

HOW TO WORK  
EFFECTIVELY WITH POLICE  
WHEN YOUTH ARE IN  
MENTAL HEALTH CRISIS  
A Guide for Families of  
Children and Youth with  
Mental, Emotional, or  
Behavioral Health Problems



NATIONAL FEDERATION OF FAMILIES

*For Children's Mental Health*



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# HOW TO WORK EFFECTIVELY WITH POLICE WHEN YOUTH ARE IN MENTAL HEALTH CRISIS

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A GUIDE FOR FAMILIES OF CHILDREN & YOUTH WITH MENTAL,  
EMOTIONAL OR BEHAVIORAL HEALTH PROBLEMS

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## ACKNOWLEDGEMENTS

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The thousands of first responders who care about children and youth and want to help find better ways to handle crisis situations, prevent trauma during those situations, and avoid unnecessary and overly punitive incarcerations are appreciated and acknowledged. Members of the National Federation of Families for Children’s Mental Health, including families, youth, policy makers, researchers, and service providers, along with first responders, too numerous to name have helped to inspire and inform this guide.

In September 2007, the International Association of Chiefs of Police and the National Federation co-hosted a roundtable in which family members, youth and law enforcement officers held a frank discussion about this topic. One of the recommendations from that meeting was a guide to help family members know what to expect and how to help when law enforcement officers respond to their child or youth in mental health crisis. Members of that Roundtable greatly influenced the

contents of this guide. Their names are listed in the Executive Summary of that meeting, which can be downloaded at [www.ffcmh.org](http://www.ffcmh.org).

## BACKGROUND & PURPOSE OF THIS GUIDE

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This Guide is about how interventions can best occur when law enforcement officers (e.g. police, truancy officers, sheriffs, school resource officers) respond to children or youth experiencing a mental health crisis.

Lacking adequate crisis planning or access to emergency services, families frequently must resort to calling for police assistance when their child's behavior is out of control, threatening and potentially dangerous. Too frequently, these calls for help result in additional trauma from police officers untrained, inexperienced or ill prepared to respond to their calls for assistance.

*"Too often, members have reported to the National Federation incidents of children and youth traumatized and otherwise injured by being restrained, yelled at, "roughed up", or detained and incarcerated. While there have also been reports of police preventing a child or youth from doing harm to him- or herself or others, providing parents with information, or helping to diffuse potentially volatile situations, the impetus to prevent trauma is paramount."*

While most threats made by children and youth are not carried out, according to the American Academy of Child and Adolescent Psychiatry<sup>ii</sup>, families know when a situation is out of control and they need outside assistance to help calm their child, prevent violence against themselves or others, prevent destruction of property, prevent a run away, or prevent other potentially criminal or dangerous behavior. In many communities, where mental health services are severely lacking, families are told to call 911 for any emergency situations after hours. While mental health services may be available for limited days and times, law enforcement is mandated to respond to calls every day, 24 hours a day, 7 days a week. As a result, too many families are forced to call for law enforcement response when their child suffers a mental health crisis that results in potentially dangerous or unlawful behaviors. This is a nationwide crisis and there are numerous efforts underway at local and federal levels to resolve it.

The National Center for Mental Health and Juvenile Justice (NCMHJJ) has identified the point in time when a police officer comes into contact with a child or youth as a "critical intervention point." They say *"Police response at this initial contact has significant implications in determining what happens next to the youth."*<sup>iii</sup>

This guide is aimed at helping you, the parent or caretaker, prepare for your role in any such encounter so that you may assist in achieving the best possible outcome for your child or youth. Understanding how law enforcement officers work will help you know what to expect. Your ability to effectively inform the responding officer will greatly enhance his or her ability to de-escalate and resolve the crisis.

## BEFORE A CRISIS OCCURS

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It is important that every child and youth have a crisis plan from the onset of their mental, emotional or behavioral disorder. Youth should be involved in creating their own crisis plans. The plan should include at the very least the following components.

- Child or youth's name and age
- Name and contact information for parent or guardian
- Name(s) and contact information for health care providers
- Diagnoses, current medications and doses, and any known allergies
- Strategies that will help calm the child or youth (See Appendix A)
- Specific ways to support the child or youth in regaining control of him or herself
- Next steps to suggest to the child or youth to help him or her move beyond the crisis situation and into safer, healthier, or more productive activities.

If there is any possibility you will have to call 911 for assistance (e.g.: your child has a history of violent outbursts and is growing too big for you to control; your service provider has suggested that you develop a crisis plan; or you have a crisis plan and it includes calling 911), the following preparations may help that call go smoother and get the best possible outcomes for your child, your family and your community.

1. Develop or amend a crisis plan with your child or youth when he or she is not in crisis. Youth involvement in developing their own crisis plans is critical to their ability to learn consequences, develop internal controls, and inform others about how to help them.
2. Know what to expect if you call 911 for assistance.
3. Make sure your child or youth knows what to expect from the police and what the police will expect from him or her. They need to know and expect that the responding officer will:
  - a. Ask questions and expect clear answers.
  - b. Take charge of the situation. *(This means that you, the parent or guardian, will no longer be in charge!)*
  - c. Expect that each person present will do what he or she says. *(You and everyone else present must follow any directions given by the police officer!)*
  - d. Make decisions about your child or youth staying home, going to detention, going to the police station, or being transported to a health care facility.
4. Prepare written index card(s) in clear print with vital information. These cards can easily be handed to officers responding to your call and should include information such as diagnoses, medications, and providers' contact information. (See Appendix B)

The more you know about policing in your community, the better prepared you and your child will be should you ever require their assistance. Call your local police department, sheriff's department, or check their websites. Find out specifically if they have a specially trained team of officers to respond to people in mental health crisis. This is usually known as a "C.I.T. Team" or Crisis Intervention Team. Below we will outline actions you can take to help improve the outcomes of a police intervention, but there are some things you will not be able to influence. For example, in

some communities, police officers are mandated to handcuff anyone they transport for any reason. If a crime has been committed, police may not have a choice about making an arrest. Above all, understand that the police officer arriving at the scene must quickly assess and control the situation. They call this “securing the scene” which means that everyone is safe and the officer knows what is going on. ONCE THE OFFICER ARRIVES, YOUR PRIMARY ROLE AS A FAMILY MEMBER OR CARETAKER IS TO PROVIDE QUICK, CLEAR, CONCISE INFORMATION IN AS CALM A MANNER AS POSSIBLE.

## WHEN YOU CALL FOR POLICE ASSISTANCE

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The best case scenario is that before police assistance is ever requested, you and your child or youth are prepared for the response of law enforcement and your roles in it. The following guidelines will assist you in helping to ensure the best possible outcomes for your child when police respond to the crisis call.

## WHAT TO TELL; WHAT TO ASK FOR; AND HOW TO DO IT

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Your first point of contact, if you have made the call for help, will likely be the dispatcher answering the 911 telephone line. Most dispatchers work in high stress climates and are required to make quick decisions in many life threatening situations. They are concerned with the safety of everyone involved and are charged with gathering and relaying details as accurately and quickly as possible. YOUR ABILITY TO COMMUNICATE EFFECTIVELY IN THIS SITUATION WILL HELP EVERYONE INVOLVED.

1. Remain as calm as you possibly can.
2. Provide facts as quickly and clearly as possible.

*Example: I am calling from [address]. My 13 year old son is threatening to cut himself and others. He has [diagnosis] and may be off of his medication and under the influence of alcohol. There are 4 of us in the house: my mother, my son and daughter and myself. None of us are able to calm him down. We need assistance.*

3. Provide facts about any known weapons that are in the vicinity or in your child’s possession
4. Be specific about what you are asking for.

*Example: We want to protect ourselves and get my son to the emergency room for a psychiatric evaluation, but cannot do that by ourselves. Please send help.*

5. If you already know your community has a Crisis Intervention Team (CIT), immediately state that you are requesting assistance from a CIT officer.
6. Answer any questions the dispatcher asks. Do not take offense when you are asked to repeat information. This is done to double check details or to help you, as the caller in distress, be as focused as possible.
7. Tell the dispatcher any additional information you can about how the officer can help your child calm down.

8. Tell the dispatcher any additional information you can about what might cause your child's behavior to become more dangerous – actions the officer should avoid.

*Example: Please don't tell him to stand still. He cannot hold his body still until he calms. If you can get him to walk with you, he can listen and respond better. Then you can explain what you need him to do. He is terrified of being handcuffed. Please tell him what he needs to do to avoid being handcuffed.*

Your primary role in this situation is to be a good communicator. Your ability to remain calm and provide factual details is critical to the outcome of this situation.

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## WHEN THE POLICE ARRIVE

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It is important to understand the mandates under which law enforcement officers' work. Their charge, regardless of their jurisdiction, is to quickly assess the situation, gain control, and take whatever actions may be required by law. Responding to your situation is one of many responses they make in any given work day. For example, the officer responding to your child's crisis may be coming directly from a meeting, a fatal car accident, or the scene of an armed robbery. Many officers will say their primary goal is to just go home at the end of their shift alive and uninjured to their spouse and children. Laws influencing the actions they are required to take are may vary depending on the age of the youth. Unlike adults, youth can be arrested for *status offenses* or behaviors such as running away, skipping school or breaking curfew.<sup>iv</sup>

Police arrive at the scene with their knowledge, skills, and abilities. Very few have received any training in mental health or in child development and yet, studies show, most of them are frequently called to respond to someone in mental health crises. One officer explained his tool set as his (1) gun (2) cuffs and (3) brain. We want a responding officer to be using his brain – his knowledge and behavioral skills – to help de-escalate any situation with a child or youth in mental health crisis. Your ability to provide clear, concise and detailed information in a calm manner can only help in arming the officer with what he or she needs to do the best job they can.

1. Be in a neutral position, if at all possible, when the officer arrives where you can identify yourself and provide any additional information before he encounters the youth who is out of control. For example, wait for the officer by the curb or in the front yard and state that you are the mother who placed the 911 call.
2. Never rush toward the officer. Remember the responding officer will still be trying to assess who is in danger, who has information, and who is the person making threats.
3. Have information available. Some family members have prepared index cards with diagnosis, medications, and provider contacts to give officers. Tell the officer if you have such written information and but don't try to hand it to him until he tells you to do so.
4. Let the officer take charge and provide answers to his or her questions. Their mandate is to take charge. That is something you cannot change once police have been summoned.
5. Continue to provide information about what you know will help your child to de-escalate; what may cause him or her to become more agitated or threatening; and what resources may be immediately available (providers or emergency care facilities) as appropriate.

6. In some cases, family members have arranged for an off-site person with intimate knowledge of their child's situation to stay on the line with the dispatcher in order to continue to provide the responding officers with guidance.

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## AFTER THE POLICE LEAVE

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If the situation has been **effectively resolved** and everyone is safe, take some time to recover and then move to the recommendations under the section "When the Crisis is Over."

If your child or youth has been transported to a **crisis facility**, your continued involvement will be very helpful to ensuring he or she gets the help they need. For example, your role will include providing accurate information, insisting on appropriate assessments and ensuring culturally appropriate responses from the facility.

If your child or youth has been taken to the **police station**, you should go to the police station and insist that you or another adult family member be present while he or she is questioned. Not all jurisdictions will be able to honor this request. <sup>v</sup>

If your child or youth is **arrested**, request an attorney to represent him or her. Cooperate with the lawyer and ask that appropriate alternative plans be developed for when he or she is released. Insist on being part of any planning. Attend all hearings. And, if an Individualized Education Plan (IEP) is in place, insist that it be continued and that it be updated to include necessary assessments and reentry. <sup>vi</sup>

If someone has been **injured**, of course, get appropriate medical attention immediately. Everyone is likely to feel vulnerable if a serious injury has resulted from the crisis event. It is important to avoid making accusations or confessions until everything has calmed down and the facts have been sorted out. First, get the medical attention and later sort the facts. If this has drawn the attention of the media, you should refrain from speaking with them. Do what you can to protect your child's privacy.

Regardless of the situation when the police leave, remember that you may need their assistance again in the future. Relationships with local law enforcement are important to you, your child and your community.

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## WHEN THE CRISIS IS OVER

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When you feel you can calmly revisit the events of the crisis, go through them with your child. Were there things you learned about your own response, your child's ability or inability to deescalate, or about law enforcement's response? Did you learn anything new about the availability of mental health resources? Perhaps you were given information about new resources that you need to investigate.

What were your lessons learned and how can they impact your ability to prevent future crises or help in the event of future crises more effectively? If there is already a crisis plan, does it need to be adapted? If there is not a crisis plan, develop one.

Crisis plans should be developed and adapted with your youth's involvement if he or she is able. Certainly other persons involved in his or her care should be involved in developing the plan so that all potential resources and perspectives are considered.

Specifically help your child understand potential consequences of escalating to the point that law enforcement intervention is necessary. Tell him or her that, to the very best of their ability to always:

- Be polite and do not argue with the police officer.
- Keep both hands in plain sight and make no sudden moves.
- Follow the officer's directions.
- If a parent or guardian is not present, ask the officer to contact them.

In addition, it might be helpful for your child to tell the officer his or her diagnosis, explain why he or she is having trouble getting behavior under control and specifically what he or she needs. It is also helpful to let your child know that what he or she says in the presence of a police officer can be used against him or her in court. Anyone who is extremely upset or anxious may say things they later regret. To help prevent this kind of situation some parents tell their children that if he or she is having trouble calming and controlling their behavior when stopped or approached by law enforcement to say something like:

*"My name is Sara Smith and I have bi-polar disorder. My mother's phone number is XXX. Please call her. I am feeling very anxious and my mother has told me to be silent until she is here." Or "My name is Sara Smith and I have bi-polar disorder. I have my mother's contact information (on a card). May I give that to you? Please call her. I am feeling very anxious and my mother has told me to be silent until she is here."*

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## WORKING WITH LOCAL LAW ENFORCEMENT

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Collaboration is key to improving the capacity of police to assist with children and youth in mental health crisis. As stated earlier there are numerous efforts underway to improve access to mental health services; to improve training and supports available to officers called to respond to our children and youth in crisis; and to develop special response teams, some of which are inclusive of police, health care providers, and experienced family members.

In response to a Call to Action by the Executive Director of the National Federation of Families for Children's Mental Health, supported by the President of the International Association of Chiefs of Police, the 120+ chapters of the National Federation are stepping up their efforts to develop relationships with local law enforcement agencies. Some are holding public listening sessions. Some are holding picnics for officers to get to know families while sharing a free meal. And, others are working together with law enforcement agencies to co-develop training for first responders, advocate for more accessible emergency services and supports, and change policies and budgets to better support prevention.

You can learn more at [www.ffcmh.org](http://www.ffcmh.org) and find your local Federation chapter there.



## RESOURCES

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For more information:

National Federation of Families for Children's Mental Health  
[www.ffcmh.org](http://www.ffcmh.org) or call 240-403-1901

National Conference of State Legislatures  
[www.ncsl.org](http://www.ncsl.org) or call 202-624-5400 (Washington, D.C.) or 303-364-7700 (Denver, CO)

The National Center on Mental Health and Juvenile Justice  
[www.ncmhjj.com](http://www.ncmhjj.com) or call 1-866-9NCMHJJ (toll free)

## APPENDIX A

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### Strategies to help calm a child or youth

- Listen to and acknowledge his/her perceptions of the situation
- Avoid arguing or challenging while he/she is agitated
- Clearly and calmly state what is expected of him/her at this point (I.e.: *I need you to stop threatening your sister. I need you to come with me outside so we can get this straightened out.*)
- Invite him/her to walk with you
- Encourage him/her to practice anything he/she has used in the past to calm (I.e.: music, writing, reading, bouncing a basketball)
- Help shift the focus and engage discussion about his/her special skills or interests
- Once calmed, follow-up is important. Engage in a calm discussion about behaviors, consequences and strategies to use in the future

**NOTE: Some medications can cause agitation. Any new or unusual incident should be reviewed with the health care provider prescribing medication.**

## APPENDIX B

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Sample card to prepare for police or other emergencies

<b>Name (nick name or name to which child/youth will answer)</b>
<b>Current Diagnosis</b>
<b>Behaviors that may result from mental health need</b>
<b>Strategies that help him or her calm</b>
<b>Special skills, hobbies or interests</b>
<b>Current Medications and Dosages</b>
<b>Health Care Providers' Names and Phones</b>
<b>Legal Guardian's Name</b>  <b>Address</b>  <b>Phone</b>  <b>Legal Name of Child/Youth</b>

## REFERENCES

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- i National Federation of Families for Children's Mental Health and The International Association of Chiefs of Police. *Law Enforcement and Children's Mental Health Roundtable Discussion: Executive Summary*. 2007, p. 3
- ii American Academy of Child and Adolescent Psychiatry. *Facts for Families. Children's Threats: When are they serious?*. No. 65; Updated May 2005.
- iii The National Center for Mental Health and Juvenile Justice. *Blueprint for Change: A Comprehensive Model for the Identification and Treatment of Youth with Mental Health Needs in Contact with the Juvenile Justice System*. Policy Research Associates, Inc.: Delmar, NY. 2007, p. 46
- iv Ibid.
- v Dodge, Douglas. *Understanding the Juvenile Justice System*. National Federation of Families for Children's Mental Health. Claiming Children Newsletter. Fall 2000
- vi Ibid.