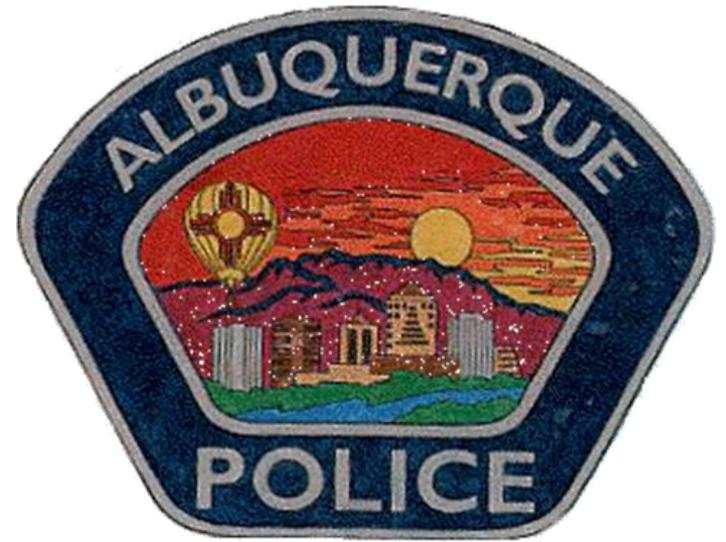# The Albuquerque Police Department Crisis Intervention Unit Data Book: A Working Compendium

Version Date: June 15, 2018

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Background

In 2014, the City Of Albuquerque and the U.S. Department of Justice entered into an agreement often referred to as the CASA (Court Appointed Settlement Agreement) which identified a number of actions to be completed by the Albuquerque Police Department (APD).

The CASA paragraphs #129 and #137 direct APD to collect data on the use of crisis intervention certified responders for management purposes and to demonstrate the impact of and inform modifications to crisis prevention services. These data include:

- date, shift, and area command of the incident;
- subject's age, race/ethnicity, and gender;
- whether the subject was armed and the type of weapon;
- whether the subject claims to be a U.S. military veteran;
- name and badge number of crisis intervention certified responder or CIU detective on the scene;
- whether a supervisor responded to the scene;

- techniques or equipment used;
- any injuries to officers, subjects, or others;
- disposition of the encounter (e.g., arrest, citation, referral); and
- a brief narrative of the event (if not included in any other document).
- number of individuals in the COAST and CIU case loads;
- number of individuals receiving crisis prevention services

CASA paragraph #130 also directs APD to these data to continually improve police training; practices and polices; and to identify systemic issues that impede the Department's ability to provide an appropriate responses individuals experiencing a mental health crisis.

The APD Crisis Intervention Unit Data Book is one way APD provides information about these data and our efforts to use this information to continually strengthen our ability to protect and serve our community.

Data Definitions

1. Throughout this report we refer to behavioral health related computer aided dispatch (CAD) incidents and police reports. Computer Aided Dispatches are 911 calls that are categorized as suicide or behavioral health in CAD descriptions. If CAD calls turn into incidents that required police reports, these reports may be categorized as suicide, behavioral health, mental commit, mental patient, or psychiatric evaluation depending on which record system is used and what year the report was filed.

2. The data come from Tiburon and other dynamic data bases and are continually updated as reports are completed and revised.

3. We fully understand that our data is based on behavioral health related incidents which are known to be behavioral health related by law enforcement at the time of occurrence. There are probably many incidents which are classified in other ways which have a behavioral health components and are missed in our analyses.

4. We are committed to improving our data collection and analyses and we have made some important strides so far. But clearly, complete and accurate data in law enforcement is a journey rather than a destination.

APD's Crisis Intervention Unit

The Albuquerque Police Department's Crisis Intervention Team
A Report Card
By DEBORAH L. BOWER, M.S., M.A., and W. GENE PETTIT

"The intervention by CIT-trained officers in crisis situations is directly responsible for the decrease in police shootings. This has saved the lives of both citizens and police officers."

—Albuquerque Police Chief Gerry Galvin

Like most large metropolitan police departments, the Albuquerque, New Mexico, Police Department (APD) faces the challenge of finding the most effective way to deal with individuals in crisis. These individuals often demonstrate inadequate coping with stressful life events by endangering themselves or others and may be at serious risk of injury or death. They may compound their problems with alcohol or other drugs, have a mental illness, or intend to die at the hands of police (victim-precipitated homicide or suicide by cop). Unwittingly, individuals in crisis may behave in ways that can result in a police shooting. Research on these incidents reveals five key factors associated with fatal police shootings: 1) commission of a serious criminal offense; 2) use of alcohol or other drugs; 3) presence of a mental disorder or irrational behavior; 4) existence of actions that officers can misinterpret easily, such as pointing a toy gun; and

February 2001 / 1

**Source: FBI Law Enforcement Bulletin, February 2001**

CIT Data for 1999		Count	Percentage
Total calls for CIT service		3,257	
Mental illness believed to be a factor		1,878	57.7
Mental illness not believed to be a factor		407	12.5
Mental illness not evaluated		972	29.8
Sex	Female	1,366	41.9
	Male	1,871	57.4
	Unspecified	20	.7
Suicide calls	Attempted	505	15.5
	Threatened	948	29.1
Threatened suicide by cop*		9	0.427
Weapons involved		457	14.0
Substance abuse	Alcohol	890	27.3
	Other drugs	554	17.0
Injury to subject	Prior to police contact	426	13.1
	Result of police contact	38	1.2
Subjects transported			
Arrests/protective custody		298	9.1
Mental health facilities		1,391	42.7
Admission to mental health facilities**		398	12.2

*Data from May-December 1999, (total equals 2,105)
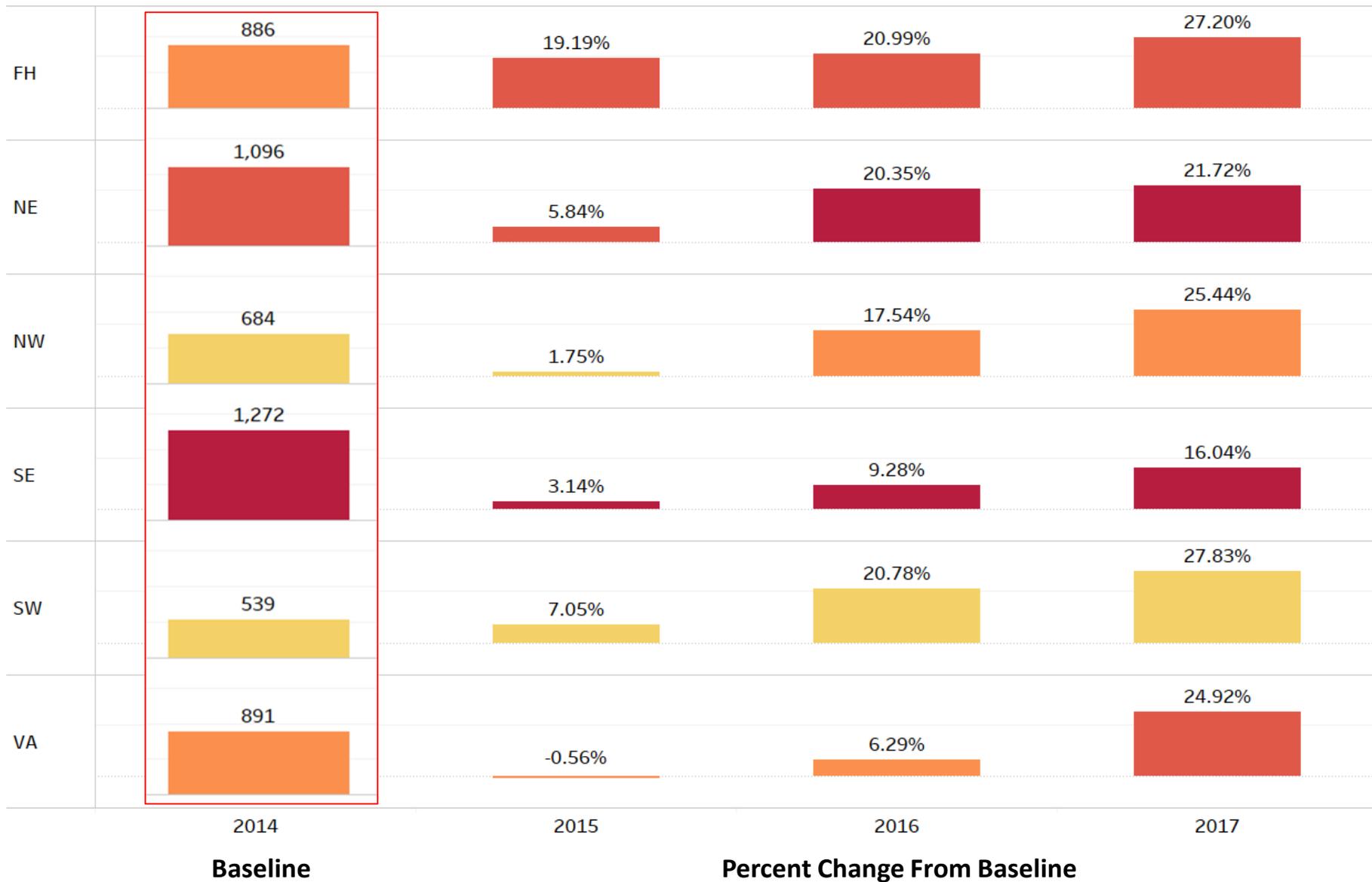**Underestimate, officers leave facility prior to admission

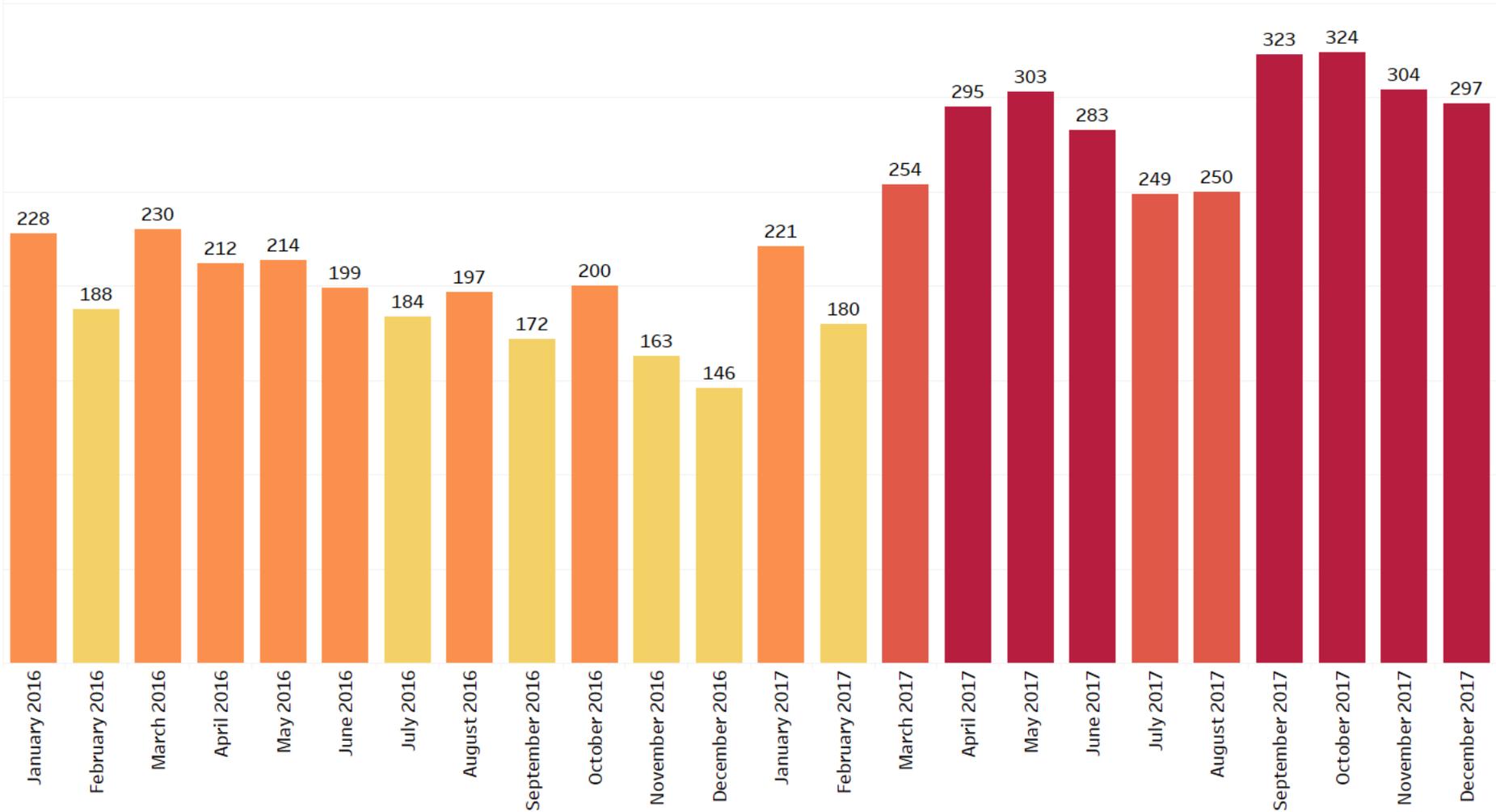# The Number Of Behavioral Health Related CAD Calls By Year
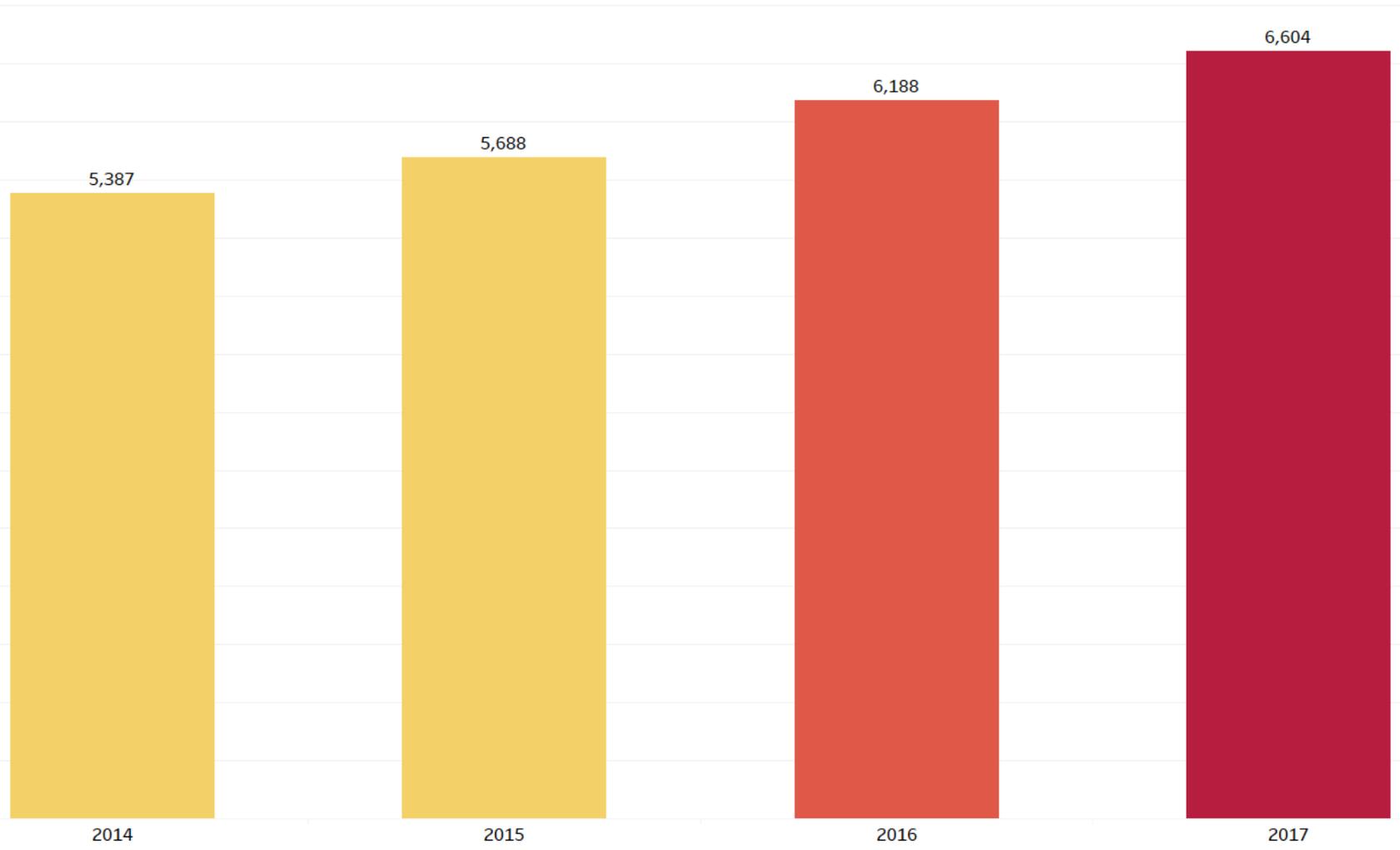
Bar chart of behavioral health related CAD calls by year:
- 2014: 5,387
- 2015: 5,688
- 2016: 6,188
- 2017: 6,604

The Number Of Behavioral Health Related CAD Calls By Area Command And Year

Area	2014	2015	2016	2017
FH	886	1,056	1,072	1,127
NE	1,096	1,160	1,319	1,334
NW	684	696	804	858
SE	1,272	1,312	1,390	1,476
SW	539	577	651	689
VA	891	886	947	1,113

The Percent Change From 2014 In Number Of Behavioral Health Related Calls By Area Command And Year

Area Command	2014 (Baseline)	2015	2016	2017
FH	886	19.19%	20.99%	27.20%
NE	1,096	5.84%	20.35%	21.72%
NW	684	1.75%	17.54%	25.44%
SE	1,272	3.14%	9.28%	16.04%
SW	539	7.05%	20.78%	27.83%
VA	891	-0.56%	6.29%	24.92%

Baseline   **Percent Change From Baseline**

APD Conducted Detailed Analysis On 5,616 Behavioral Health Related Police Reports From 2016 To 2017

Month	Count
January 2016	228
February 2016	188
March 2016	230
April 2016	212
May 2016	214
June 2016	199
July 2016	184
August 2016	197
September 2016	172
October 2016	200
November 2016	163
December 2016	146
January 2017	221
February 2017	180
March 2017	254
April 2017	295
May 2017	303
June 2017	283
July 2017	249
August 2017	250
September 2017	323
October 2017	324
November 2017	304
December 2017	297

The Number Of Behavioral Health Related CAD Calls By Area Command By Shift From January 2016 To December 2017
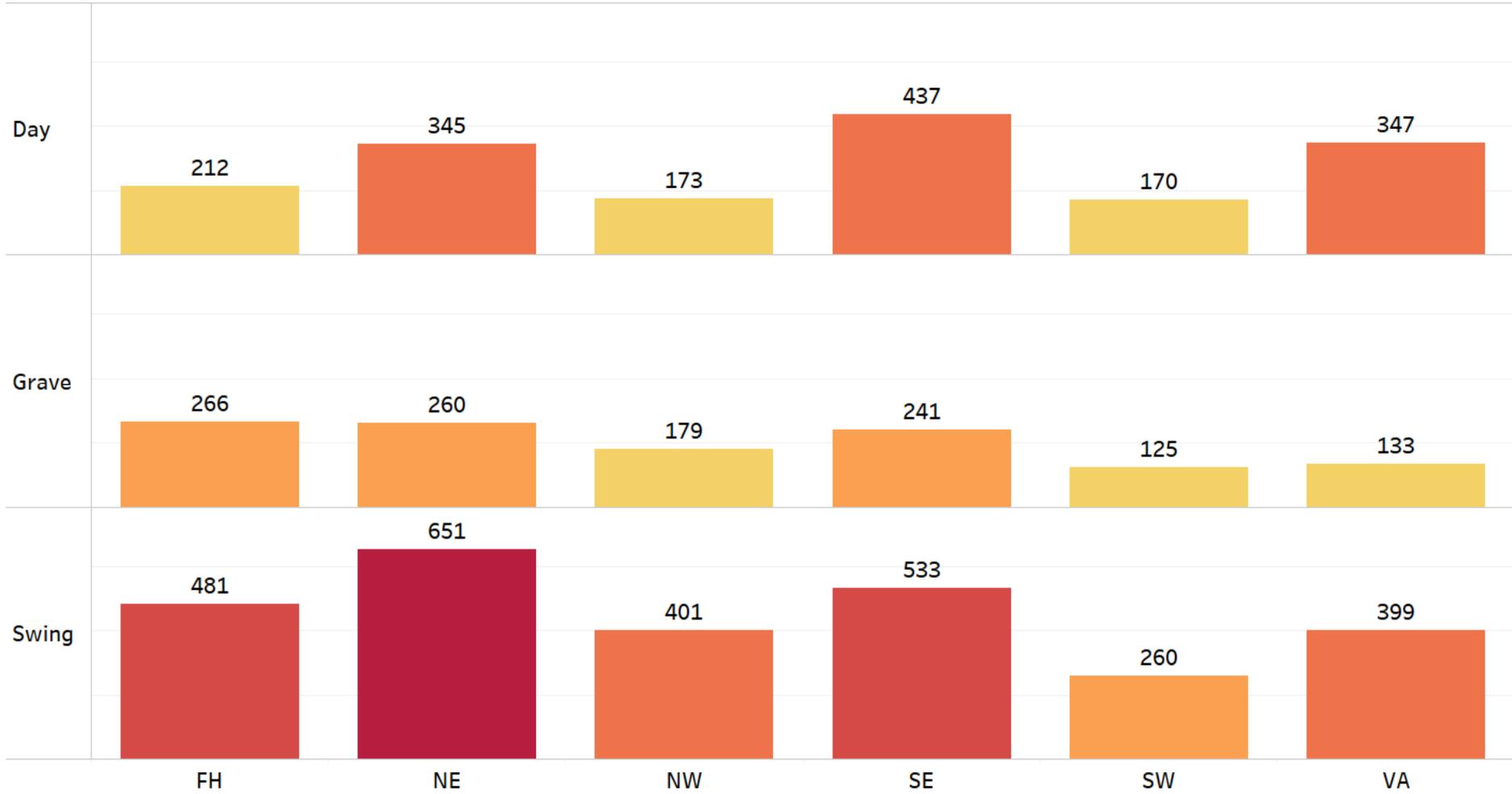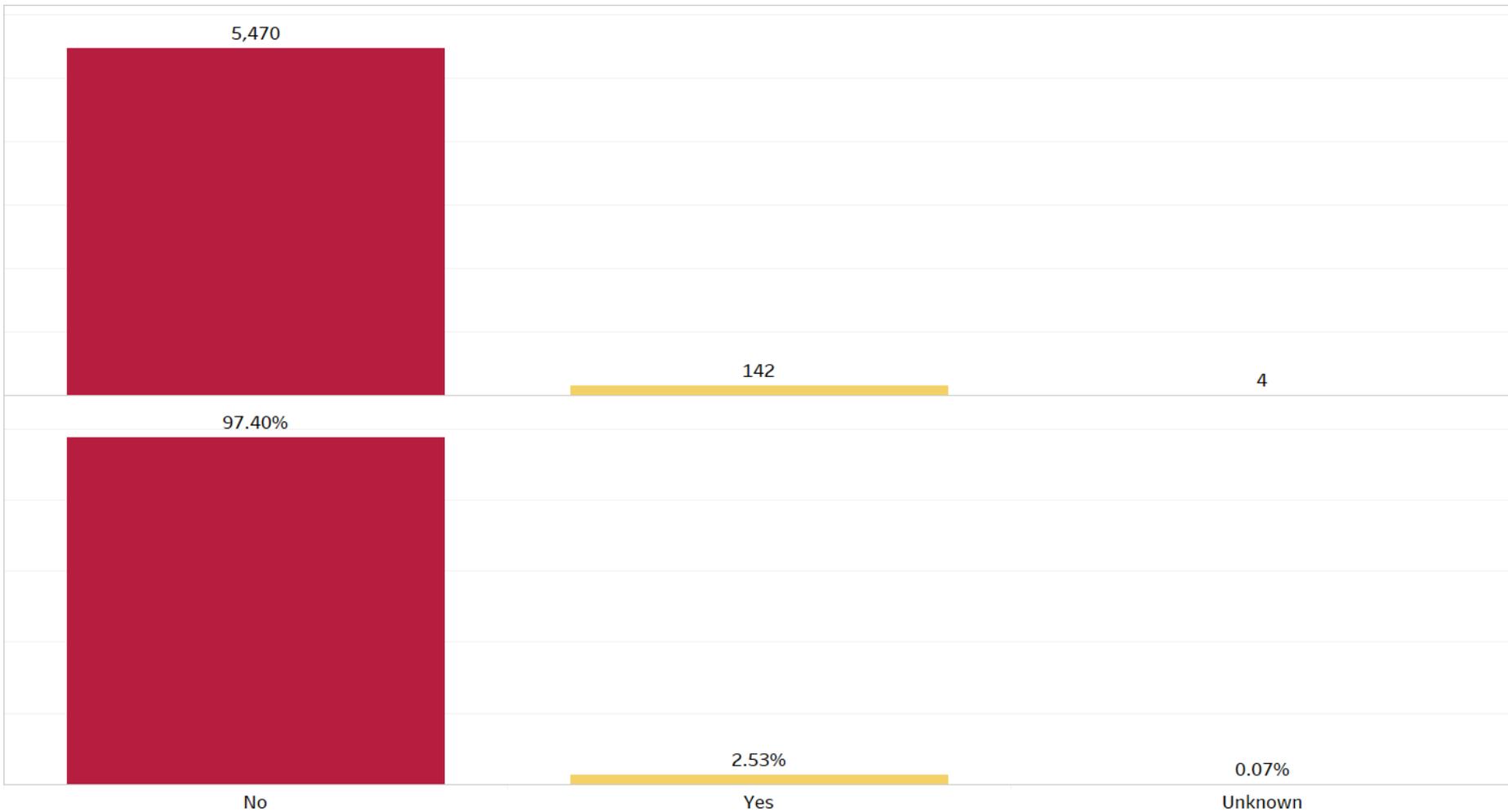
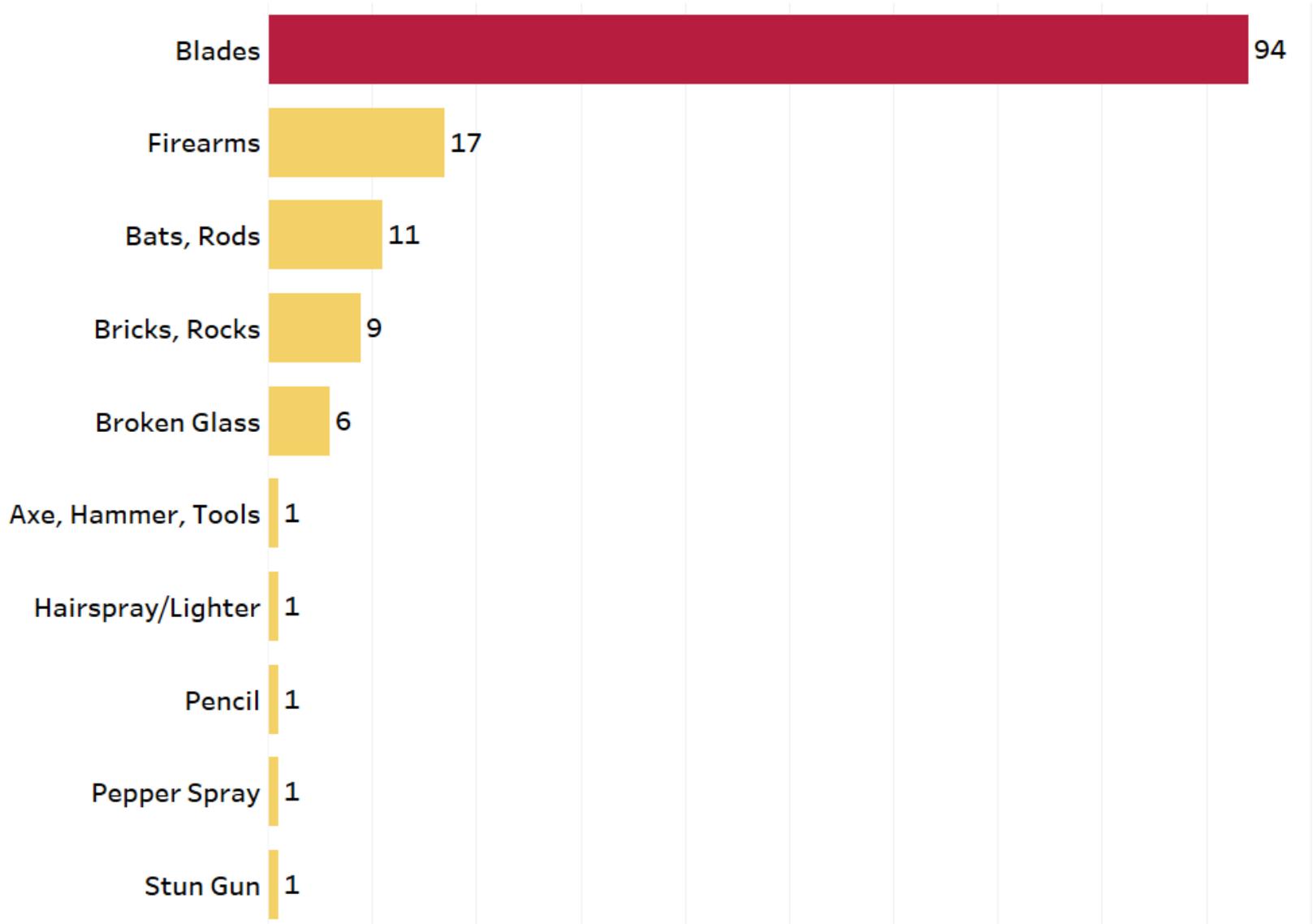# The Age And Gender Of Individuals In Behavioral Health Related Police Reports January 2016 To December 2017
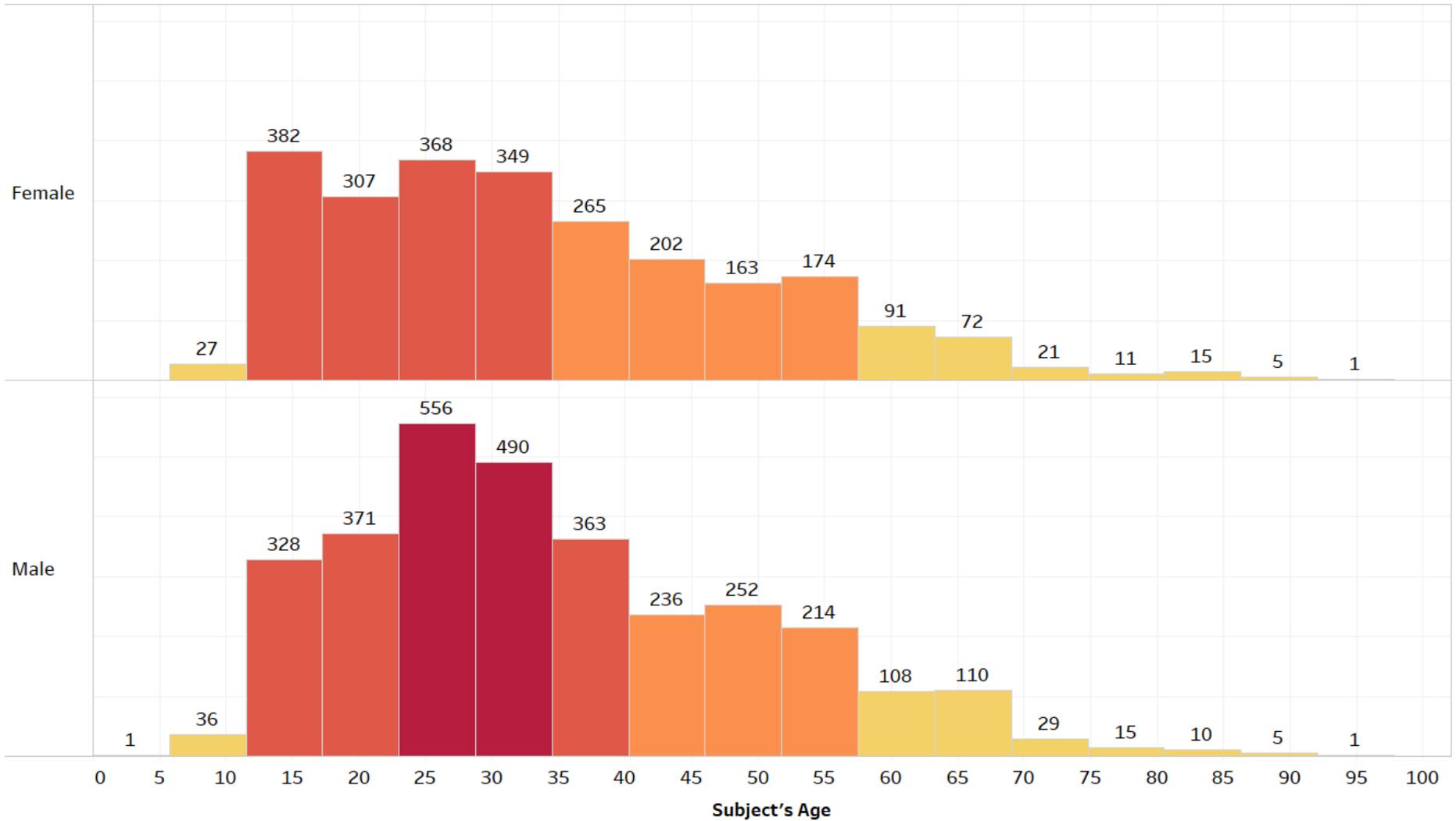
The Race/Ethnicity And Gender Of Individuals In Behavioral Health Related Police Reports January 2016 To December 2018

		Hispanic	Not Hispanic	Unknown
Asian	Female		15	4
	Male		10	2
Black	Female	3	85	34
	Male	7	129	55
	Unkno..		1	
Native American	Female	15	87	44
	Male	15	130	75
Pacific Islander	Female		3	3
	Male	1	4	3
Unknown	Female	67	32	311
	Male	78	59	383
White	Female	658	692	416
	Male	897	846	452

Was The Subject Armed In The Behavioral Health Related Police Reports?
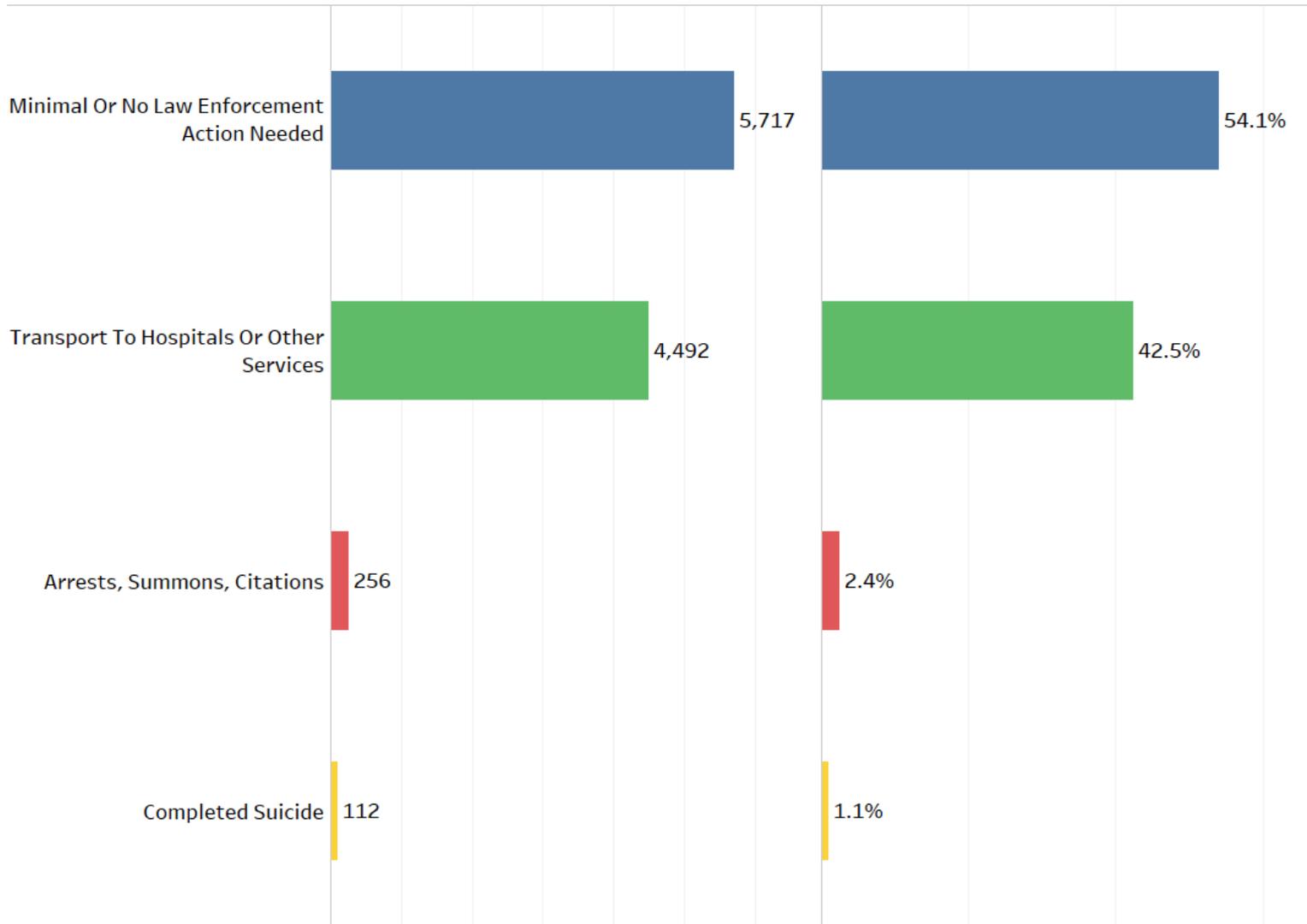## January 2016 To December 2017

	No	Yes	Unknown
Count	5,470	142	4
Percent	97.40%	2.53%	0.07%

If The Subject Was Armed, What Type Of Weapon Was Used?
January 2016 To December 2017

Weapon	Count
Blades	94
Firearms	17
Bats, Rods	11
Bricks, Rocks	9
Broken Glass	6
Axe, Hammer, Tools	1
Hairspray/Lighter	1
Pencil	1
Pepper Spray	1
Stun Gun	1

Did The Subject Claim To Be A Veteran?
January 2016 To December 2017
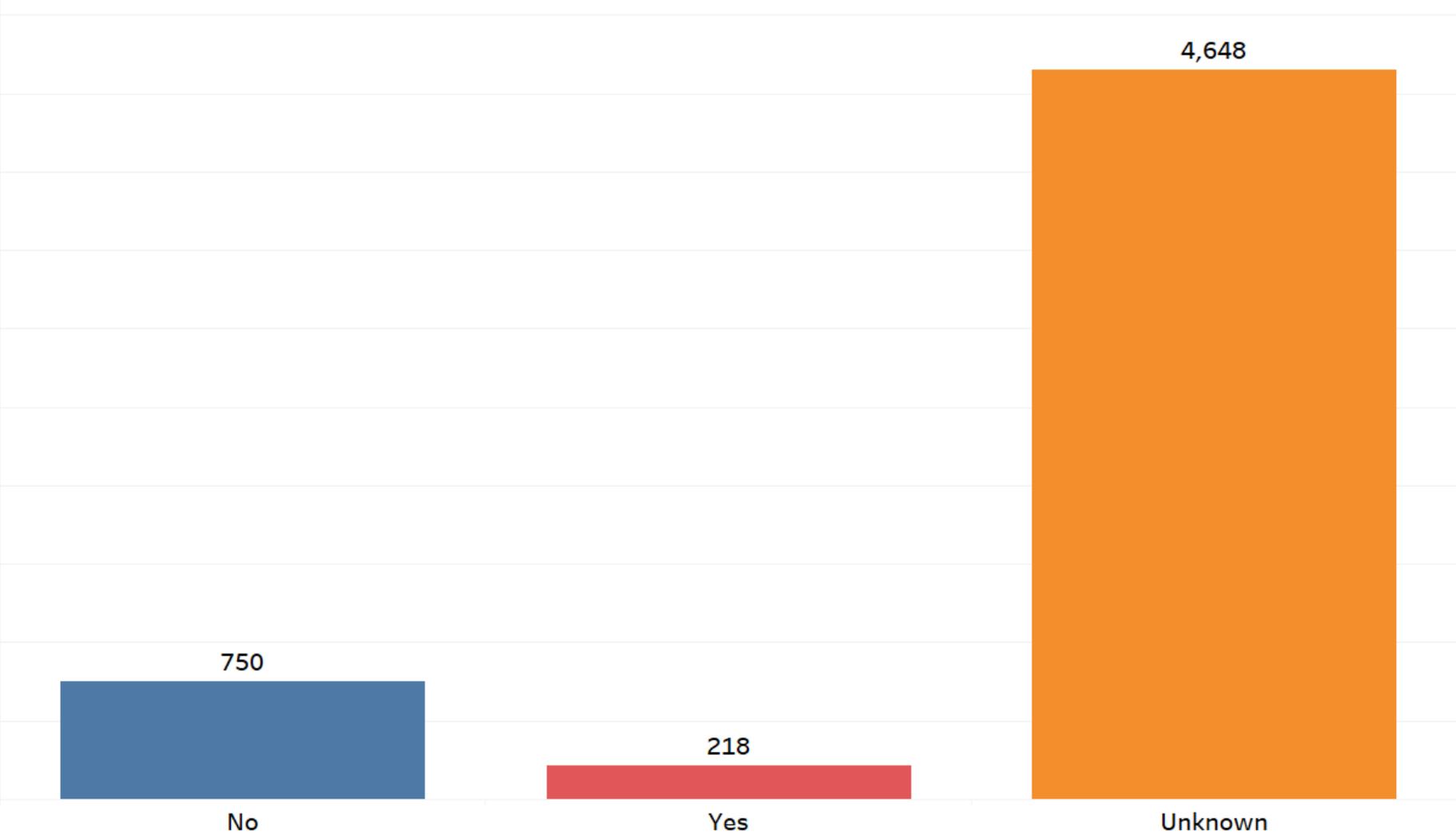
Disposition Data For Individuals Involved In 10,577 CIT-Related Incidents
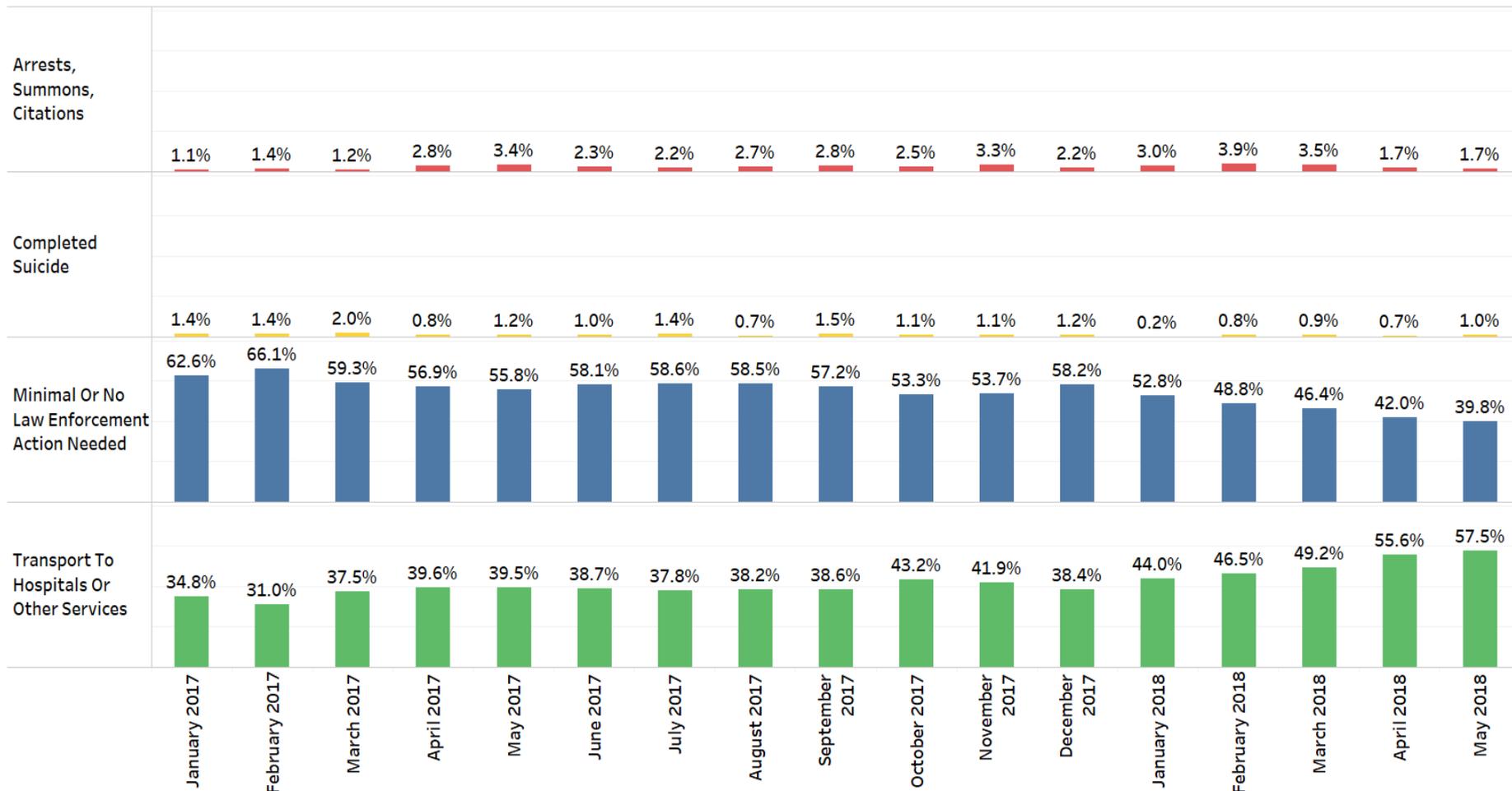## January 1, 2017 To June 15, 2018

| Disposition	Count	Percentage
Minimal Or No Law Enforcement Action Needed	5,717	54.1%
Transport To Hospitals Or Other Services	4,492	42.5%
Arrests, Summons, Citations	256	2.4%
Completed Suicide	112	1.1%

Data in this chart was compiled from all behavioral health and suicide calls that came into dispatch and compared to reports that were filed from those calls to determine the final outcome. No law enforcement action needed are calls in which officers responded but did not take any report. Some individuals may have been involved in multiple incidents.

15

Disposition Data For Individuals Involved In 10,577 CIT-Related Incidents
By Month From January 2017 To May 2018
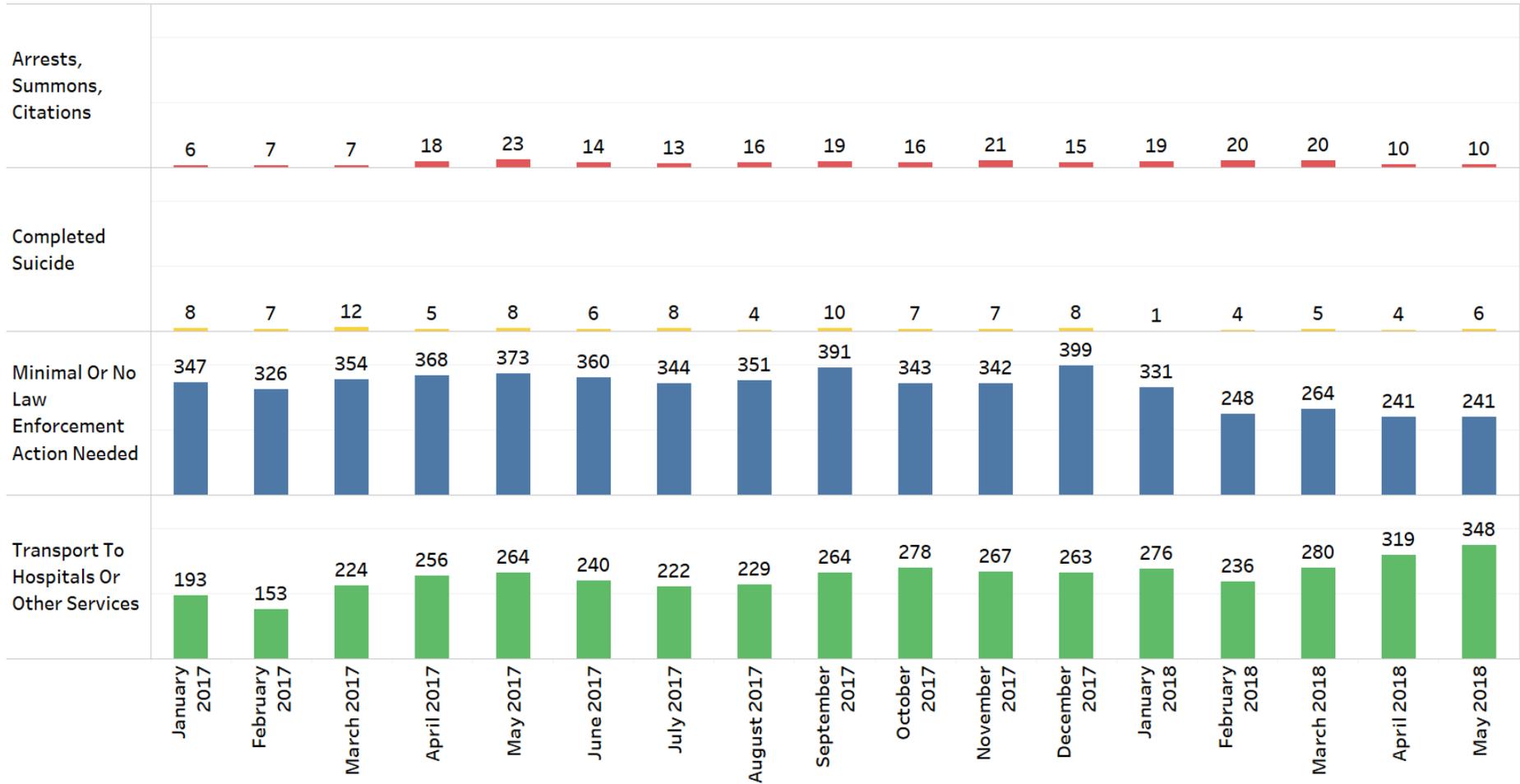
	Jan 2017	Feb 2017	Mar 2017	Apr 2017	May 2017	Jun 2017	Jul 2017	Aug 2017	Sep 2017	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	Mar 2018	Apr 2018	May 2018
Arrests, Summons, Citations	6	7	7	18	23	14	13	16	19	16	21	15	19	20	20	10	10
Completed Suicide	8	7	12	5	8	6	8	4	10	7	7	8	1	4	5	4	6
Minimal Or No Law Enforcement Action Needed	347	326	354	368	373	360	344	351	391	343	342	399	331	248	264	241	241
Transport To Hospitals Or Other Services	193	153	224	256	264	240	222	229	264	278	267	263	276	236	280	319	348

Data in this chart was compiled from all behavioral health and suicide calls that came into dispatch and compared to reports that were filed from those calls to determine the final outcome. No law enforcement action needed are calls in which officers responded but did not take any report. Some individuals may have been involved in multiple incidents.
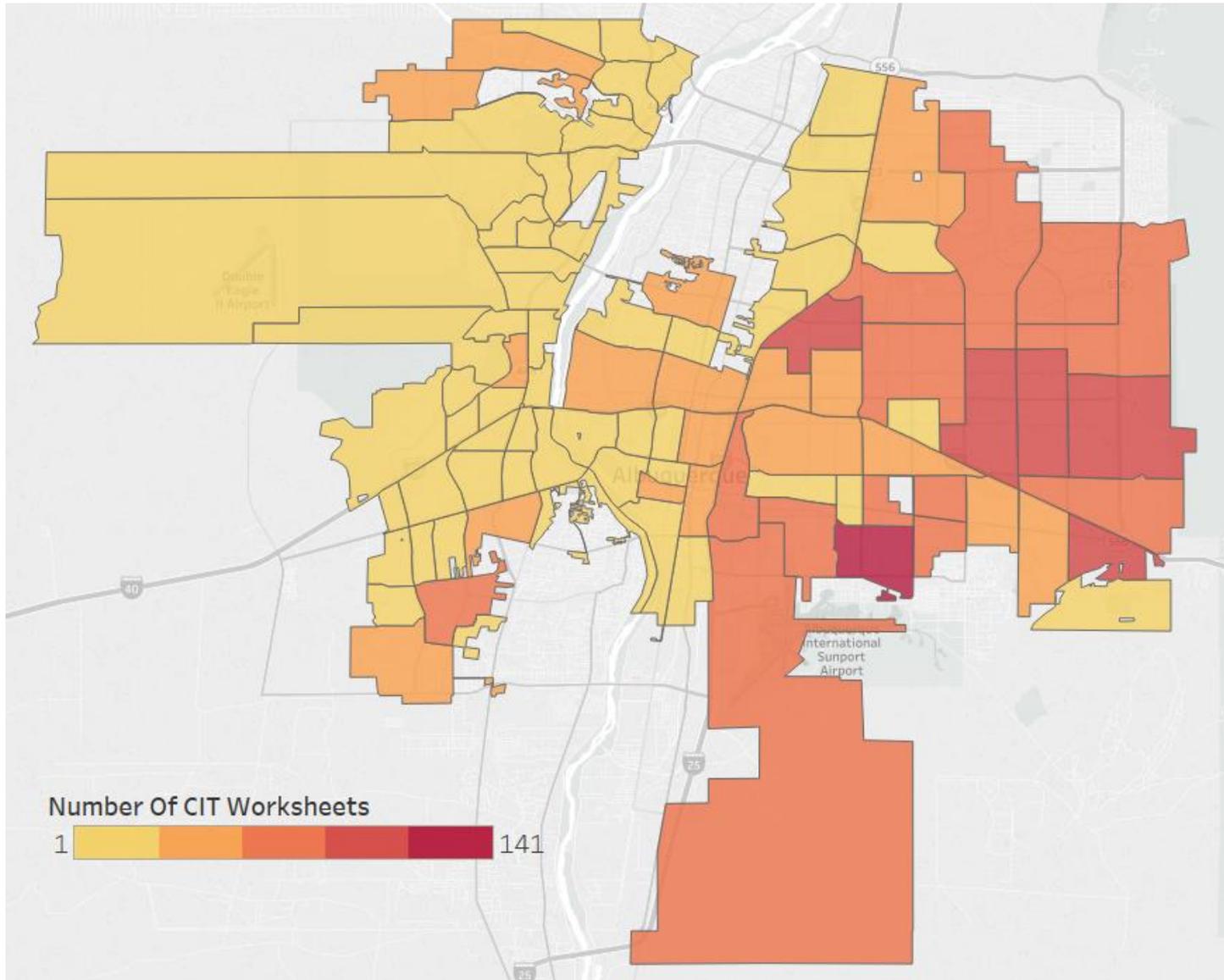
Disposition Data For Individuals Involved In 10,577 CIT-Related Incidents By Percentage By Month From January 2017 To May 2018

	Jan 2017	Feb 2017	Mar 2017	Apr 2017	May 2017	Jun 2017	Jul 2017	Aug 2017	Sep 2017	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	Mar 2018	Apr 2018	May 2018
Arrests, Summons, Citations	1.1%	1.4%	1.2%	2.8%	3.4%	2.3%	2.2%	2.7%	2.8%	2.5%	3.3%	2.2%	3.0%	3.9%	3.5%	1.7%	1.7%
Completed Suicide	1.4%	1.4%	2.0%	0.8%	1.2%	1.0%	1.4%	0.7%	1.5%	1.1%	1.1%	1.2%	0.2%	0.8%	0.9%	0.7%	1.0%
Minimal Or No Law Enforcement Action Needed	62.6%	66.1%	59.3%	56.9%	55.8%	58.1%	58.6%	58.5%	57.2%	53.3%	53.7%	58.2%	52.8%	48.8%	46.4%	42.0%	39.8%
Transport To Hospitals Or Other Services	34.8%	31.0%	37.5%	39.6%	39.5%	38.7%	37.8%	38.2%	38.6%	43.2%	41.9%	38.4%	44.0%	46.5%	49.2%	55.6%	57.5%

Data in this chart was compiled from all behavioral health and suicide calls that came into dispatch and compared to reports that were filed from those calls to determine the final outcome. No law enforcement action needed are calls in which officers responded but did not take any report. Some individuals may have been involved in multiple incidents.

How Can We Think Smarter About Helping The People Involved in Behavioral Health-Related Encounters With Law Enforcement?

- How Do We Gather Critical Information On The Large Number Of Behavioral Health-Related Encounters Most Effectively?

- How Can We Evaluate The Urgent Needs Of Individuals Experiencing A Behavioral Health Crisis So That Appropriate Levels Of Intervention Can Be Deployed Effectively?

Over 3,000 CIT Worksheets Were Completed By APD Field Officers Between November 2, 2017 and April 28, 2018
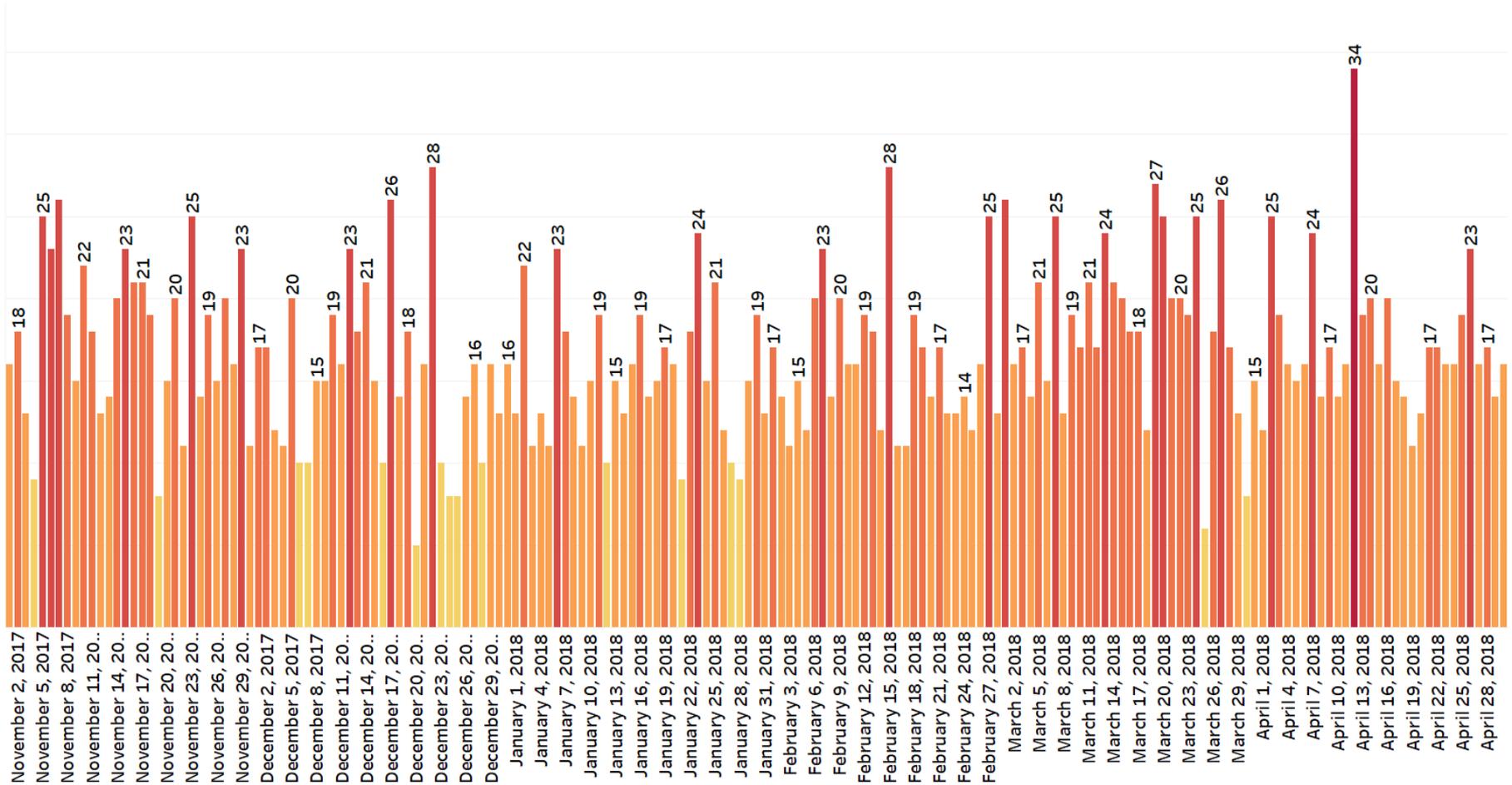
CIT Worksheets Completed By APD Field Officers By Beat
Between November 2, 2017 and April 28, 2018

Number Of CIT Worksheets

1 ▭▭▭▭▭ 141

Did An ECIT Officer Show Up On The Scene?

	Grand Total	No	Yes
Foothills	556	288	268
Northeast	638	413	225
Northwest	390	181	209
Southeast	706	370	336
Southwest	283	156	127
Valley	419	183	236
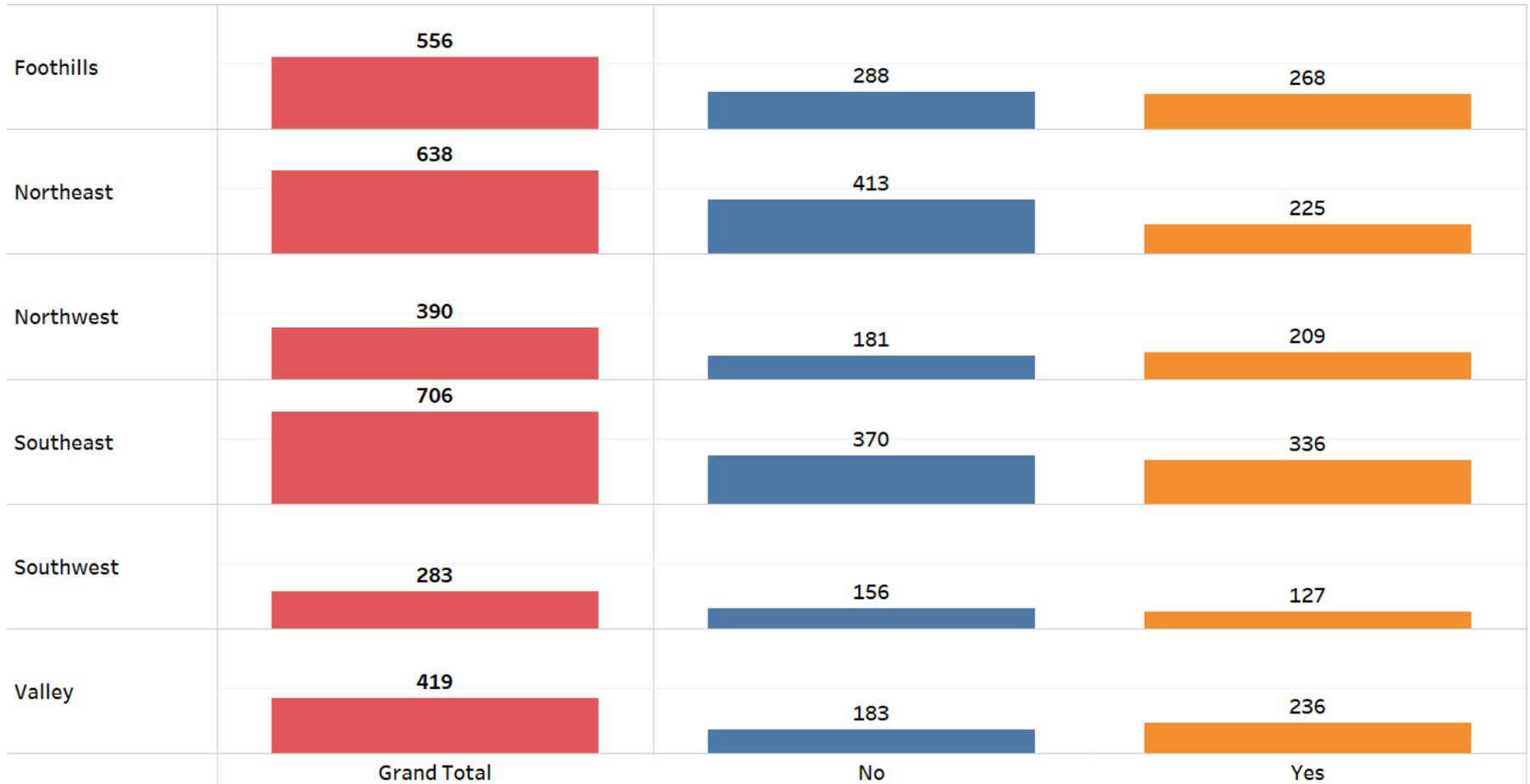
Source: CIT Worksheets Completed By Field Officers Between November 2, 2017 and April 28, 2018

The APD CIT Worksheet Includes The Following Question And Possible Answers

Self-Described Mental Illness

- ADHD
- Anxiety Disorder
- Autism
- Bipolar
- Brain Injury
- Depression
- Intellectual Disability
- Other (Describe in "Notes" Below)
- PTSD
- Schizophrenia (Schizoaffective)

How Do We Make Useful Sense Of The Responses?

Category	Value
Null	1,645
Depression, Depression, Intellectual Disability, Depression, Intellectual Disability, PTSD and 6 more	291
Bipolar, Bipolar, Brain Injury, Bipolar, Brain Injury, Depression and 20 more	271
Anxiety Disorder, Anxiety Disorder, Autism, Anxiety Disorder, Autism, Bipolar and 35 more	262
Schizophrenia (Schizoaffective) & Schizophrenia (Schizoaffective), Other (Describe in "Notes" below)	260
PTSD, PTSD, Other (Describe in "Notes" below), PTSD, Schizophrenia (Schizoaffective) and 1 more	100
ADHD, ADHD, Anxiety Disorder, ADHD, Anxiety Disorder, Autism, Depression and 32 more	69
Other (Describe in "Notes" below)	64
Brain Injury, Brain Injury, Depression, Brain Injury, Depression, Other (Describe in "Notes" below) and 8 more	26
Autism, Autism, Bipolar, Autism, Depression and 6 more	23
Intellectual Disability & Intellectual Disability, Schizophrenia (Schizoaffective)	2

The APD CIT Worksheet Includes The Following Question And Possible Answers

Substance Used

- Cocaine
- Crack
- Heroin
- LSD
- Marijuana
- Medication (Prescription Drugs)
- Meth
- Opium
- Other Depressants
- Other Narcotics
- Other Hallucinogens
- Other Stimulants
- PCP
- Unknown

How Do We Make Useful Sense Of The Responses?

UNKNOWN, UNKNOWN, MEDICATION (PRESCRIPTION DRUGS), UNKNOWN, NONE — 1,476

NONE & NONE, MEDICATION (PRESCRIPTION DRUGS) — 1,044

OTHER (CLICK ON OTHER TAB), OTHER (CLICK ON OTHER TAB), MEDICATION (PRESCRIPTION DRUGS), OTHER (CLICK ON OTHER TA.. — 433

MEDICATION (PRESCRIPTION DRUGS) & MORPHINE, MEDICATION (PRESCRIPTION DRUGS) — 409

HASHISH, HASHISH, MARIJUANA, MEDICATION (PRESCRIPTION DRUGS), HASHISH, UNKNOWN and 19 more — 261

METH, METH, MEDICATION (PRESCRIPTION DRUGS), METH, OTHER (CLICK ON OTHER TAB) and 5 more — 188

HEROIN, HEROIN, MARIJUANA, HEROIN, MARIJUANA, METH and 9 more — 80

COCAINE, COCAINE, HEROIN, COCAINE, HEROIN, MARIJUANA, METH and 8 more — 28

CRACK, CRACK, COCAINE, HASHISH, HEROIN, MARIJUANA, CRACK, COCAINE, HEROIN, LSD, METH and 8 more — 19

LSD & LSD, OTHER HALLUCINOGENS — 3

OPIUM & OPIUM, METH, MEDICATION (PRESCRIPTION DRUGS) — 2

PCP & PCP, METH — 2

Other Type Of Substance Abuse

Alcohol & Other — 570

"CLOROX" BLEACH AND NYQUIL, "MOLLY", 100 PILLS OF TYLENOL, 75 APPROMIXLY PILLS OF SLEEP AID and 162 more — 214

UNKNOWN — 152

25
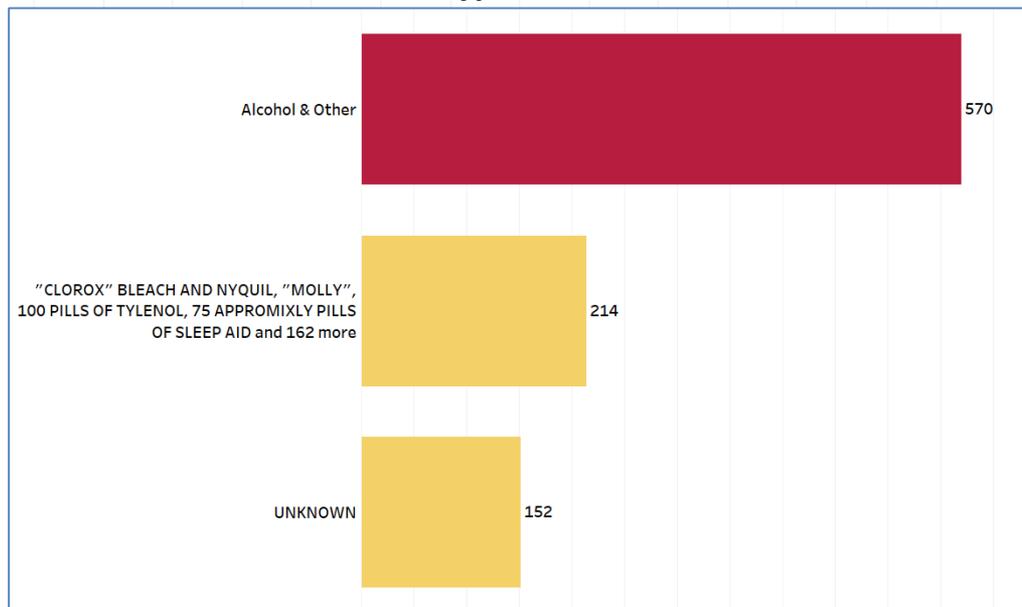
How Do We Think Smarter About Risk Factors?

Type Of Risk Recorded By Field Officers	Count	Percentage
SUICIDE THREAT	975	32.5%
NONE	715	23.8%
REQUIRES FOLLOW-UP	475	15.8%
SUICIDE ATTEMPT	412	13.7%
THREAT TO HARM SELF	227	7.6%
THREAT TO HARM OTHERS	168	5.6%
THREAT TO HARM POLICE	29	1.0%
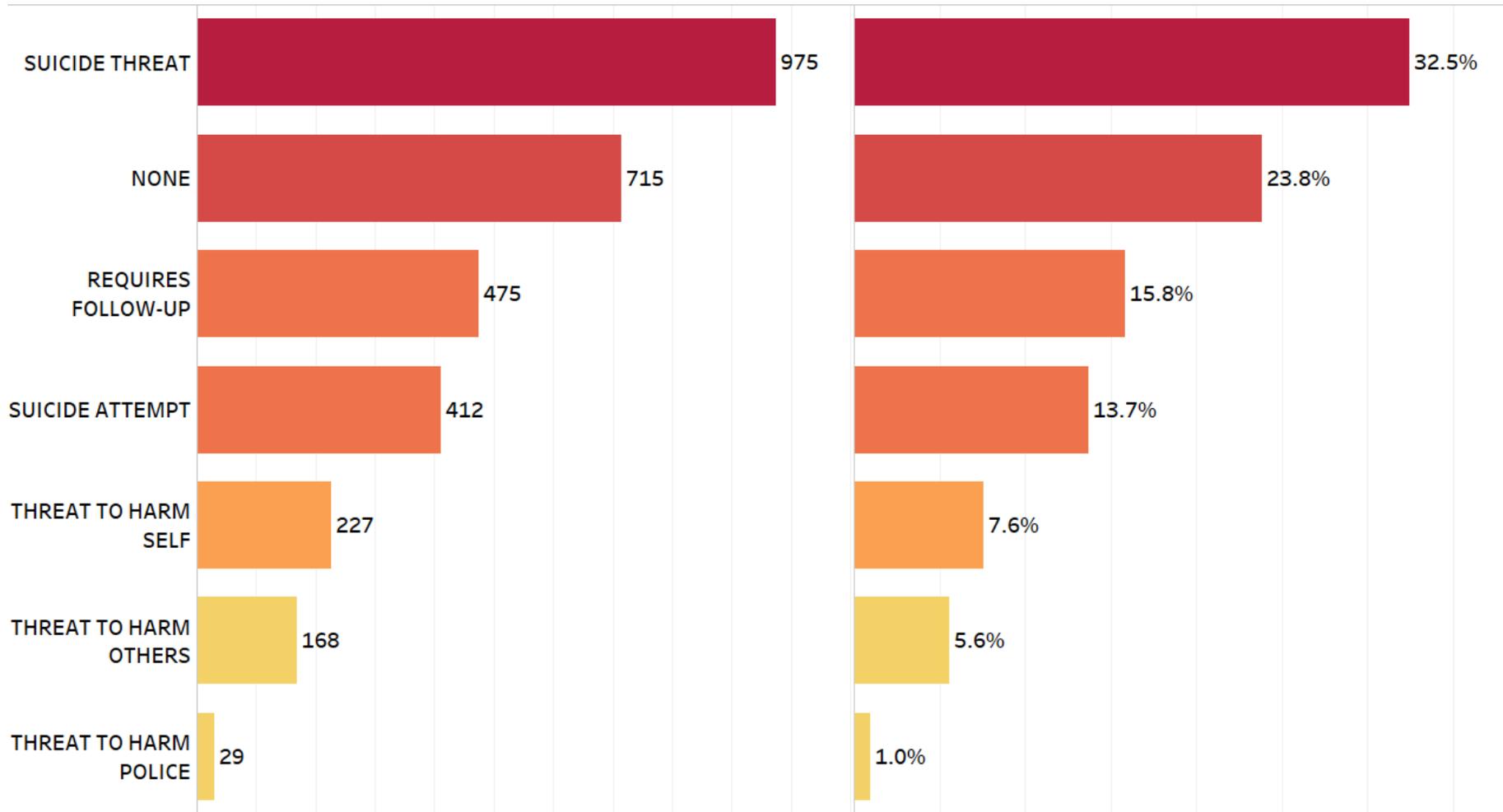
Type Of Risk Recorded By Field Officers

How Do We Think Smarter About Risk Factors?
A Hypothetical Analysis

# Encounters	Sex	Substance Use	Self Reported Mental Illnesses	Risk	Subject Armed	Weapons (group)
7	F	METH	Bipolar, Brain Injury, PTSD, Schizophrenia (Schizoaffective)	REQUIRES FOLLOW-UP	Yes	Blunt Object
			Bipolar, Depression, Schizophrenia (Schizoaffective)	THREAT TO HARM OTHERS	Yes	Knife / Cutting Instrument
2	F	HEROIN	Depression	THREAT TO HARM OTHERS	Yes	Firearm
1	M	UNKNOWN	Depression	SUICIDE THREAT	Yes	Firearm
2	M	METH	Schizophrenia (Schizoaffective)	THREAT TO HARM OTHERS	Yes	Firearm
1	F	UNKNOWN	Bipolar, Schizophrenia (Schizoaffective)	REQUIRES FOLLOW-UP	Yes	Knife / Cutting Instrument
26	F	UNKNOWN	Other (Describe in "Notes" below)	SUICIDE THREAT	Yes	Knife / Cutting Instrument
6	F	UNKNOWN	Bipolar, PTSD, Schizophrenia (Schizoaffective)	SUICIDE THREAT	Yes	Knife / Cutting Instrument
1	M	COCAINE, HEROIN, MARIJUANA..	Bipolar, Schizophrenia (Schizoaffective), Other (Describe in "..	THREAT TO HARM OTHERS	Yes	Knife / Cutting Instrument
1	F	METH	Depression	NONE	Yes	Knife / Cutting Instrument
1	M	HEROIN	Bipolar, PTSD, Schizophrenia (Schizoaffective)	NONE	Yes	Knife / Cutting Instrument
2	M	HEROIN	Bipolar	SUICIDE THREAT	Yes	Knife / Cutting Instrument
1	M	UNKNOWN	Other (Describe in "Notes" below)	THREAT TO HARM SELF	Yes	Knife / Cutting Instrument
1	F	HEROIN	Bipolar	SUICIDE THREAT	Yes	Knife / Cutting Instrument
2	M	METH, OTHER (CLICK ON OTHE..	Bipolar	SUICIDE THREAT	Yes	Knife / Cutting Instrument
8	M	UNKNOWN	Brain Injury	REQUIRES FOLLOW-UP	Yes	Other
2	M	UNKNOWN	Schizophrenia (Schizoaffective)	SUICIDE ATTEMPT	Yes	Knife / Cutting Instrument
2	M	UNKNOWN	Other (Describe in "Notes" below)	SUICIDE THREAT	Yes	Knife / Cutting Instrument
2	M	METH, OTHER DEPRESSANTS	PTSD	SUICIDE THREAT	Yes	Knife / Cutting Instrument
1	M	UNKNOWN	Schizophrenia (Schizoaffective)	THREAT TO HARM OTHERS	Yes	Other
2	F	METH	Depression	SUICIDE ATTEMPT	Yes	Knife / Cutting Instrument
1	F	HEROIN	PTSD, Schizophrenia (Schizoaffective), Other (Describe in "N..	REQUIRES FOLLOW-UP	Yes	Knife / Cutting Instrument
4	M	UNKNOWN	Depression	THREAT TO HARM SELF	Yes	Knife / Cutting Instrument
2	M	METH	Schizophrenia (Schizoaffective)	SUICIDE THREAT	Yes	Knife / Cutting Instrument
2	M	UNKNOWN	Schizophrenia (Schizoaffective)	THREAT TO HARM OTHERS	Yes	Unarmed
4	M	UNKNOWN	Depression	SUICIDE ATTEMPT	Yes	Knife / Cutting Instrument

What Factors Do We Use To Triage Through Thousands Of Reports And Get The Right Response To The Right Individuals?

How Do We Think Smarter About Contacts With Individuals Who Are Homeless?

	No	Unk	Yes
CIU	363	1	49
COAST	201	1	341
Field Officers	2,552	120	336
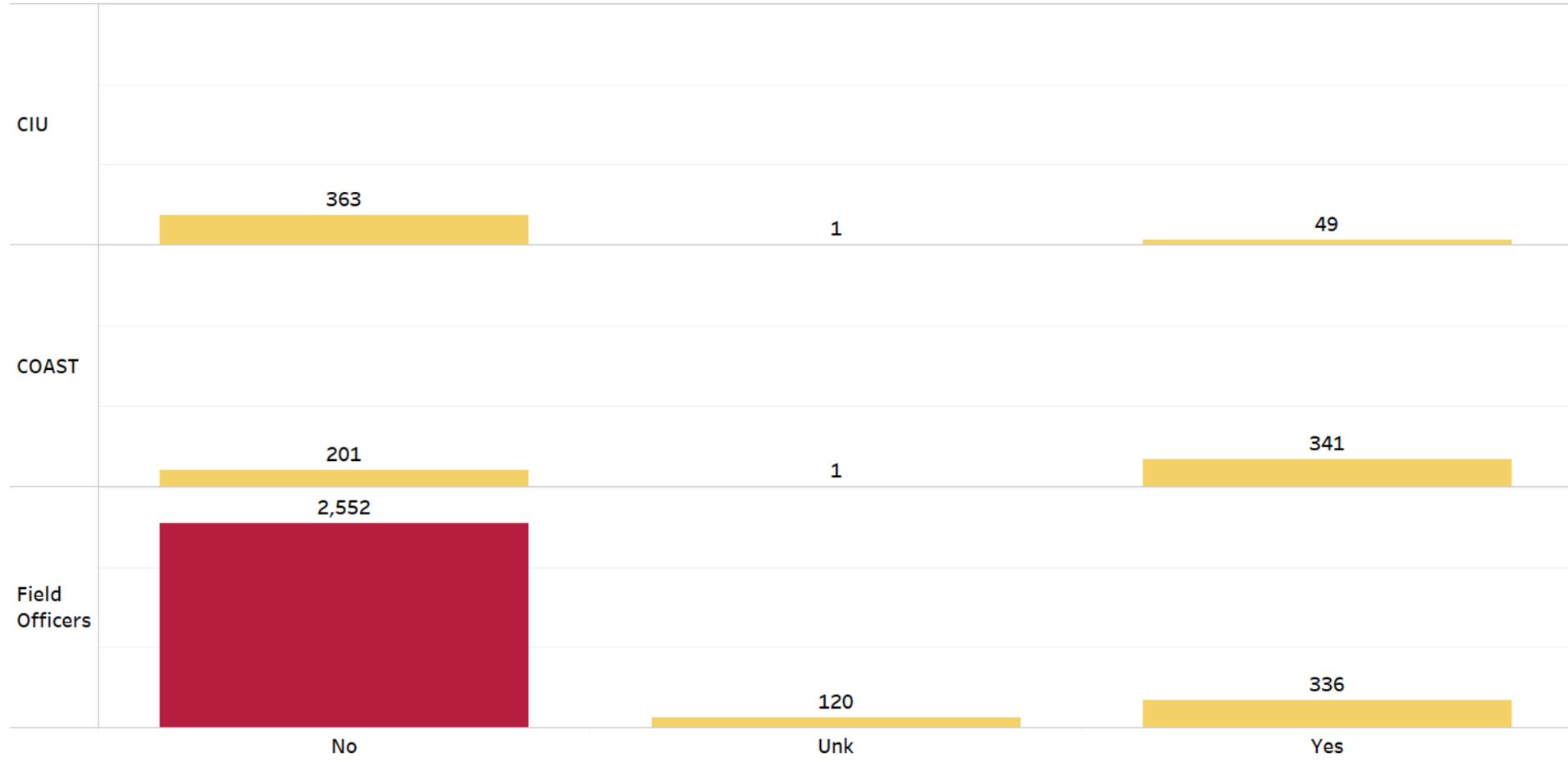
Homeless Victims Comprised A High Percentage Of The 75 Murders In Albuquerque In 2017

Mean and deadly streets for homeless people

By Elise Kaplan / Journal Staff Writer
Published: Thursday, December 21st, 2017 at 4:53pm
Updated: Thursday, December 21st, 2017 at 11:25pm

Patrick Williams holds a candle as the names of homeless people who died in 2017 are read during the Albuquerque Homeless Persons' Memorial Vigil at The Rock at NoonDay on Thursday. Williams was remembering his younger brother Christopher Linn Williams. "He was a wanderer of the world," Williams said of his brother. (Marla Brose/Albuquerque Journal)

Body found in Four Hills area

By Matthew Reisen / Journal Staff Writer
Published: Saturday, December 23rd, 2017 at 3:32pm
Updated: Saturday, December 23rd, 2017 at 11:02pm

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Police investigate the scene where a body was found with "massive trauma" in Four Hills on Saturday around noon (Marla Brose/Albuquerque Journal)

More than a dozen of this year's 72 murder victims in Albuquerque were reportedly homeless when they were killed – living on the streets, in motels or in other unstable situations around the city.

Sgt. Elizabeth Thomson with the Albuquerque Police Department, said the total of 14 makes up a slightly higher percentage than in 2016, when 11 of the 61 murder victims were homeless.

However, she said, detectives are investigating whether one person, or a group of people, killed three of the 2017 victims, men who were found stabbed to death and in similar positions earlier this year.

She said the other 11 homicides don't appear to be related.

"We always have a number of people who were homeless who are included in our number of people who were murdered," Thomson said. "They are definitely victimized at a higher rate than the general population."

2008-2014, United States
Death Rates per 100,000 Population
All Injury, Suicide, All Races, All Ethnicities, Both Sexes, All Ages
Annualized Crude Rate for United States: 12.63

⊠ Suppressed/Unstable/Undefined	☐ 0.00-11.60	☐ 11.61-14.70
☐ 14.71-18.82	☐ 18.83-87.46	
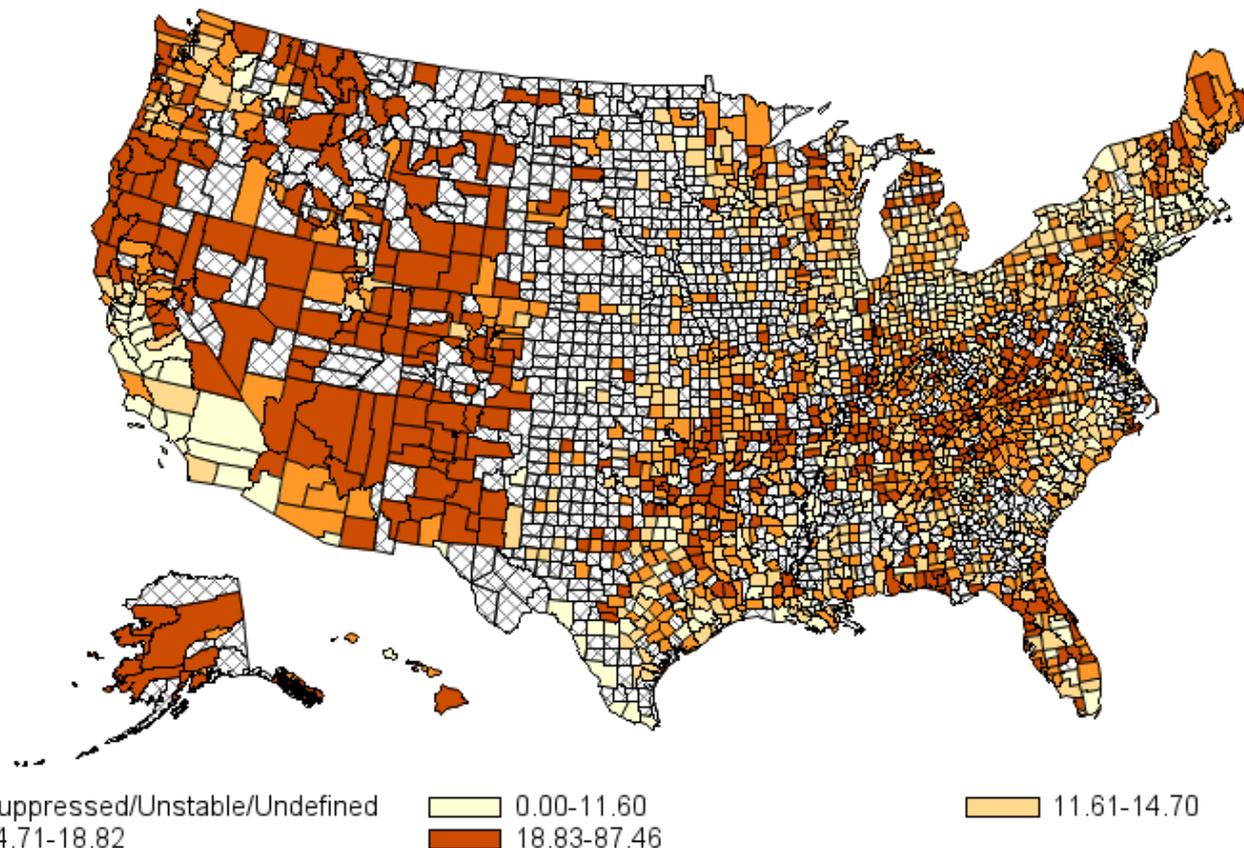
Reports for All Ages include those of unknown age.
* Rates based on 20 or fewer deaths may be unstable. These rates are suppressed for counties (see legend above); such rates in the title have an asterisk.

Produced by: the Statistics, Programming & Economics Branch, National Center for Injury Prevention & Control, CDC
Data Sources: NCES National Vital Statistics System for numbers of deaths; US Census Bureau for population estimates.

Suicide Deaths By Year, New Mexico And The United States 1995-2016
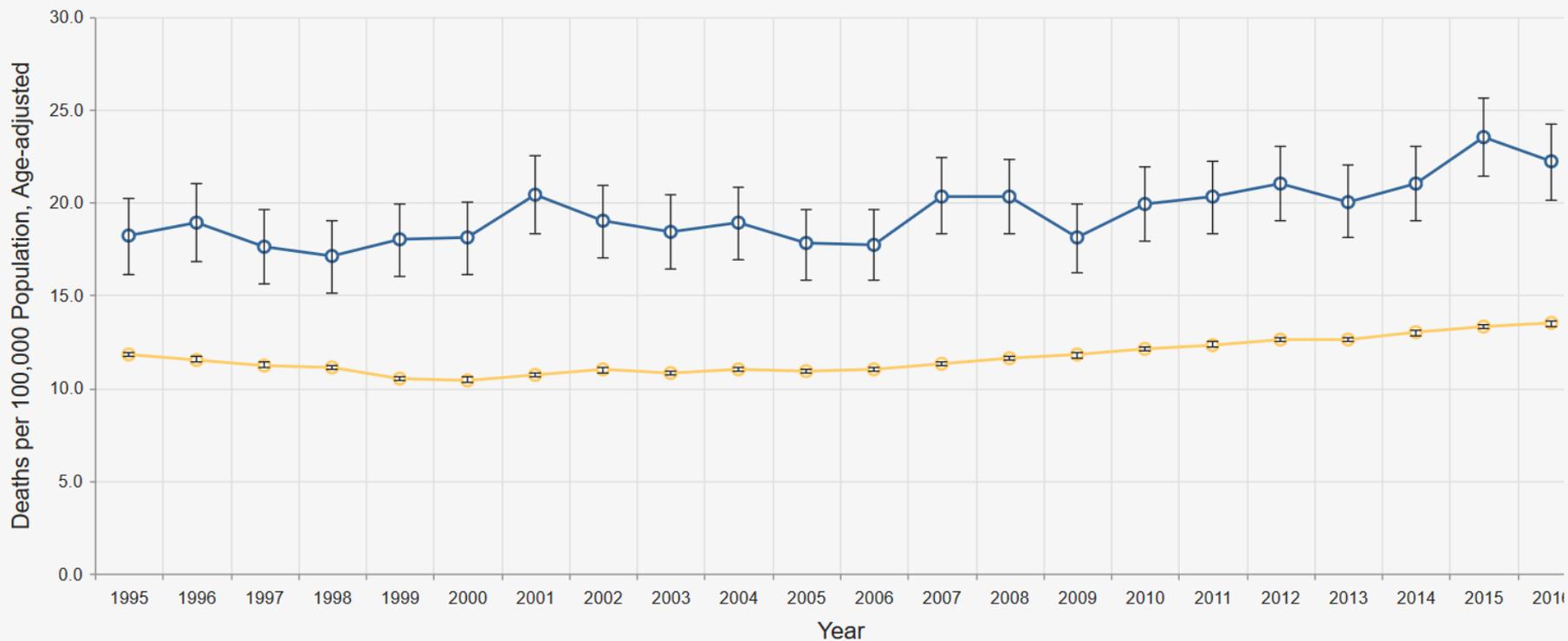
Since 1995, NM suicide rates have been consistently 1.5 times higher than national rates. Since 2006, suicide deaths increased in NM by about 25% compared to a 23% increase in the U.S.

Source: https://ibis.health.state.nm.us/indicator/view/SuicDeath.Year.NM_US.html

Preventing Suicide Among Veterans

The Veteran Status, Age And Gender Of The People Involved In BH–Related CADs With Field Officers Between November 1, 2017 And February 22, 2018
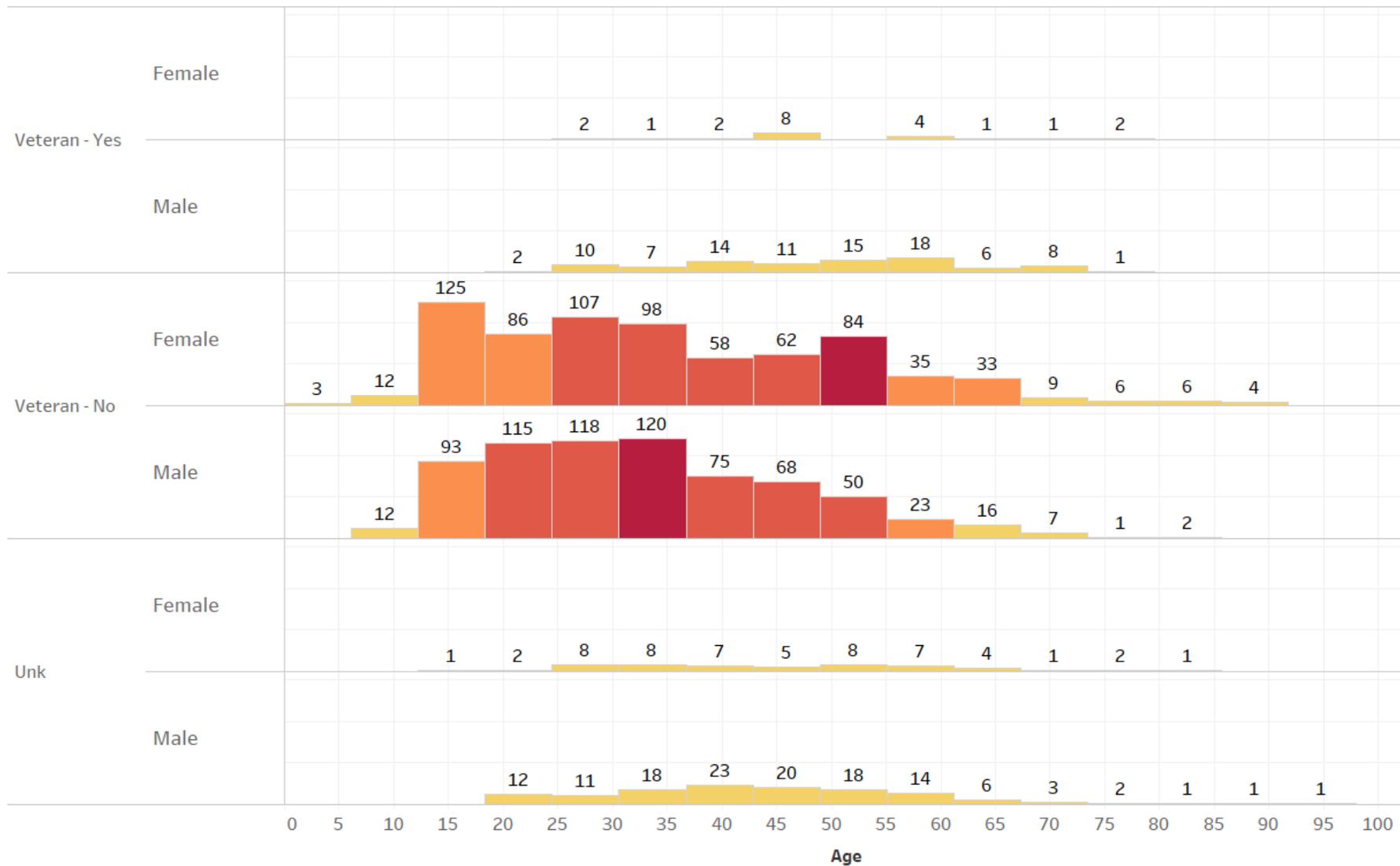
The 156 Cases Of Suicide By Month And Year
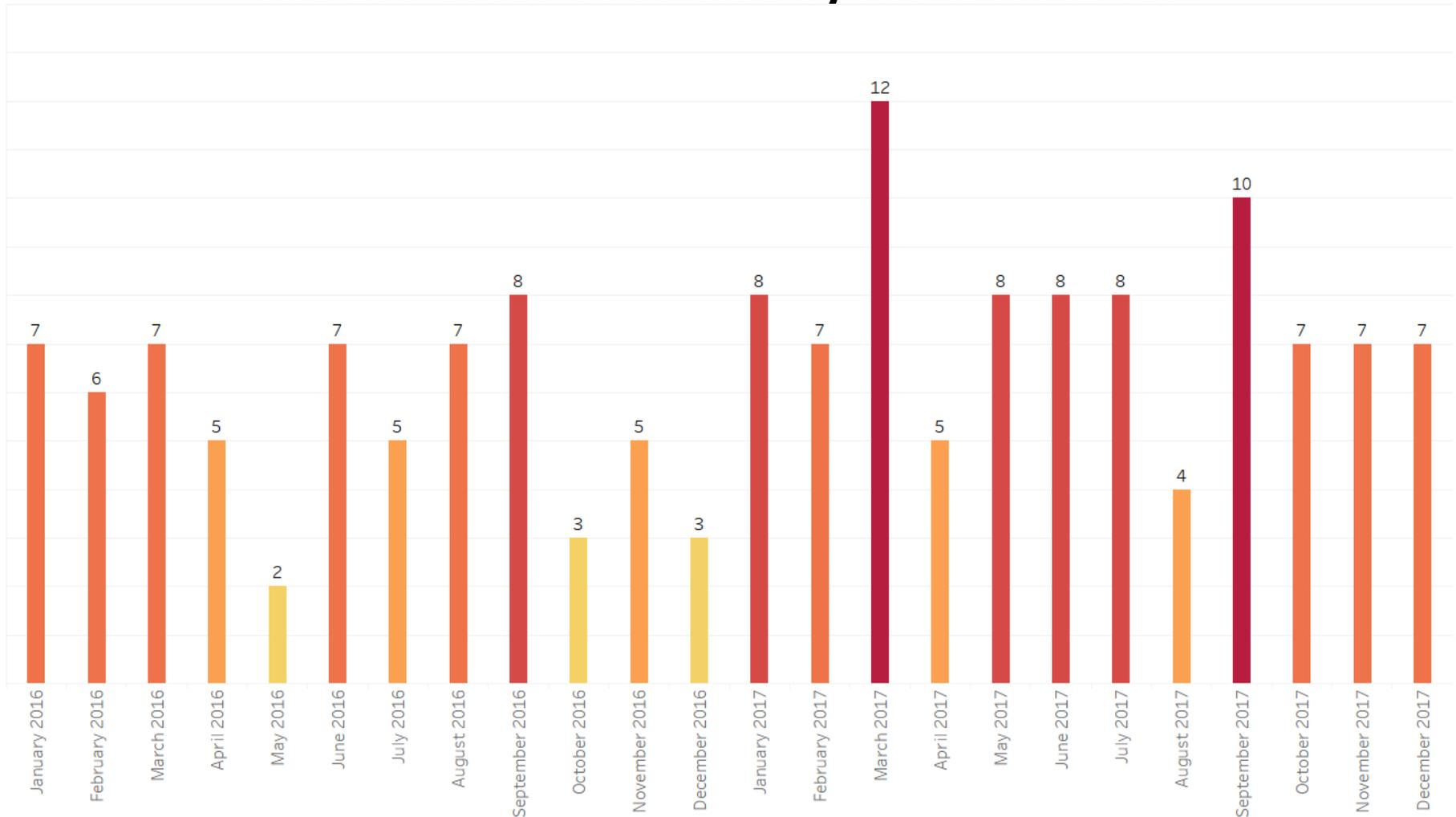
The data used in this analyses includes 156 cases of completed suicide that occurred between January 2016 and December of 2017. APD officers responded to these incidents and completed State Of New Mexico Uniform Incident Reports.

The 156 Cases Of Suicide By Veteran Status And Gender
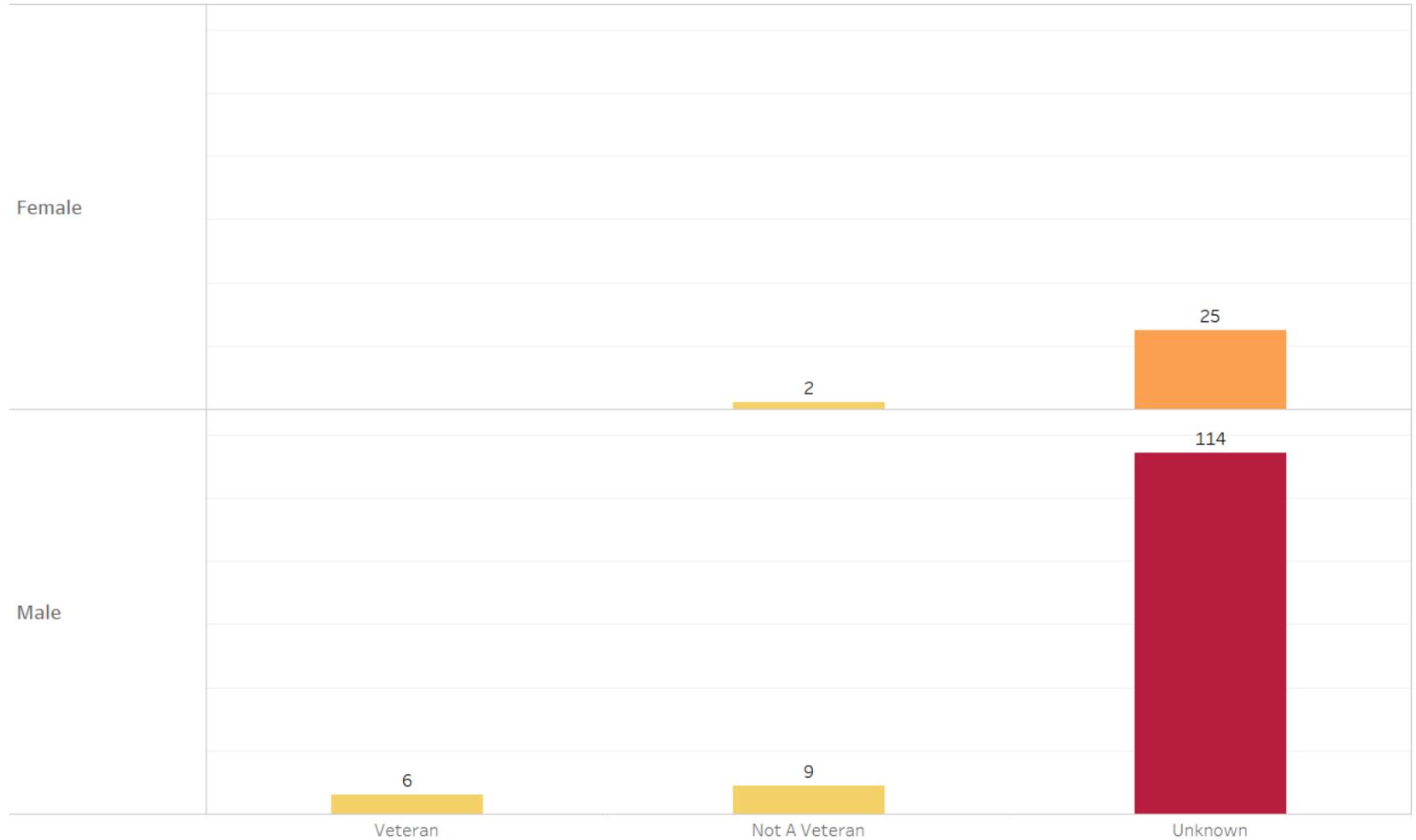
The 156 Cases Of Suicide By Veteran Status, Age, Race And Ethnicity
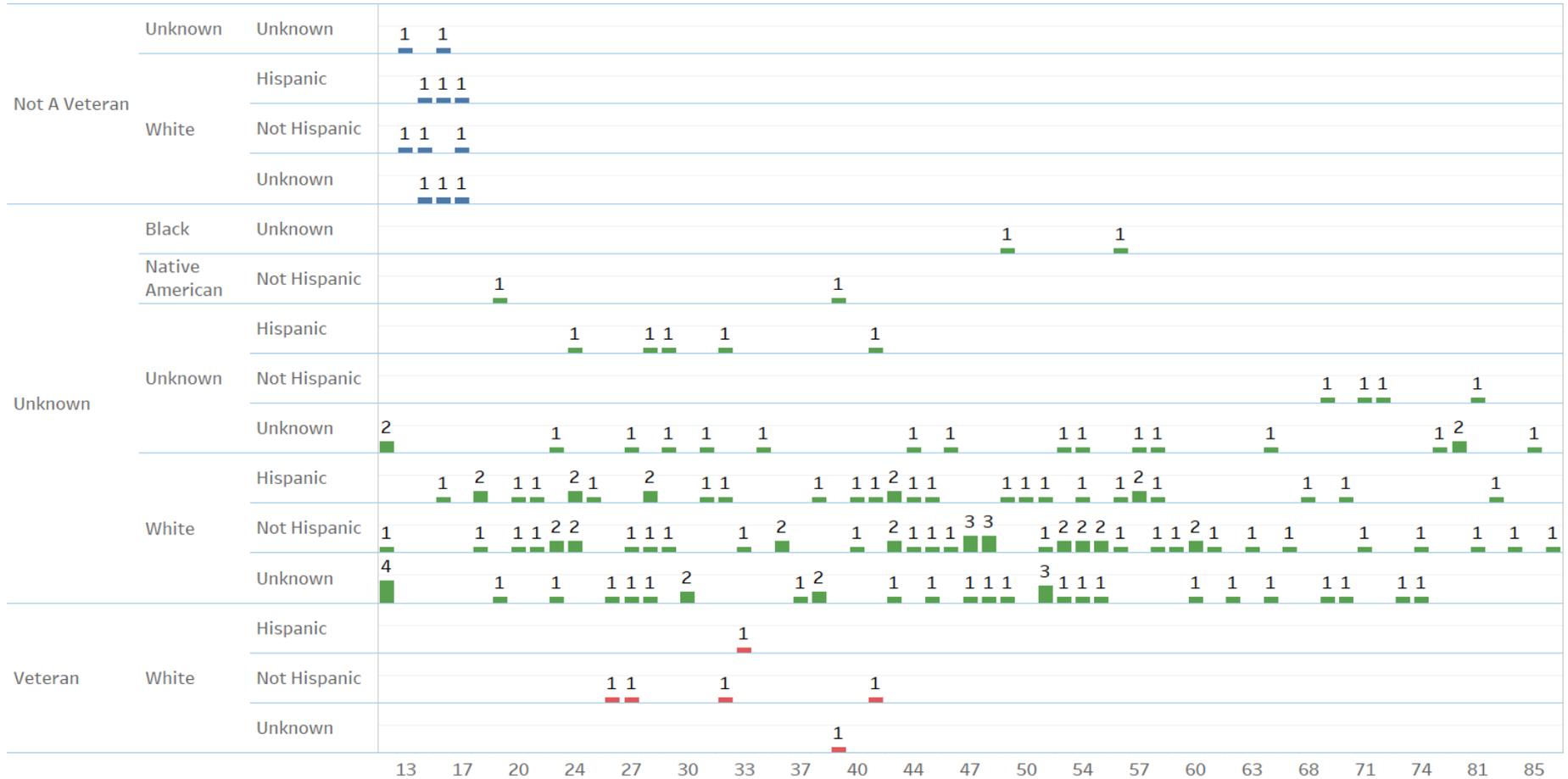
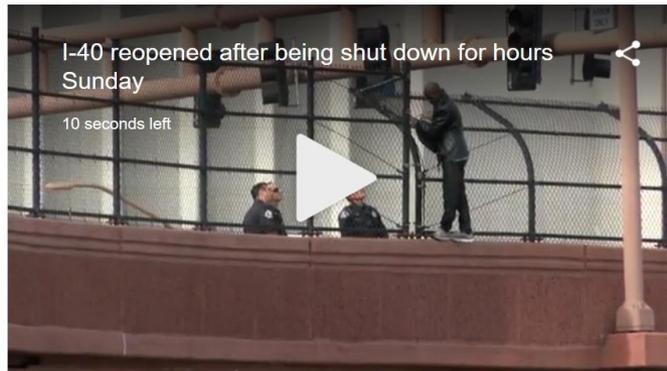Police: Man that threatened to jump from overpass is consistent offender

Individuals Who Threatened To Commit Suicide By Jumping Off Bridges Or Structure

I-40 reopens Monday after 12hr shut down

By: KRQE Media
Updated: Feb 04, 2018 12:00 PM MST

ALBUQUERQUE, N.M. (KRQE) - I-40 was shut down for more than 12 hours Sunday after an individual threatened to jump off the Louisiana overpass. All eastbound lanes have since been reopened.

APD: Person jumped to death from Louisiana onto I 40

By Elise Kaplan / Journal Staff Writer
Wednesday, February 21st, 2018 at 10:41am

Traffic slows on eastbound Interstate 40 at Louisiana after a person jumped to their death Wednesday morning. (Adolphe Pierre-Louis / Albuquerque Journal)

ALBUQUERQUE, N.M. — A person jumped to their death from the Louisiana overpass onto Interstate 40 Wednesday morning, according to a spokesman for the Albuquerque Police Department.

358 CAD's Involving Individuals Who Threatened To Commit Suicide By Jumping Off Bridges Or Structure From 2015 To 2017
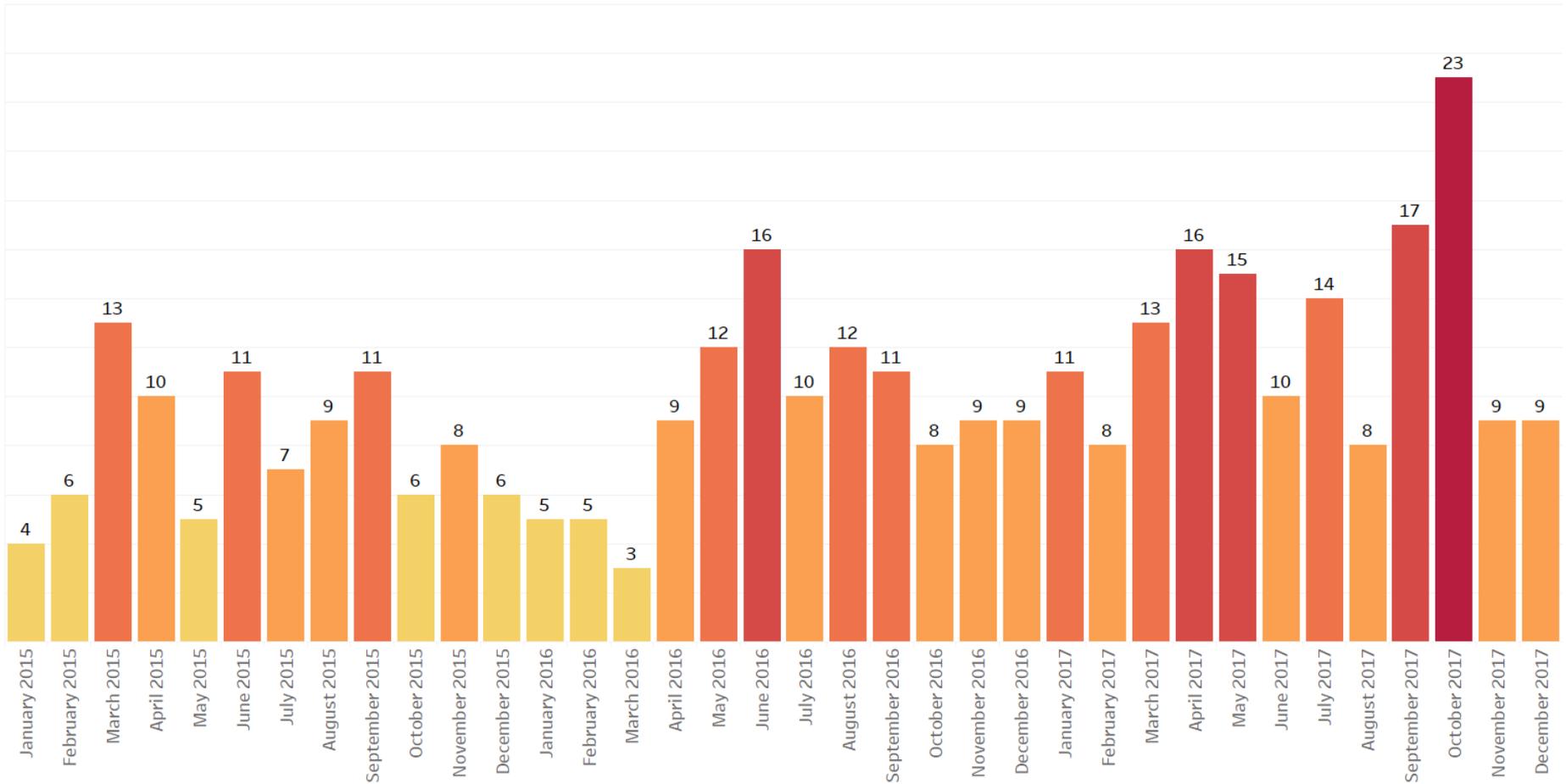
The Age and Gender Of Individuals Who Threatened To Commit Suicide By Jumping Off Bridges Or Structure From 2015 To 2017
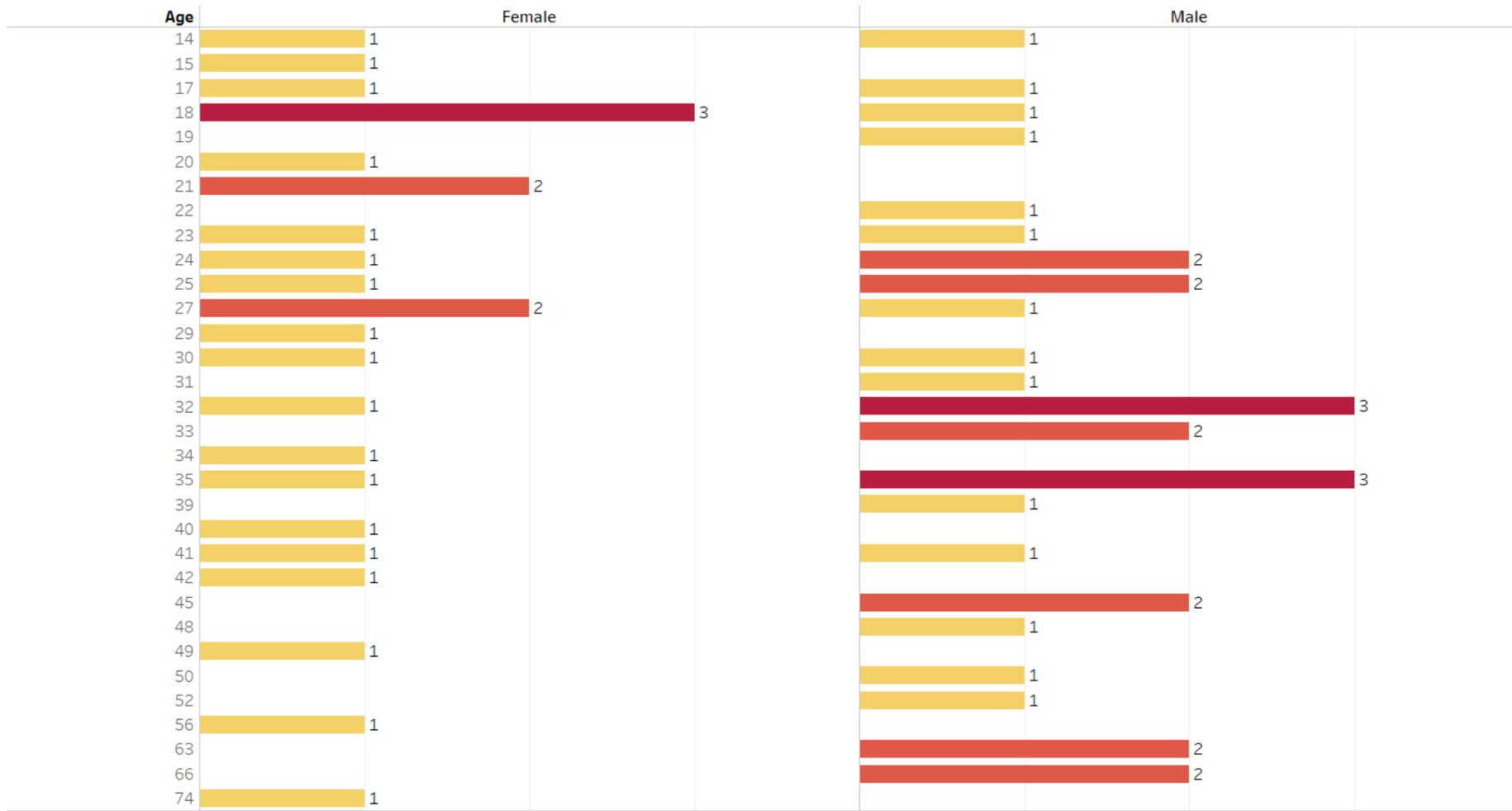
This Is Preliminary Data Based On 57 Cases

How Do We Get Smarter?
How Do We Get More Effective?