

Rudely Interrupted: Close My Eyes

Causes of Developmental Disabilities

A. There are many *social, environmental* and *physical causes* of developmental disabilities, although for some a definitive cause may never be determined. Common factors causing developmental disabilities include:

- [Brain injury](#) or infection before, during or after birth
- Growth or [nutrition](#) problems (prenatally, perinatally, or postnatally)
- Abnormalities of [chromosomes](#) and [genes](#)
- Birth long before the expected birth date - also called extreme [prematurity](#)
- Poor maternal [diet](#) and absent or minimal [health care](#)
- [Drug abuse](#) during [pregnancy](#), including [alcohol](#) intake and [smoking](#)
- Drug-related prenatal developmental insult, such as [thalidomide](#); severe physical maltreatment ([child abuse](#)), which may have caused brain injury and which can adversely affect a child's learning abilities and socio-emotional development
- An [autism spectrum](#) disorder

Who is affected by Developmental Disabilities?

- 1-2% of the population in *most western countries* (although many government sources acknowledge that statistics are flawed in this area.)
- Approximately 1.4% *worldwide*.
- It is twice as common in males as in females.
- Some researchers have found that the prevalence of mild developmental disabilities is likely to be higher in areas of *poverty and deprivation*, and *among people of certain ethnicities*.

AUTISM

- Fastest-growing developmental disability; 1,148% growth rate'
- 1 to 1.5 million Americans live with an autism spectrum disorder
- \$60 billion annual cost

AUTISM

Children and adults with autism spectrum disorders are as varied in their interests, personalities, character, temperaments, and communication styles as anyone else. It's possible to have autism and have a cheerful, moody, serious, or cranky personality type.

AUTISM

- One person with autism might appear relatively comfortable with eye contact and another might panic when looked in the eye.
- It's even possible to be an affectionate touchy-feely sort of individual, with autism, or to be one that avoids even the slightest touch.
- Human behavior is far too complex and unpredictable to pigeon-hole anybody. No two persons behave exactly alike, with or without autism.

AUTISM

- There are two identifying features of autism spectrum disorders, along with a tendency to engage in atypical repetitive behaviors, that unite all persons with autism, they all have difficulty with:
 - ***socialization and***
 - ***communication.***

~~WHY ARE THEY A POLICE PROBLEM?~~

Why Is It Important to Understand?

Persons with an ASD are 7 times more likely to encounter the police than other individuals, because their unique communication styles and social characteristics may frighten or disturb some people.

The subject with ASD will also sometimes become frightened or over-stimulated and engage in challenging or seemingly offensive behaviors.

It is estimated that on **4 out 5** occasions, police will be called for an autistic subject, due to their unusual behavior, and not because of dangerous or criminal activity.

MORE OFTEN VICTIMS

- Persons with autism are also more likely to be victimized than other persons.
- Because of their impaired ability to communicate and socially interact, they may be more likely to be victims of institutional abuse in group homes, treatment facilities, nursing homes, schools, hospitals, and residential facilities.
- Children and adults with autism are often bullied, due to their unique social characteristics.

DEVELOPMENTAL DISABILITIES

- Developmental disabilities are a diverse group of severe chronic conditions that are due to mental and/or physical impairments.
- The term is used most commonly to refer to disabilities affecting daily functioning in three or more of the following areas:
 - Capacity for independent living
 - Economic self sufficiency
 - Learning
 - Mobility
 - Receptive and expressive language, Self-care, Self-direction

DEVELOPMENTAL DISABILITIES

Classifications of Impairment

Developmental disabilities are usually classified as severe, profound, moderate or mild, as assessed by the individual's need for supports, which may be life-long. Generally, persons in the mild category may be able to live independently and participate in life-long employment.

Moderate category persons will, most often, need varying levels of support from their families or from community agencies.

The profound and severe category persons are more likely to have very high levels of dependence with many requiring intensive supports as their mastery of activities of daily living (ADLs) is generally quite limited or non-existent.

DEVELOPMENTAL DISABILITIES AND THE LAW

The term first appeared in U.S. law in 1970, when Congress used the term to describe the population of individuals who had historically been placed in state institutions, in its effort to improve conditions in these dehumanizing facilities (P.L. 91-517, "The Developmental Disabilities Services and Facilities Construction Act of 1970"). The law has since been amended many times, and now calls for the full community inclusion and self-determination of people with developmental disabilities (P.L. 106-402).

Currently, United States Code title 42, Chapter 144 defines individuals as having a developmental disability or delay if they possess the following:

Mental retardation

Cerebral palsy

Autism spectrum disorders

Various genetic and chromosomal disorders such as Down syndrome

Fragile X syndrome, Fetal Alcohol Spectrum Disorders

THREE PHASES OF EVERY ENCOUNTER

Engage:

Establish rapport

How you are presenting yourself

Introduce yourself, ask the person's name

State the reason you are there in a way that builds trust (make it about safety and empathy)

Scene management – remove distractions, upsetting influences and disruptive people. Patience, empathy, vigilance, modeling, mirroring

THREE PHASES OF EVERY ENCOUNTER

Assess:

Gather needed info

Ruling in/out mental illness

Medical or drug/alcohol issues

Was a crime committed

Assess lethality if suicide or depression is an issue

Talk to others at the scene

Trust the experts. Family members can be a great source of information.

THREE PHASES OF EVERY ENCOUNTER

Resolve:

Voluntary compliance

Decide on course of action

Forecast, tell the person what you are going to do.

“The rules of my Department requires that everyone who rides in my police car has handcuffs on. You are not in any trouble, and I don’t want to get in trouble either, so I will have to put you in handcuffs before you get in my car”

Leading. Tell them what you expect and what you need from them.

“I know that you are really scared right now, so lets take this very slow. When you come out of your room, I want you to show me that your hands are empty. I need you to do what I am asking you to do”

VERBAL COMMUNICATION SKILLS

“...this skill...is anything but natural...Natural communication is what flows from your lips. It gets people hurt. So, just as it takes up to a year to train students how to fall and punch without getting hurt, tactical communication training takes a long-term approach to teach officers how to interact without getting themselves or someone else hurt.”

(Tactical Communications, George Thompson Ph.D.)

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VERBAL COMMUNICATION SKILLS

“Communication is a perishable skill... Verbal Judo is a physical skill, because it deflects abuse. Ideally, opportunities to practice via scenarios and debriefings will be presented throughout an officer's day, as well as during in-service training; Verbal Judo instructors are required to be retrained every three years.” (Tactical Communications, George Thompson Ph.D.)

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COMMUNICATING WITH AN AGITATED PERSON

Be calm. Make sure you do a proper safety assessment. Gather as much information as possible, in a conversational tone. Manage your officers and resources.

Remain Calm;

Remember, the verbally escalating person is beginning to lose control. If the person you are intervening with senses you are losing control, the situation will escalate. Try to keep your cool, even when challenged, insulted or threatened.

Isolate the Individual:

Onlookers, especially those who are the peers of the verbally escalating person, tend to fuel the fire. *They* often become cheerleaders, encouraging the individual. Isolate the person you are verbally intervening with. You will be more effective one-on-one.

Keep it Simple:

Be clear and direct in your message. Avoid jargon and complex options.

COMMUNICATING WITH AN AGITATED PERSON

Use Silence (aka effective pauses):

Ironically, silence is one of the most effective verbal intervention techniques. Silence on your part allows the individual to clarify and restate. This often leads to a clearer understanding of the true source of the individual's conflict.

Use Reflective Questioning:

Paraphrase and restate comments. By repeating or reflecting the person's statement in the form of a question, you'll help the individual gain valuable insight.

Be Aware of Your Paraverbals:

Any two identical statements can have completely opposite meanings, depending on how the tone, volume and cadence of *your* voice are altered. Make sure the words you use are consistent with voice inflection to avoid a double message.

SOME COMMUNICATION PRECAUTIONS

- Don't deny the possibility of violence when early signs of agitation are first noticed.
- Don't underestimate information given by others regarding behavioral clues.
- Don't engage in behaviors that can be interpreted as aggressive.
- Don't allow others to interact simultaneously while you are attempting to talk.
- Don't make promises you cannot keep.

SOME COMMUNICATION PRECAUTIONS

- Don't allow feelings of fear, anger, or hostility to interfere with self-control and professional demeanor.
- Don't argue, give orders, or disagree unless absolutely necessary.
- Don't be placating by giving in and agreeing to all the real and imagined ills of the person.
- Don't become condescending by using cynical, sarcastic, or satirical remarks.
- Don't let your own importance be acted out in a know-it-all manner.

SOME COMMUNICATION PRECAUTIONS

- Don't raise your voice, put a sharp edge, or use threats to gain compliance.
- Don't mumble, speak hesitantly, or use a tone so low that you can't be understood.
- Don't argue over small points.
- Don't attempt to reason with anyone under the influence of a mind altering substance.
- Don't attempt to gain compliance based on the assumption that the person is as reasonable about things as you are.

SOME COMMUNICATION PRECAUTIONS

- Don't allow a crowd to congregate.
- Don't ask "Why?"
- Don't deny the opportunity to save face.
- Don't rush, be rushed, or lose your own cool!

SUMMARY FOR SPECIAL POPULATIONS

- Special Populations involve anyone exhibiting diminished capacity.
- A crisis can be a medical encounter that requires vigilance because it is unpredictable.
- Understanding the situation from the other person's perspective is vital to resolving the crisis.

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