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# Research in Practice

No. 34 May 2013

## Police shootings of people with a mental illness

The decision to use a firearm in a police operation is one of the most critical a police officer can make and 'no other single issue has the potential to destroy the relationship between the police and the community like the use by police of deadly force' (McCulloch 1991: 160).

All fatal police shootings are subject to internal review, a mandatory coronial inquest and are also monitored by the Australian Institute of Criminology's (AIC) National Deaths in Custody Program (NDICP). The NDICP collects detailed information about the circumstances and nature of such incidents, with the view to informing the ongoing development of policy and procedure.

The AIC has recently released a special monitoring report that commemorates the twentieth anniversary of the Royal Commission into Aboriginal Deaths in Custody. This report contains detailed analysis of the 2,325 deaths in custody since 1 January 1980 (which includes 905 deaths in police custody and custody-related operations). This report also examines fatal police shootings that have occurred in Australia since monitoring of these incidents began in 1989–90.

One issue that frequently arises with regard to police shootings is proportionality, or more simply, whether the threat or potential threat posed by the alleged offender was sufficient to warrant police using a firearm. This issue is tested through coronial inquests in which the presiding coroner will make a determination about whether the shooting was justified.

This issue becomes much harder to resolve when the mental capacity of the alleged offender is impaired, such as by drugs and/or alcohol, a mental illness or both, as the ability to understand or appreciate the consequences of potentially life-threatening actions may be undermined.

To explore this issue, the AIC collects information about the prevalence of mental illness and prior consumption of drugs and/or alcohol among those persons who die in police custody or a custody-related

operation. Information about the prevalence of mental health issues were obtained from coronial findings and as such, should be treated as a conservative estimate of prevalence. This is because there may be persons who had a mental illness who were shot by police, but it had not been diagnosed or was unknown to friends or family of the deceased and was therefore not recorded in available sources. Prior consumption of drugs and/or alcohol was sourced from post-mortem toxicology screening.

With these data, it is not possible to quantify how individuals presented to police at the time of the custody episode. The presence of drugs or alcohol in toxicological analysis is not evidence that the deceased's behaviour was affected at the time of the incident, but is only indicative of prior consumption. In addition, a known history of mental illness is indicative of its presence, but not whether the deceased was actually displaying symptoms at the time of their death.

Data collected by the NDICP shows that since 1989–90, there have been 105 persons fatally shot by police, with available information indicating that in 44 (42%) incidents, the deceased had been identified as having some form of mental illness, with psychotic disorders such as schizophrenia being the most common (59%;  $n=26$ ; see Table 1).

Similar rates of prevalence were found in a recent study by Kesic, Thomas and Ogloff (2010: 463), who observed that among a sample of 48 fatalities associated with police use of force in Victoria, 'rates of psychosis and schizophrenia were 11.3 and 17.3-fold higher than estimated rates in the general population'.

Analysis of data from the NDICP shows that over the 11 years from 1989–90 to 1999–2000, there was an annual average of five ( $\mu=5.4$ ) fatal police shootings, with an average of two fatal shootings ( $\mu=1.9$ ) involving persons with a mental illness each year.

However, in the 11 years since 2000–01, the annual average number of persons fatally shot by police has

**Table 1** Total number of persons shot by police and number and proportion involving persons with a mental illness, by year 1989–90 to 2010–11

Year	Persons shot by police (n)	Those who had mental illness (n)	Proportion with a mental illness (%)
1989–90	2	0	–
1990–91	5	1	20
1991–92	4	2	50
1992–93	4	0	–
1993–94	9	5	56
1994–95	6	4	67
1995–96	4	2	50
1996–97	7	3	43
1997–98	5	1	20
1998–99	2	0	–
1999–2000	11	3	27
2000–01	3	1	33
2001–02	2	2	100
2002–03	5	2	40
2003–04	7	5	71
2004–05	6	3	50
2005–06	3	1	33
2006–07	3	2	67
2007–08	3	2	67
2008–09	5	2	40
2009–10	3	2	67
2010–11	6	1	17
Total	105	44	42

dropped to four ( $\mu=4.2$ ), while the average number involving persons with a mental illness has remained at two ( $\mu=2.1$ ) each year.

Analysis of post-mortem toxicology results showed that in 53 (51%) fatal shootings, the deceased had consumed drugs and/or alcohol prior to the incident. Of the 44 persons with a mental illness who were shot by police, 25 (57%) had consumed drugs and/or alcohol prior to the incident.

To provide further context to the often difficult situations faced by police in the course of their duties, data was also collected about whether the person shot was in possession of a weapon at the time of the incident (see Table 2). It can be seen that in 34 (32%) police shootings, the deceased was in possession of a firearm, 41 (39%) incidents involved an alleged offender armed with a knife and 14 (13%) involved other weapons (such as an axe or crossbow).

For the remaining 16 (15%) police shootings, the alleged offender was not in possession of a weapon. Overall, for the last 22 years for which data have been collected, 89 (85%) police shooting incidents involved an alleged offender armed with a deadly weapon.

These data highlight the important role that ongoing monitoring plays in improving our understanding of the issues faced by operational police members on the front-line.

Further, they reinforce the difficult and sometimes dangerous nature of arrest-type situations, and underscore the need for police members to exercise care and caution when endeavouring to take a person into custody.

For more detailed analysis and discussion of police shooting incidents, please refer to the latest NDICP monitoring report, which is available on the AIC website ([www.aic.gov.au](http://www.aic.gov.au))

## References

Kesic D, Thomas S & Ogloff J 2010. Mental illness among police fatalities in Victoria 1982–2007: Case linkage study. *Australian and New Zealand Journal of Psychiatry* 44: 463–468

Lyneham M & Chan A 2013. *Deaths in custody in Australia to 30 June 2011 – Twenty years of monitoring by the National Deaths in Custody Program since the Royal Commission into Aboriginal Deaths in Custody*. Canberra: Australian Institute of Criminology

McCulloch J 1991. Police shootings and community relations, in McKillop S & Vernon J (eds), *The police and the community in the 1990's. Conference proceedings no. 5*. Canberra: Australian Institute of Criminology. [http://www.aic.gov.au/media\\_library/publications/proceedings/05/mcculloch.pdf](http://www.aic.gov.au/media_library/publications/proceedings/05/mcculloch.pdf)

**Table 2** Persons shot by police and number involving persons with weapon, by weapon type and year 1989–90 to 2010–11 (n)

Year	In possession of firearm	In possession of knife	In possession of other weapon <sup>a</sup>	No weapon	Total number of persons shot by police
1989–90	2	0	0	0	2
1990–91	4	1	0	0	5
1991–92	1	1	0	2	4
1992–93	1	1	0	2	4
1993–94	3	3	2	1	9
1994–95	1	3	1	1	6
1995–96	0	2	1	1	4
1996–97	2	3	1	1	7
1997–98	3	1	1	0	5
1998–99	0	1	0	1	2
1999–2000	2	5	4	0	11
2000–01	1	1	0	1	3
2001–02	0	2	0	0	2
2002–03	3	0	0	2	5
2003–04	2	4	1	0	7
2004–05	1	2	1	2	6
2005–06	2	1	0	0	3
2006–07	0	2	1	0	3
2007–08	1	1	1	0	3
2008–09	2	3	0	0	5
2009–10	1	2	0	0	3
2010–11	2	2	0	2	6
Total	34	41	14	16	105

a: Such as an axe, crossbow, explosives or motor vehicle