

Information for POLICE (further information about AUTISM)

The following was derived from information published by Autism Safety & Risk in 2007 at www.autismriskmanagement.com. The author, Dennis Debbaudt, is a member of the International Law Enforcement Educators and Trainers Association. Similar information is provided in a 9 minute video from Chicago Police Department at www.autismspeaks.org/press/chicago_pd.php

Autism is a developmental disability that becomes apparent within the first 3 years of life. While some individuals with autism have an intellectual disability, **autism itself is not an intellectual disability**. It is a broad spectrum neurological disorder, which manifests itself in a variety of symptoms that affect individuals differently. Three symptoms are commonly used for diagnosis – a lack in three areas of - **communication** skills (echolalic speech or no speech), **social skills** (lack of inhibition, lack of eye contact), and **imaginative play** (typically replaced by repetitive actions). Many people with autism function well in society and may have no contact with, or need to call on assistance from, Police. The initial call for assistance is most likely to be when the person has gone missing, later in life Police may be called out for reports of a domestic disturbance, requests for medical assistance (25% of people with autism will also have epileptic seizures by the age of 21), or complaints of strange behaviour in public places.

Recognizing the behavior symptoms and knowing contact approaches can minimize situations of risk- risk or victimization of a person with autism, and risk to the first responder. Unfortunately in many cases, there may be no external indicators to suggest that a person is autistic, and so you are most likely to learn that the person has autism from your dispatcher, someone at the scene, or the person themselves. Here are some tips for first responders:

- **Make sure the person is unarmed and maintain a safe distance** because they may suddenly invade your personal space
- **Talk calmly and softly**
- **Speak in direct, short phrases** such as: “Stand up now.” or “Get in the car.”
- **Avoid slang expressions**, such as: “What’s up your sleeve?” or “Are you pulling my leg?”
- **Allow for delayed responses** to your questions or commands
- **Repeat or rephrase** (after 10 seconds)
- Consider use of pictures, written phrases and commands, and sign language
- Use low gestures for attention; avoid rapid pointing or waving
- Examine for presence of medical alert jewelry or tags, or an autism handout card
- **Model calming body language** (such as slow breathing and keeping hands low)
- **Model the behavior you want the person to display.**
- A person with autism may not react well to changes in routine or the presence of strangers, even a uniformed stranger
- Officers should not interpret the person’s failure to respond to orders or questions as a lack of cooperation or a reason for increased force
- Seek information and assistance from parent or others at the scene about how to communicate with and de-escalate the person's behavior
- Avoid stopping repetitive behaviors unless there is risk of injury to yourself or others. If the individual is holding and appears to be fascinated with an inanimate object, consider allowing subject to hold the item for the calming effect (if officer safety is not jeopardized by doing so)
- Evaluate for injury: person may not ask for help or show any indications of pain, even though injury seems apparent
- Be aware that the person may be having a seizure
- **Be aware of person’s self-protective responses** and sensitivities to even usual lights, sounds, touches, orders, and animals
- **If possible, turn off sirens and flashing lights and remove canine partners, crowds, or other sensory stimulation from the scene**
- **If person’s behavior escalates, use geographic containment and maintain a safe distance until any inappropriate behaviors lessen**
- Remain alert to the possibility of outbursts or impulsive acts
- Use your discretion. If you have determined that the person is unarmed and have established geographic containment, **use all available time to allow the person to de-escalate themselves without your intervention**

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For more information about VICTORIA POLICE policy and guidelines for supporting people with Mental Disorders call ...