

Tips for Law Enforcement When Interacting With Persons With Behavioral Health Issues



- **Identify yourself** as law enforcement & explain why you're there.
- If at all possible, **only one officer should speak to the person** so they are not intimidated or confused by multiple questions being asked by multiple officers.
- Maintain good **eye contact**.
- **Speak slowly**, and in a low-pitched, non-threatening voice.
- Take your time and **eliminate noise** and distractions.
- **Gather information** from all possible sources before intervening.
- Treat them with the **respect** you would show a family member.
- Keep your distance and respect **personal space**.
- Give a **warning before moving** about.
- Use the phrase **"Help me to understand what is happening to you."**
- **Give choices** when possible to allow some control.
- Use **short, simple words**.
- Ask **open ended questions** first. If unsuccessful, ask **"yes" and "no" questions**, allowing plenty of time for response. If necessary, repeat your question using exact wording.
- Try **non-verbal communication**, prompting with action words.
- **Respond to delusions** by talking about the person's feelings rather than what he/she is saying.
- Ask about **medications**.



- Be **misleading** or **deceive** the person about any aspect of your interaction.
- **Stare** at the person.
- Challenge or **confront** them.
- **Tease** or **belittle** them or engage in **sarcasm**.
- **Whisper, joke** or **laugh**
- **Threaten** them, especially with hospitalization or being "locked up."
- Forget the pain and **fear** they are experiencing.
- Forget that emotions can be **painful**.
- Violate **personal space** (when possible).
- Use **restraints**, if at all possible. This could trigger agitation, confusion, & disorientation.
- **Argue** with a person experiencing delusions or hallucinations-"reality checks" do no good.