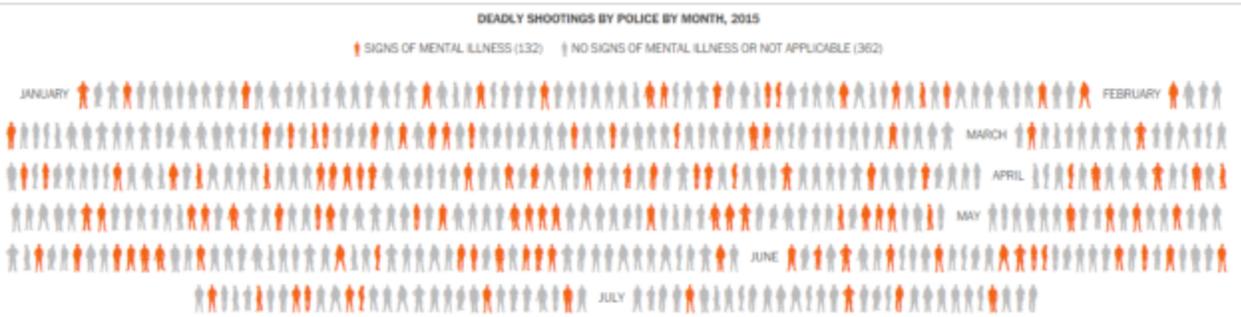


DISTRAUGHT PEOPLE, DEADLY RESULTS

Officers often lack the training to approach the mentally unstable, experts say



Wesley Lowery, Kimberly Kindy, Keith L. Alexander: July 5, 2015

It was not yet 9 a.m., and Gary Page was drunk. The disabled handyman had a long history of schizophrenia and depression and, since his wife died in February, he had been struggling to hold his life together.

That bright Saturday morning in March, something snapped. Page, 60, slit his wrists, grabbed a gun and climbed the stairs to his stepdaughter’s place in the Pines Apartments in Harmony, Ind. He said he wanted to die. And then he called 911.

About this story:

The Washington Post is compiling a database of every fatal shooting in the United States by a police officer in the line of duty in 2015.

The Post is tracking more than a dozen details about each killing — including the race of the deceased, the circumstances of the shooting, and whether the person was armed — by culling local news reports and monitoring independent databases, such as Killed by Police and Fatal Encounters. In some cases, The Post conducted additional reporting.

The Post is documenting only shootings in which a police officer, while on duty, shot and killed a civilian — circumstances that most closely parallel the 2014 killing of Michael Brown in Ferguson, Mo. The Post is not tracking deaths of people in custody, fatal shootings by off-duty officers, or deaths in which police gunfire did not kill the individual.

The FBI and the Centers for Disease Control and Prevention log fatal shootings by police, but officials acknowledge that their data is incomplete.

The Post database will be updated regularly as new fatal shootings are reported and as new facts emerge about individual cases. The Post is seeking assistance in making the database as comprehensive as possible. To provide information about fatal police shootings in 2015, send us an e-mail at policeshootingsfeedback@washpost.com. The Post is also interested in obtaining photos of the deceased and original videos of fatal encounters with police.

"I want to shoot the cops," Page slurred to the dispatcher, prodding his stepdaughter to confirm that, yes, he had a gun. "I want them to shoot me."

Minutes later, Page's death wish was granted. Two Clay County sheriff's deputies arrived to find that he had taken a neighbor hostage. They opened fire, striking him five times in the torso and once in the head. Page's gun later turned out to be a starter pistol, loaded only with blanks. His threats of violence turned out to be equally empty, the product of emotional instability and agonizing despair.

Nationwide, police have shot and killed 124 people this year who, like Page, were in the throes of mental or emotional crisis, according to a Washington Post analysis. The dead account for a quarter of the 462 people shot to death by police in the first six months of 2015.

The vast majority were armed, but in most cases, the police officers who shot them were not responding to reports of a crime. More often, the police officers were called by relatives, neighbors or other bystanders worried that a mentally fragile person was behaving erratically, reports show. More than 50 people were explicitly suicidal.

More than half the killings involved police agencies that have not provided their officers with state-of-the-art training to deal with the mentally ill. And in many cases, officers responded with tactics that quickly made a volatile situation even more dangerous.

The Post analysis provides for the first time a national, real-time tally of the shooting deaths of mentally distraught individuals at the hands of law enforcement. Criminal-justice experts say that police are often ill equipped to respond to such individuals — and that the encounters too often end in needless violence.

"This a national crisis," said Chuck Wexler, executive director of the Police Executive Research Forum, an independent research organization devoted to improving policing. "We have to get American police to rethink how they handle encounters with the mentally ill. Training has to change."

As a debate rages over the use of deadly force by police, particularly against minorities, The Post is tracking every fatal shooting by a police officer acting in the line of duty in 2015. Reporters are culling news reports, public records and other open sources on the Internet to log more than a dozen factors about each case, including the age and race of the victim, whether the victim was armed and the circumstances that led to the fatal encounter.

The FBI also logs fatal police shootings, but officials acknowledge that their data is far from complete. In the past four decades, the FBI has never recorded more than 460 fatal shootings in a single year. The Post hit that number in less than six months.

For this article, The Post analyzed 124 killings in which the mental health of the victim appeared to play a role, either because the person expressed suicidal intentions or because police or family members confirmed a history of mental illness. This approach likely understates the scope of the problem, experts said.

In many ways, this subset mirrors the overall population of police shooting victims: They were overwhelmingly men, more than half of them white. Nine in 10 were armed with some kind of weapon, and most died close to home.

But there were also important distinctions. This group was more likely to wield a weapon less lethal than a firearm. Six had toy guns; 3 in 10 carried a blade, such as a knife or a machete — weapons that rarely prove deadly to police officers. According to data maintained by the FBI and other organizations, only three officers have been killed with an edged weapon in the past decade.

Police officers experience fewer deaths these days — but increased tension

Thousands dead, few prosecuted: An analysis of fatal shootings by on-duty police officers



Fatal police shootings in 2015 approaching 400 nationwide

Nearly a dozen of the mentally distraught people killed were military veterans, many of them suffering from post-traumatic stress disorder as a result of their service, according to police or family members. Another was a former California Highway Patrol officer who had been forced into retirement after enduring a severe beating during a traffic stop that left him suffering from depression and PTSD.

And in 45 cases, police were called to help someone get medical treatment, or after the person had tried and failed to get treatment on his own.

In January, for instance, Jonathan Guillory, a white 32-year-old father of two who had worked as a military contractor in Afghanistan, was having what his widow called a mental health emergency. He sought help at a Veterans Affairs hospital in Arizona, his wife, Maria Garcia, told local reporters, but the busy hospital turned him away. Jean Schaefer, a spokeswoman for the Veterans Health Administration in Phoenix, said the hospital had no record of Guillory's visit.

Back home, Guillory dialed 911 twice and hung up. When police responded, he pulled a gun from his waistband and said, "I bet I can outdraw you," according to Maricopa police spokesman Ricardo Alvarado. They shot him six times.

The dead range in age from 15 to 86. At both ends of that spectrum, the victim was male, suicidal and armed with a gun. On average, police shot and killed someone who was in mental crisis every 36 hours in the first six months of this year. On April 25, three mentally ill men were gunned down within 10 hours.

That afternoon, David Felix, a 24-year-old black man with schizophrenia, was killed by police in the New York apartment building where he lived with other men undergoing treatment for mental health problems, according to police reports. Police said he struck two officers with a heavy police radio after they tried to serve him with a warrant for allegedly punching a friend in the face and stealing her purse.

Two hours later, sheriff's deputies in Clermont, Fla., fatally shot Daniel Davis, a 58-year-old white man who had recently been released from a mental health facility, according to police reports. Police say he threatened his stepfather and then a deputy with a hunting knife.

And shortly before midnight, police in Victoria, Tex., shot Brandon Lawrence, a 25-year-old white man, a father of two toddlers and an Afghanistan war veteran who suffered from PTSD. Police officers said Lawrence approached them in an "aggressive manner" with a two-foot-long machete. They said they ordered him to drop it more than 30 times.

Lawrence's wife and another witness have disputed aspects of that account, saying that Lawrence, while armed, was not advancing and was obviously not in his right mind. Convinced someone was coming to kill him, Lawrence repeatedly asked police officers who they were and what they wanted, his wife said.

"He was clearly confused . . . but they didn't try to talk to him," said Lawrence's father, Bryon Lawrence, who works as an Illinois state prison guard.

"Everyone I work with is a convicted felon; I can't just go up to them and shoot them," Bryon Lawrence said. "My boy is 25 years old, working 50 hours a week, paying taxes. He was in his own home when they showed up.

"Within six minutes, they murdered him."

Victoria police declined to comment, citing the ongoing investigation.

Officer Involved: Police shootings of the mentally unstable in America

A Washington Post investigation tracking all fatal shootings by the police in 2015 has found that nearly a quarter of the incidents involve a person who was mentally unstable. Lavall Hall, a 25-year-old man from Miami Gardens, Fla., was gunned down in his mother's front yard.

Police increasingly acknowledge that they have few effective tools for handling the mentally ill. In interviews, current and former police chiefs said that without large-scale police retraining, as well as a nationwide increase in mental health services, these deadly encounters will continue.

Severe budget cuts for psychiatric services — by as much as 30 percent in some states in recent years — have created a vacuum that local police are increasingly asked to fill, they said.

"We as a society need to put more money and funding into treating the mentally ill. We need to work with these people . . . before they end in tragedy," said Mike Carter, the police chief in Sand Springs, Okla., where officers in April shot and killed a 66-year-old white Vietnam veteran with PTSD. The man, Donald Allen, grew agitated after officers asked him to stop firing a gun in his back yard

Fatal police shooting in Sand Springs, Okla.

Body camera video of a Sand Springs Police Department officer-involved shooting on April 11, 2015. Editor's note: This video contains explicit language.

So far, police departments generally have not risen to the challenge. Although new recruits typically spend nearly 60 hours learning to handle a gun, according to a recent survey by the Police Executive Research Forum, they receive only eight hours of training to de-escalate tense situations and eight hours learning strategies for handling the mentally ill.

Otherwise, police are taught to employ tactics that tend to be counterproductive in such encounters, experts said. For example, most officers are trained to seize control when dealing with an armed suspect, often through stern, shouted commands.

But yelling and pointing guns is “like pouring gasoline on a fire when you do that with the mentally ill,” said Ron Honberg, policy director with the National Alliance on Mental Illness.

Sandy Jo MacArthur is an assistant chief who oversees “mental response teams” for the Los Angeles Police Department, a program considered to be a national model. MacArthur said her officers are trained to embrace tactics that may seem counterintuitive. Instead of rushing to take someone into custody, they try to slow things down and persuade the person to come with them. When possible, a psychologist or psychiatrist is on the scene.

The mentally ill “do not process what is happening like a normal criminal,” MacArthur said. “There’s a lot of white noise in their head.”

On the day he died in April, Daniel Covarrubias was taking powerful painkillers for a broken collarbone, hadn’t eaten for days and was hallucinating. The 37-year-old Native American and Latino had gone to St. Clare Hospital near Tacoma, Wash., “to get the cameras out of his eyes,” according to Ben Barcus, attorney for the Covarrubias family.



On the day he died, Daniel Covarrubias was hallucinating. He climbed a pile of lumber after hearing sirens, and an ensuing standoff with police turned fatal.

Covarrubias, who had a history of depression and drug addiction, was treated for “substance/medication induced psychotic disorder,” according to medical records obtained by the police. Five hours later, he was released “in stable condition,” according to hospital spokesman Scott Thompson.

As Covarrubias walked home, police sirens began blaring behind him. For reasons that are unclear, Covarrubias dashed into Pinnacle Lumber and Plywood, scaled a 25-foot-tall stack of wood and crouched to hide, police records show.

His mother, Marilyn Covarrubias, speculates that he may have believed the police were after him. “I think he thought the sirens were for him,” she said.

Alarmed lumberyard employees thought so, too, and called police to report a man hiding on the property. Within minutes, two Lakewood, Wash., police officers were standing at the base of the lumber stack, shouting up at Covarrubias to “show your hands.”

What happened next is in dispute. Lakewood Police Chief Mike Zaro has said Covarrubias “raised up with a dark object in his hand and pointed it at the officers in a manner that was consistent with pointing a firearm.” Barcus said lumberyard employees “didn’t see pointing.” Managers at Pinnacle Lumber declined to comment. In any case, police opened fire, hitting Covarrubias five times, including once in the head, according to Barcus. The dark object in his hand turned out to be a cellphone.

Barcus criticized the officers’ failure “to de-escalate this situation.”

“They arrived at the lumberyard, and six minutes later Covarrubias was dead,” Barcus said. “It doesn’t appear they know how to deal with the mentally ill.”

Lakewood police spokesman Chris Lawler said that the department works with mental health experts and that both officers involved in the shooting had received training to handle such encounters.

He declined to comment further, saying the investigation was still pending.

LOCATIONS OF DEADLY SHOOTINGS, 2015

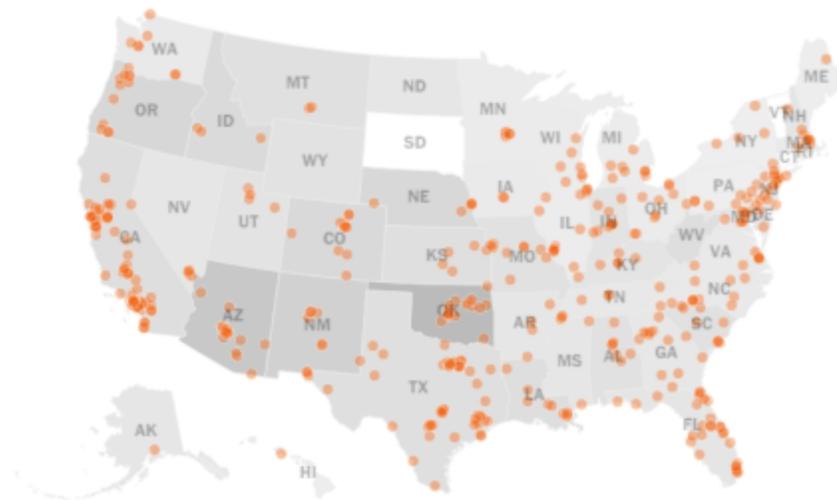
Locations of the shootings

Each ● marks the location of a deadly shooting. ☞ Click on a state to zoom in.

SHOOTING DEATHS PER MILLION RESIDENTS

0.6 5.4

Note: 46 shootings with unverified locations are not shown on the map.



Note: 46 shootings with unverified locations are not shown on the map.

One of the youngest shooting victims was Kristiana Coignard, a 17-year-old white girl who walked out of the darkness one evening in January and into the empty lobby of a Longview, Tex., police station. In her waistband, she had a knife. And on her palm, she had written the words: “I have a gun.”

Coignard did not have a gun, nor any clear reason for going to the station that night. Her case underscores a central difficulty for police encountering a mentally ill person: It can be almost impossible to determine intent, or judge capacity to inflict harm.

Coignard appeared to pose a threat, but unlike someone committing a robbery, her intentions were obscure. Kristiana Coignard entered a police station with a knife and obscure intentions. She was shot during a scuffle.



Since the age of 12, Coignard had displayed signs of mental illness; she regularly took medication for depression and bipolar disorder, according to her father, Erik Coignard. She dropped out of high school a year before graduation, but she later obtained a GED and had plans to attend college.

“She wanted to be a counselor in the mental health area because she said she felt that they failed her,” said her stepmother, Elizabeth Coignard.

On the day she died, Kristiana Coignard met with the counselor she had seen for years. She entered the police station shortly before 6:30 p.m.

In a video released by Longview police, Coignard at first seems hesitant. She wanders in, checks her mobile phone, then approaches a phone on the far wall that connects to dispatch. After a minute or so, she picks up the receiver and asks to speak to an officer.

Fatal police shooting in Longview, Tex.

Surveillance video of a Longview Police Department officer-involved shooting on Jan. 22, 2015. Editor's note: This video contains no audio.

An officer arrives and addresses Coignard, who appears to show him her palm. The officer struggles with the teen, forcing her into a chair, then down to the ground. She reaches for the knife, and the officer draws his gun.

As two more officers arrive, Coignard stands and charges at the first officer, who opens fire. Coignard falls to the floor, struck four times.

As colleagues comfort the officer, paramedics arrive, perform CPR on Coignard and carry her body away on a stretcher.

Longview Police Chief Don Dingle has defended the officers' actions. The video shows “time was a factor,” Dingle told reporters. “There was no time for the officers to use other means.”

Coignard's parents strongly disagree. Though they are baffled by their daughter's actions that day — was it a suicide attempt? — they don't understand why three officers couldn't subdue their slight, teenage daughter without resorting to deadly force.

Whatever her motives, “she should still be here,” Erik Coignard said. “She was asking for help, and she was failed when that officer failed to take control of the situation. . . . This shouldn't have ended this way.”

Mental health experts say most police departments need to quadruple the amount of training that recruits receive for dealing with the mentally ill, requiring as much time in the crisis-intervention classroom as police currently spend on the shooting range. But training is no panacea, experts caution.

The mentally ill are unpredictable. Moreover, police often have no way of knowing when they are dealing with a mentally ill person. Officers are routinely dispatched with information that is incomplete or wrong. And in a handful of cases this year, police were prodded to shoot someone who wanted to die.

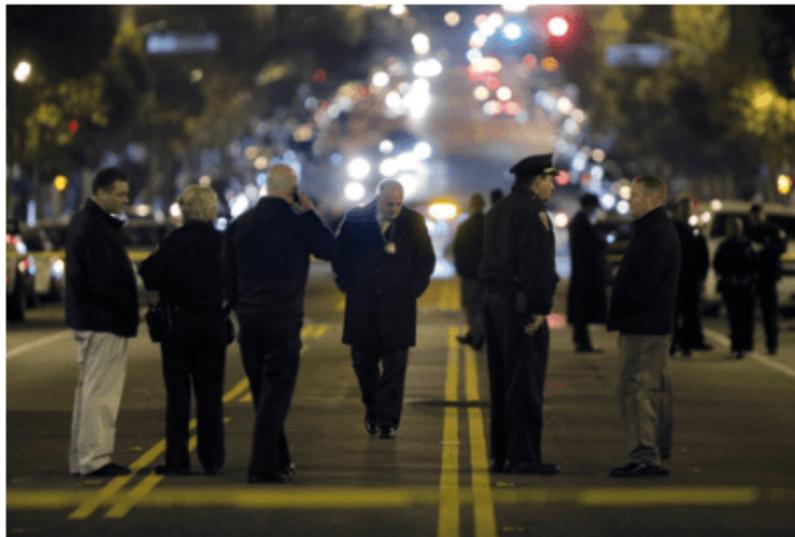
That was the case with Matthew Hoffman, a 32-year-old white man who had long struggled with mental illness, according to family members. After breaking up with his girlfriend, Hoffman walked up to San Francisco police officers in January outside a police station in the bustling Mission District. He pulled a gun from his waistband, pointed it at the officers and advanced in silence.

The startled officers fired 10 shots, three of which struck Hoffman. They later discovered that his weapon was a BB gun. And they found a note on his mobile phone, addressed to the officers who shot him.

"You did nothing wrong," it said. "You ended the life of a man who was too much of a coward to do it himself."

Grace Gatpandan, San Francisco Police Department spokeswoman, said the department offers crisis-intervention training. But those classes are designed primarily to teach officers to handle someone threatening to jump off a bridge, not someone pointing a gun in a crowded tourist area.

"When officers are faced with a deadly situation, when there is a gun pointed at a cop, there is no time to go into mental health measures," Gatpandan said. "There was nothing we could have done. This is one of those tragedies."



Police investigate a fatal Jan. 4 shooting in San Francisco's Mission District. After breaking up with his girlfriend, Matthew Hoffman pointed a gun at officers outside a police station. He was shot three times.

In the region around Harmony, Ind., few local police agencies have the money for crisis-intervention training, said attorney Craig McKee, who represents the Clay County Sheriff's Office. The deputies who responded to Gary Page's call had not received such training, he said.

"They need help from professionals to prepare them for this," McKee said. "Society is not necessarily handling mental health issues well, so the number of encounters like this is escalating."

But Clay County Sheriff Paul Harden said he is not sure any amount of training would have helped his deputies that day.

"No officer I know wants to be involved in an incident like this," Harden said in a written statement. "Even when I am confident that we handled the situation the right way, as I do here, it can't help but shake people."

Family members still wipe away tears when discussing Page's death. But his sister-in-law, Nyla Young, said they do not blame police.

"I pray every night for the officer who had to make that decision, because they didn't go to work that day and want to have to make that decision," Young said. "Gary made them make that decision. Gary wanted to die. And Gary got what he wanted that day."

Page, who was white, married Young's sister Hester in 1997, and the two were inseparable, she said. When Hester got sick about six years ago, Page became her primary caregiver. He had stopped working after securing disability payments for a back injury. So he was able to take her to doctor's appointments, bathe and dress her, and carry her from their bed to their living room to watch TV.

In February, Hester slipped into a coma and died. Her death crushed Page, Young said. He had vowed to keep her alive and had devoted years to that mission. Now, he was alone.

A week before the shooting, Page called Young and asked her to pick up her sister's ashes, a move she now regrets.

"That was probably the final straw," Young said. "He wasn't taking care of her ashes any longer, so he had nothing left to live for."



An encounter inside the Pine Apartments outside Harmony, Ind., escalated into tragedy in March after an intoxicated Gary Page summoned deputies by calling 911. "Gary made them make that decision," said Page's sister-in-law, Nyla Young. "Gary wanted to die."

Page lived in the Pines Apartments, downstairs from his stepdaughter. With police on the way, a neighbor unaware of the unfolding drama emerged from her apartment and asked Page to quiet down, according to a detailed account of the shooting prepared by a local prosecutor, who cleared the deputies of wrongdoing. Page took the woman hostage and waited for police.

Three deputies soon arrived. One approached through the front door and ordered Page to drop his weapon. The enraged man continued to scream at his hostage. Then Page spotted two more deputies approaching through the back door.

"Don't do it. . . I'll shoot!" he shouted and raised his gun.

Brian Helmer, who had been with the sheriff's department for less than two years, fired twice. The deputy who had come in through the front, Joshua Clarke, heard the gunfire and shot six times more.

As Page lay bleeding, Helmer and Clarke quickly transitioned into rescue mode. In a scene captured by a police body camera, the officers secured Page's weapon, realizing for the first time that it was not loaded with real bullets. They tore off his sweatpants and used them to stanch the blood pouring from a wound in his chest.

When Page stopped breathing, the officers performed CPR. A bystander urged them to let Page die, according to the prosecutor's report. Instead, the officers asked for Page's first name and spoke to him as they pumped his chest.

Moments later, paramedics arrived. In the video's final seconds, Helmer walked away from Page's body, breathing heavily and sobbing. Then the video ends.

Gary Page was dead.
