of others, assurance of human presence, positive connectedness, professional knowledge and skills, and attentiveness to others' experience (Wolf et al., 1998). Caring behaviors for this study are defined as characteristics and actions that display concern for the well-being of consumers of mental health services by Memphis Police Department Crisis Intervention Team officers (Gunawan et al., 2022; Ray, 1989; Rhodes et al., 2011). Moreover, police accountability remains a critical organizational and community service responsibility (Davis, 2012; Pasha, 2018; White, 2021). Hence, examining the impact of compassion fatigue and satisfaction on police officers' care behaviors, a group vulnerable to compassion fatigue, can enrich our knowledge concerning police officers' abilities to care. The Care Behavior Inventory, comprising 42 items, was divided into nine constructs that reflect the key dimensions of caring (Wolf et al., 1998).

3 Method

3.1 Hypothesis development

The study focused on the following research question: Is there a relationship between compassion fatigue, compassion satisfaction, and care behaviors among Memphis Police Department Crisis Intervention Team officers?

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H1: Compassion fatigue in Memphis Police Department Crisis Intervention Team officers, measured using ProQOL, is a predictor of care behavior measured by the Care Behavior Inventory.

H01: Compassion fatigue in the Memphis Police Department Crisis Intervention Team officers, measured using ProQOL, is not a predictor of care behaviors measured by the Care Behavior Inventory.

H2: Compassion satisfaction in Memphis Police Department Crisis Intervention Team officers, measured by ProQOL, is a predictor of care behaviors measured by the Care Behavior Inventory.

H02: Compassion satisfaction in Memphis Police Department Crisis Intervention Team officers, measured by ProQOL, is not a predictor of care behaviors measured by the Care Behavior Inventory.

3.2 Procedure

Memphis Police Department Crisis Intervention Team officers were asked to voluntarily participate in this study as key informants of the Crisis Intervention Team culture due to their international best practice status as the originator of the specialized crisis intervention police response. Two hundred surveys were distributed; 51 were completed and returned to the researcher.

3.3 Research tools

3.3.1 Professional quality of life scale (ProQOL)

The ProQOL Version 5 is a 30-item scale comprising three subscales (Potter et al., 2013; Ray et al., 2013; Stamm, 2009). ProQOL Version 5 measures compassion fatigue, compassion satisfaction, and burnout (Stamm, 2009). All three subscales were used in their entirety to reveal both the negative and positive experiences of Memphis Police Department Crisis Intervention Team officers, including burnout and secondary traumatic stress as elements of compassion fatigue. Compassion fatigue scores were identified when both burnout and secondary traumatic stress percentile scores were combined. The predictor variable compassion satisfaction was scored separately (Stamm, 2009).

3.3.2 Care behavior constructs for Memphis Police Department Crisis Intervention Team

To date, no prior research has investigated this phenomenon of police officer care behaviors. Hypothetical adaptations of the original care behaviors constructs to fit with core operational elements of the Memphis Model were created for this study utilizing the studies done by Gunawan et al. (2022), Usher et al. (2019), and White et al. (2021). The Care Behavior Inventory, in this study, was not changed from its original representation of various behaviors caregivers (nurses)

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might display to communicate caring. It is possible to adapt these same constructs to fit the context of Crisis Intervention Team officers, who are trained to manage mental health crises and provide compassionate care to individuals in distress. Only the directions were adapted to target police officers.

Hospitals have been described as having an organizational culture of bureaucratic caring which is to be embedded in politics, policies, training and development, social, legal, ethical, spirituality, and religion (Ray, 1989). For this study, an adaptation of the nine Care Behavior Inventory constructs for Crisis Intervention Team officers was created, showing caring actions already embedded in the core operational elements of the Memphis Model and helped eliminate bias (Wolf et al., 1998).

3.4 Data collection

The only inclusion criterion was that these officers were volunteer members of the Memphis Police Department Crisis Intervention Team. As a preeminent international best practice model program, the Memphis Model is an unparalleled resource to improve care delivery during encounters with those experiencing a mental health crisis in Memphis (Andersen & Papazoglou, 2015; CIT International, 2017).

3.5 Data analysis

Data from the paper surveys were entered into SPSS 23 for Windows and tested. The scores for the variables of interest were computed according to the scoring instructions. Descriptive statistics were computed for the variables of interest. A multiple linear regression model was employed to answer the research question and the associated hypotheses. Demographic data were neither collected nor requested during the survey.

3.5.1 Research question

The study focused on the following research question: “Is there a relationship between compassion fatigue, compassion satisfaction, and care behaviors among Memphis Police Department Crisis Intervention Team officers?” The research question was investigated using multiple linear regression. The predictor variables were compassion fatigue and compassion satisfaction. The dependent variable was caring behavior. Prior to the analyses, the six assumptions of multiple linear regression were tested, and all six multiple linear regression assumptions were met.

3.6 Ethical processes

After earning IRB approval, data collection began.

4 Results

The study confirmed that compassion fatigue results from prolonged exposure to devastating and traumatic events. This finding aligns with existing evidence-based research on compassion satisfaction and its associations with advanced intervention knowledge to combat compassion fatigue. Previous studies have provided empirical evidence on the relationships among compassion fatigue, compassion satisfaction, burnout, moral injury, authoritarianism, and negative personality traits of police officers and other care giving professionals (Andersen, 2015; Andersen et al., 2019; Grant et al., 2019; Loolo, 2016; Tuttle et al., 2019; Varker et al., 2023).

In each of these studies compassion fatigue and satisfaction were assessed using the Professional Quality of Life Scale (ProQOL). Caring behaviors were assessed using the Caring Behaviors Inventory, featuring five sub-scales: respectful deference to others, assurance of human presence, positive connectedness, professional knowledge and skills, and attentiveness to others' experiences.

4.1 Correlation results

Additional analyses were conducted, which involved computing the intercorrelations of all the variables ($n=10$) discussed in the results. This resulted in a correlation matrix comprising of 45 pairwise comparisons.

4.2 Hypothesis testing

Hypotheses were tested using multiple linear regression with compassion fatigue and satisfaction as the predictor variables and care behaviors as the criterion response variable. All assumptions of the multiple linear regression model were tested and satisfied.

The ANOVA results for the model were statistically significant, $F(2, 48)=7.18$, $p=0.002$, $R^2=.23$. This indicates a significant relationship between at least one predictor variable (compassion fatigue or compassion satisfaction) and the dependent variable (caring behaviors). The results revealed that compassion fatigue was not a predictor of officers' care behaviors, as no significant relationship was found ($\beta=-0.12$, $t=-0.75$, $p=.458$). Thus, the null hypothesis was not rejected. Additionally, compassion satisfaction was found to be a predictor of officers' care behaviors, with a significant positive relationship observed ($\beta=0.40$, $t=2.59$, $p=.013$). Hence, the null hypothesis was rejected, and the alternative hypothesis was accepted.

4.3 Compassion fatigue interpretation

The results for compassion fatigue varied. Specifically, 49.0% (n=25), 47.1% (n=24) and 3.9% of officers had low, average, and high compassion fatigue, respectively. Revealing that compassion fatigue was present in this population.

4.4 Compassion satisfaction interpretation

As compassion satisfaction increased by one standard deviation, caring behaviors increased by 0.40 standard deviations. Compassion satisfaction was a statistically significant predictor of care behaviors among officers, $F(2, 48) = 7.18, p = .002, R^2 = .23$. $F(2, 48) = 7.18, p = .002$. Each component of this interpretation is as follows: F-value: The F-statistic (7.18) is the ratio of the model variance to the error variance. A higher F-value indicates that the predictor variables explain more variance in the dependent variable than would be expected by chance. Degrees of Freedom (2, 48): The degrees of freedom (df) show that you have 2 numerator degrees of freedom (for the number of predictors) and 48 denominator degrees of freedom (for the error term). This suggests that the model uses two predictors. The p-value = .002: The p-value indicates the probability that the observed relationship between compassion satisfaction and care behaviors occurred by chance. Since the p-value is less than the commonly used threshold of 0.05, this indicates that compassion satisfaction is a statistically significant predictor of care behaviors among the officers. This means there is strong evidence to suggest that compassion satisfaction is associated with care behaviors, and the relationship is unlikely to be due to random chance. $R^2 = .23$: R^2 (R-squared) = 0.23: This represents the proportion of the variance in care behaviors that is explained by compassion satisfaction and the other predictors in the model. An R^2 of 0.23 means that 23% of the variance in care behaviors can be explained by the predictors in the model. While this isn't an extremely high proportion, it still indicates that compassion satisfaction (and possibly other factors in the model) plays a meaningful role in explaining care behaviors.

4.5 Effect size interpretation

Practical significance of measurement using Cohen d calculation resulted in a large effect size of 2.62 for this study; see Figure 1. (Carlin & Costello, 2021; Loolo, 2016; Serdar, 2021). This large effect size indicates that, as an intervention to combat compassion fatigue, care behaviors correlate with compassion satisfaction showing a large practical effect of deploying care behaviors to combat compassion fatigue among officers.

The study shows that the Memphis Police Department Crisis Intervention Team's ability to care aligns with advanced Memphis Model education and is seen to lessen the effects of compassion fatigue (Loolo, 2016). This validates the

importance of the pedagogy as an actionable strategy to enhance law enforcement effectiveness by strengthening ties with community stakeholders (Drew et al., 2025; Wilson & Grammich, 2024).

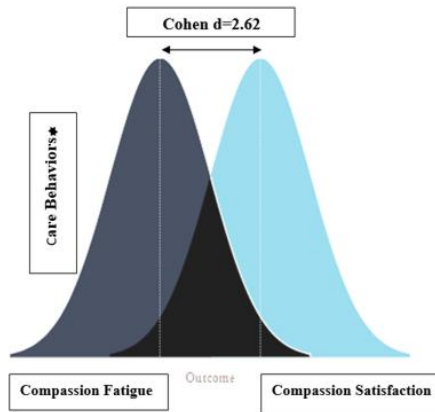


Figure 1. Effect size distribution.

Note: Practical significance of measurement is done by calculating effect size using Cohen's d interpretation (Serdar, 2021). Having a single sample size of 51 the standardized difference between the two means of compassion fatigue and compassion satisfaction is illustrated above. There is minimal overlapping and the distance between the two normal distributions is robust.

Omission/Iceberg Theory: The novelist Earnest Hemingway developed in his writings what he called the iceberg theory, or what came to be known as the theory of omission, indicating that only the tip of the iceberg is seen in fictional writing leaving much undiscovered about a character or their motives (McCarthy, 2018). The same is true for psychology and human behavior and the only way to discover what is being omitted is through targeted psychological testing and study (Guyon, 2018; Guyon, Falissard et al., 2017; Neal et al., 2022).

5 Discussion

5.1 Fostering legitimacy

Study results support enhanced engagement with community stakeholders. A strategic alliance should be established between law enforcement entities and nursing researchers to foster legitimacy and provide ongoing monitoring and measurement (Baum & Oliver, 1991; Buerger et al., 2012; Chopko, 2011; Chopko et al., 2016; Ellis, 2014; Hannan & Freeman, 1977; Neal et al., 2022; Schwalbe & Maschi, 2009; Rudes et al., 2011; Skirius, 2020; Shihua &

Xiaochen, 2021). Increasing compassion satisfaction has been shown to mitigate the negative effects of compassion fatigue and is the intervention identified in this study. Study results support enhanced pedagogy, such as integrating care behaviors awareness utilizing Watson's nursing theory of care.

5.2 Social implications: Principles of police accountability

Practice-based pedagogy, incorporating Care Behavior Inventory constructs and the Memphis Model core operational elements, aligns with the eight foundational principles of police reform and accountability developed by White et al. (2021). Integrating Care Behavior Inventory principles into law enforcement pedagogy promotes effectiveness and strengthens bonds with community stakeholders (Neal et al., 2022; Taylor et al., 2022; Usher et al., 2019; White et al., 2021; Wolf et al., 1998).

Gunawan et al. (2022) combined different caring measurement components to establish a foundational system of measurement of caring in nursing administration. Caring components from Watson's Transpersonal dimensions, the caritas processes, and care behavior constructs hold characteristics, knowledge, skills, beliefs of duty of nursing, nursing interventions, and nursing leadership characteristics. Gunawan et al. (2022) provides a model for linking the core operational elements of the Memphis Model, with the theory of the ethics of care, Watson's Transpersonal Nursing theory, and Wolf's CBI constructs for this study (Gilligan, 1982, 1987; Noddings, 1984, 2012; Usher et al., 2019; White et al., 2021; Wolf, 2002; Wolf et al., 1998).

6 Limitations

The study had certain limitations. First, utilizing the 42 item Care Behavior Inventory might have led to survey fatigue. Recommendation strategies for improvement include precise population targeting with collaborations to avoid survey duplication and educating participants on study significance and utilizing the 6-measure Care Behavior Inventory (de Koning et al., 2021; Watson et al., 2008; Watson, 2012).

Second, the Memphis Police Department Crisis Intervention TEam officers were purposively chosen making selection bias a threat to internal validity and inherent to this study creating issues with sample characteristics and stimulus characteristics due to no randomization (Bloomfield & Fisher, 2019; Loolo, 2016; Lorey and Fegert, 2021; Marczyk et al., 2005; Olsen et al., 2013; Tongco, 2007). However, when purposively choosing key informants from a unique culture, minimal response rate could still yield useful outcomes (Lorey & Fegert, 2021; Tongco, 2007)

Conclusions

The Memphis model represents a pedagogical roadmap (Schonthal & Nordgren, 2021) for law enforcement and community leaders to transform confrontation to collaboration. Social change affecting police organizations has demonstrated the importance of partnering with community stakeholders and launching collaborative initiatives. Pedagogy based on practical training strategies can expedite adaptation processes for both law enforcement agencies and their surrounding communities.

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