

NADD is an international association for persons with intellectual/developmental disabilities and mental health needs. The national social and racial justice movement inspired the Family Voices Committee of NADD to examine police interactions with the people NADD represents.

There is a lack of data tracking interactions between police and persons with mental illness or persons with a disability, much less those with a dual diagnosis. But research suggests this population experiences violence and trauma more often than the rest of the population. We are deeply concerned about how often interactions between police and people with a dual diagnosis result in traumatic experiences, injuries, and deaths.

We demand systemic change in the way law enforcement responds to persons who have dual diagnosis, in order to bring about positive outcomes for the person, their family, and the police.

We strongly recommend:

- **Mandatory training for every police officer** to develop a foundational understanding of the characteristics of people with a dual diagnosis.
- Strict standards for ongoing and follow-up training, requiring officers to remain up to date in their knowledge and practices.
- **Robust crisis response systems** in which dispatchers are trained to identify the need for intervention teams and send the appropriate personnel, case by case.
- A collaborative planning team in every community to develop a crisis intervention training model. The team must consist of partners from the mental health system, intellectual/developmental disabilities system, impacted family members, law enforcement, and other relevant community allies.
- Crisis Intervention Team (CIT) availability as a rule, not an exception.

A crisis intervention training model for police and others on a response team must include:

- Positive communication practices with families and caretakers who can assist with a safe outcome.
- Knowledge of tools to accommodate individuals' different communication abilities, including understanding how behaviors can manifest in stressful situations such as a mental health crisis.
- Understanding of disabilities that are not visible but can affect a person's behavior. Reactions should not be based on assumptions.
- Effective use of **medical and behavioral health profile registries** to guide appropriate crisis response by 911 operators, first responders, and crisis intervention staff.
- Understanding of why **physical restraint should be a last resort** to avoid harm and trauma.
- Training and **commitment to exercise trauma-informed care interventions** and rely first on deescalation techniques when responding to an individual in a mental health crisis.

We at NADD stand ready to be part of the work

to improve law enforcement's interactions with those with a dual diagnosis.