

Ventura County Sheriff's Office

Geoff Dean, Sheriff

Law Enforcement Response to Suicide By Cop Incidents

Presented by:

Sgt. Mario Aguilar

Todd Road Jail (805)933-8502

mario.aguilar@ventura.org



Course Goals

- Define & Understand what is “Suicide By Cop”
- Recognize potential SBC behavior
- Tactics / The Five C’s
- Post Critical Incident Stress Management





World Health Organization (WHO)

- 1 in every 4 people have a mental disorder
 - 25% of individuals develop one or more mental disorders in their lifetime
- Mental illness has become more common than cancer, diabetes, and heart disease
- On any given day, 3000 people commit suicide in the world
 - 90% of which mental illness is the attributing factor



What is Suicide by Cop?

- An incident in which an individual engages in life threatening and criminal behavior with the intent to force law enforcement to respond with deadly force.
- In these incidents, the *safety* of the *officer* and the *public* are paramount.
- The very intent of the individual places the officers at a tactical disadvantage.



Why Suicide by Cop?

- Attempting to avoid the consequences of criminal actions
- Using a forced confrontation with police to reconcile a failed relationship
- Hoping to avoid the suicide exclusion clause of a life insurance policy
- Rationalizing that it is morally wrong to commit suicide and being killed by the police resolves the religious issues



Suicide by Cop Studies

- Several studies support the conclusion that at least 10% of police deadly force incidents involve *suicide by cop* situations
- A recent Los Angeles County Sheriff's Dept. study showed that 28% of all their OIS in 1997 were *suicide by cop* scenarios
 - *Source: USC in cooperation with the LASO; published in Journal of American College of Emergency Physicians (2005)*



VENTURA COUNTY SHERIFF'S DEPARTMENT

Situational Factors of SBC

- Possesses a Gun/Knife 95%
 - 50% Gun was used
 - 83% Weapon was loaded
- Male 94%
- UI During Incident 74%
- Unemployed 62%
- Suicidal Statements 59%
- Drug Abuse History 56%
- Between 25-39 yrs old 56%
- Mental Disorder 54%
- Signs of Planning 50%
- Criminal History 49%
- Family Problems 49%
- Prior Suicide Attempts 24%
- Social Isolation 8%



Situational Factors of SBC

- Duration of Incident
 - Less than 1 hour 30%
 - Less than 3 hours 32%
 - Less than 5 hours 30%
 - Between 5-24 hrs 8%
- Successful SBC
 - Less than 1 hour 61%
 - Less than 3 hours 37%
 - Less than 5 hours 28%
 - Between 5-24 hrs 20%

Most Suicides by Cop occur within 30 minutes of the officers' arrival and therefore everything is over before he negotiators can respond.



Three Major Categories of SBC

- Direct Confrontation- 31%
- Crisis Intervention- 57%
- Criminal Intervention- 12%





Direct Confrontation SBC

- The subject plans ahead of time to confront the police.
- The subject is in possession of a weapon, or bluffs having a weapon.
- The subject attacks the police causing a response, or makes a demand that officers kill him.



Crisis Intervention SBC

- The subject may be acting irrational, but does not deliberately seek a police response.
 - *Calls of attempt suicide in progress*
 - *Domestic disturbances*
 - *Subject disturbing calls.*
- There is no initial indication that the subject is suicidal.
- Less lethal force options had the most success with this category.



Criminal Intervention SBC

- These begin after the police attempt to contact someone after they've committed a crime; both major and minor crimes.
- The major crime violators' motive appeared to be an unwillingness to go back to prison.
- The minor crime violators seem to resist as a matter of principle. They have underlying suicidal tendencies and the police intervention causes them to escalate the minor incident into a major incident.



Recognizing Potential SBC Incident

- Observable Behaviors
 - Noncompliant / Barricaded & refuses to negotiate
 - Forces confrontation or escalates situation
 - Makes no attempt to surrender, escape, retreat.
 - UI drugs/alcohol.



Recognizing Potential SBC Incident

- Verbal Behaviors
 - Makes verbal threats to kill or be killed.
 - Statements reflecting the desire to die.
 - Articulates feelings of hopelessness/ helplessness.
 - Refuses to negotiate



Recognizing Potential SBC Incident

- Other factors to consider
 - Subject has just killed someone, particularly a close relative, spouse or child
 - Subject has undergone 1 or more traumatic life changes (death of a loved one, divorce, financial devastation, etc.)
 - Subject has a life-threatening illness

» [Show Airport Video](#)



Response to Suicide by Cop

The “Five C’s”

- Command
- Coordination
- Containment
- Communication
- Control



Command

- Someone has to be in control of incident
- Someone with a plan needs to set up resources (secondary unit)
- A lack of command will lead to counter-productive action.
 - Individual acts of rescue or arrest attempts



Coordination

- Someone needs to take responsibility if coordinating response efforts (Inner / outer perimeters)
- Determine what tools are available to you and how they will be deployed
- Everyone involved needs to know their roles and the PLAN
 - *Designated lethal and non-lethal shooters*
- There should be no surprises!!



Coordination

- Plan ahead for contingencies
 - *“He’s coming out!” “He’s giving up!”*
- When deciding a course of action, ask yourself, “Do I need to act? And, “Do I need to act NOW?”
 - *Are we creating exigency by our actions?*
- What are the risks? (Officer Safety)
- Is the plan appropriate? (Officer Safety)
- Is it legal and within policy? (Liability – Civil / Criminal)



Containment

- Think *TIME* and *SPACE*, containment slows things down.
- The individual needs to be isolated, yet with enough space to feel comfortable
- Give the officers a chance to see the big picture
- Lack of containment causes a decrease in confidence and compromises safety
- *Over containment could fore a confrontation and act as a as a “Trigger”*



Communication

- Key information needs to be relayed from RP through dispatch and to the responding officers quickly & accurately
- Information (plan) needs to be received by all officers on scene
- If you are in command at the scene, you need to give the orders
- Listen to what is being said by others



Communication

- When intervention begins, your introduction is **extremely** important
- Ask yourself, “If I only have a few minutes to talk to this person, what would I say” – Build a Rapport
- Communicate that you are a person, and you are there to help and not harm them.
- Ask open-ended questions only- get them to talk
- Discuss options they have in order to resolve their problem – give them HOPE – we can help



Control

- We can not control the person in crisis or their intended actions, but we can control the environment that surrounds them
- Be careful!!! Do not let the person take control of the environment
- We control what enters and exits the environment
- We can control our actions and resources deployed
 - » [Show Compton Video](#)



Less-Lethal Weapons

- Whenever “available” it should be part of your plan for intervention, “Immediately” available
- Officers need to understand there must always be a tactical plan where the Less-Lethal option is deployed (Lethal / Less-Lethal)
- Have a plan in the event the Less-Lethal weapon is effective or ineffective
- Once deployed against the subject, it may be impossible to de-escalate (Action causes reaction)
 - » [Monterey Park Shooting](#)



Predeath Behaviors

Hypervigilance

- Visually scanning of surroundings
- Hopeless demeanor, ignoring all activities going on around them
- Dazed look, “The thousand yard stare”



Predeath Behaviors

Change in Respiratory Rate

- Detectable both visually and audibly
- Easily overlooked by the untrained eye
- This behavior needs to be interrupted immediately



Predeath Behaviors

Counting Down / Up

- Typical behavior observed in jumpers
- The countdown leads to the point of release
- These patterns are learned in early childhood.
“Ready, Set, Go!” or “5-4-3-2-1”



Peaceful Resolution Behavior

- Less interactive tension
- Lowered voice
- Less anger
- Less Profanity
- Diminished aggressive body language
- Increased non-aggressive body language
- Diminished threats of violence
- Less hopelessness and helplessness
- Greater willingness to listen to the officer's suggestions
- Solicitation of a situation outcome promises and safeguards, "No handcuffs" or "Only you take me into custody, I don't want to get beaten."



CIT – Basic Intervention Rules

- Slow things down
- Be aware of your setting, environment (Personal Safety FIRST)
- Use proper positioning
- Check for weapons
- ***TIME & SPACE***



CIT – Basic Intervention Rules

Have a STRATEGY

- Reach for small concrete goals
- Meet reasonable demands when possible
- Reassure their safety continuously
- Refocus their attention, visual and audible (Focus on you, not others.)
- Reduce anxiety (Control physical symptoms and movements.)



CIT – Basic Intervention Rules

Rely on Verbal Intervention Initially

- Tell them what you are going to do
- Clarify the problem (reframe, reduce to basics)
- Restore problem-solving capacity (provide information, support)



CIT – Basic Intervention Rules

- Try **Not** To:
- Make promises you cannot keep
- Demand obedience, call their “bluff”, or get into a power struggle
- Act afraid, angry, or laugh inappropriately

» [CIT Works Video](#)



Post-Critical Incident Stress

Traumatic incidents:

- Are often sudden and unexpected
- Disrupt ideas of control and how the world works (core beliefs)
- Feel emotionally and psychologically overwhelming
- Can strip psychological defense mechanisms
- Frequently involve perceptions of death, threat to life, or involve bodily injury



Possible Perceptual distortions during incident:

- slow motion visual illusion
- fast motion heightened visual clarity
- muted/diminished sound
- automatic pilot
- amplified sound
- memory loss for part of the event
- slowing of time
- memory loss for part of your actions
- accelerated time false memory
- dissociation temporary paralysis
- tunnel vision vivid images



Post-Critical Incident Stress Responses following Incidents

- heightened sense of danger
- anger, frustration, and blaming
- isolation and withdrawal
- sleep difficulties
- intrusive thoughts
- emotional numbing
- depression and feelings of guilt



Post-Critical Incident Stress Responses following Incidents

- depression and feelings of not having done well
- sexual or appetite changes
- second guessing and endless rethinking of the incident
- interpersonal difficulties
- increased alcohol or drug use
- grief and mourning



Factors affecting the magnitude of traumatic response:

- ***Person variables*** – personality, view of reality, personal history, beliefs and aforethought, assessment of self performance, perception of alternative options, coping abilities, degree of stress management training and stress inoculation.
- ***Incident variables*** – proximity, sudden or planned, blood and gore, age of others, personal history of suspects involved, suspect or others behavior, accompanied by other officers at time of incident, other officers involved, actual circumstances of the event.



Post-Critical Incident Stress

Traumatic Stress: Shock, Impact, and Recovery

- Various researchers have identified several predictable responses to traumatic events. These can be reduced to three principle phases. This general response pattern is frequently observed in persons exposed to a traumatic event. They are common within the experience of posttraumatic stress and posttraumatic stress disorder.
 - Shock
 - Impact
 - Recovery



Post-Critical Incident Stress

- **Shock**—psychological shock (P-shock) is often the initial response to a traumatic incident.
- P-shock is comprised of a host of discernable reactions including denial, disbelief, numbness, giddiness, bravado, anger, depression, and isolation.
- P-shock reactions, although common following trauma, are not limited to trauma.
- P-shock can occur in response to any significant event. Football players who have just won the Super Bowl frequently respond to questions from sports interviewers by saying, “I can’t believe it” (disbelief) or “It hasn’t sunk in yet” (no impact).



Post-Critical Incident Stress

- **Impact**—after the passage of some time, the amount of time differs for different people, there is impact.
- Impact normally involves the realization that “I could have been killed” or “This was a grave tragedy.” These thoughts and the feelings that accompany them can be overwhelming.
- Officers should never be returned to full duty while they are working through the impact of a traumatic incident.
 - Police agencies should have policy directives which provide for administrative or other appropriate leave until an experienced police psychologist evaluates and clears the officer for return to duty.



Post-Critical Incident Stress

- **Recovery**—recovery does not follow impact as a discreet event. Instead, with proper support and individual processing, impact slowly diminishes.
- As impact diminishes, recovery begins. A person can experience any degree of recovery.
- *No or little recovery can result in lifetime disability. (PTSD)*
- Full recovery involves becoming stronger and smarter, disconnecting the memory of the incident from any disabling emotional responses, and placing the incident into psychological history.
- Without recovery, persons remain **victims of trauma**. With recovery, they become **survivors**.



Post-Critical Incident Stress

How to Recover from Traumatic Stress

- Accept your emotions as normal and part of the recovery/survival process.
- Talk about the event and your feelings.
- Accept that you may have experienced fear and confronted your vulnerability.
- Use your fear or anxiousness as a cue to utilize your officer safety skills.
- Realize that your survival instinct was an asset at the time of the incident and that it remains intact to assist you again if needed.



Post-Critical Incident Stress

- Accept that you cannot always control events, but you can control your response.
- If you are troubled by a perceived lack of control, focus on the fact that you had *some* control during the event. You used your strength to respond in a certain way.
- Do not second-guess your actions. Evaluate your actions based on your perceptions at the time of the event, not afterwards.
- Understand that your actions were based on the need to make a critical decision for action. The decision likely had to be made within seconds.



Post-Critical Incident Stress

- Accept that your behavior was appropriate to your perceptions and feelings at the time of the incident.
- Focus on the things you did that you feel good about. Positive outcomes are often produced by less than perfect actions.
- Do not take personally the response of the system. Keep the needs of the various systems (DA's office, administrative investigation, the press, etc) in perspective.

Remember, the event most likely happened because you are a police officer and not because of who you are as a person.



Positive Recovery

Getting Help

- No one can work through the aftermath of a traumatic incident for you, but you do not have to go at it alone.
- Keep an open mind. Allow your family, friends, and peers to help.
- Seek professional assistance if you get stuck, if you do not “feel like yourself” or if your friends or family notice dysfunctional emotional responses or behavior.
- **Do not ignore those who care about you.** Stay connected to your loved ones.



Remember this...

***You can not control the direction
of the wind...***

But, YOU can adjust your Sail !!!