

Suicide By Cop: Causes, Reactions, and Practical Intervention Strategies

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Abstract: *Due to a combination of interpersonal manipulateness, personal identification, and lack of heroic status, most police officers find suicide by cop (SBC) calls to be among the most disturbing shooting incidents. This article describes the dynamics of SBC and some of the factors that may contribute to it. Operational strategies and psychological techniques for de-escalating and resolving a SBC crisis are discussed. Finally, psychological reactions by officers to a SBC and psychotherapeutic strategies for dealing with the aftermath are described. Especially important is the recommendation that officers use intervention “failures” as tools for learning, so that purposeless remorse can be turned into enhanced life-saving skills for the next incident. [International Journal of Emergency Mental Health, 2006, 8(3), pp. 165 - 174].*

Key words: *Suicide by Cop; officer-involved shooting; critical incident stress; law enforcement emergencies; police psychology*

There are a number of critical incidents and emergency calls that can be stressful and potentially traumatizing to law enforcement officers (Miller, 1995, 1999b, 2000, 2003b, 2005b, 2006). Among the most disturbing is a special type of officer-involved shooting wherein the victim essentially “forces” the officer to be an unwilling instrument in his or her death.

The idea that a suspect would deliberately expose himself to police gunfire in order to end his own life has probably long been familiar to officers, but the phenomenon was first explicitly articulated by Wolfgang in 1959 and the actual

term, *suicide by cop* was coined by police officer and psychologist Karl Harris in 1983 (cited in Homant, Kennedy, & Hupp, 2000). Other terms for this phenomenon have been proposed, such as officer-assisted suicide (Homant et al, 2000), law enforcement-assisted suicide (Lord, 2000), and suicide by victim-precipitated homicide (Hillbrand, 2001). It’s easy to see why – besides being a mouthful – none of these latter terms ever caught on. The first two wordings place the officer in a Dr. Kevorkian-like role of willingly abetting the suspect’s wish to die, which is hardly the case. And the last phrase sounds like it’s all but calling the cop a murderer, although I’m sure that was not the intent of the term’s author. Though still not the most graceful terminology, suicide by cop (SBC) is the descriptor that appears to have the widest usage among law enforcement personnel, police psychologists, and media reporters when they speak about this phenomenon.

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Suicide by Cop: Facts and Statistics

It is estimated that approximately 10% of the approximately 600 police shootings a year in the United States are provoked SBC incidents. Most involve uniformed officers who are on duty at the time of the shooting, probably because such officers are easily identifiable by suspects seeking to end their own lives. The greatest number of SBC incidents occur in the context of a police response to an armed robbery; the next most common situation is a domestic disturbance call. While some SBC incidents arise spontaneously out of the anger and panic of these situations, a good number of them appear to be planned, as shown by the fact that in nearly a third of SBC cases investigators find a suicide note that apologizes to the police for deliberately drawing their fire. Understandably, the use of deadly force by a police officer depends on that officer's perceived danger in the immediate situation, not necessarily on the actual danger, which is usually judged only in retrospect. For this and other reasons, officers involved in SBC incidents often feel a sense of powerlessness and manipulation, and this is typically reported to be an especially stressful and demoralizing form of shooting trauma (Allen, 2004; Feuer, 1998; Homant, et al., 2000; Kennedy, Homant, & Hupp, 1998; Pinizzotto, Davis, & Miller, 2005; Van Zandt, 1993; Wilson, Davis, Bloom, Batten, & Kamara, 1998).

Suicide by Cop: Characteristic Features

Although individual features of a SBC subject are determined by the subject's unique personality and life experiences, research has identified some common characteristics of these individuals and incidents (Feuer, 1998; Kennedy et al., 1998; Lord, 2000; Perrou & Farrell, 2004; Wilson et al., 1998).

The typical SBC subject is a white male in his mid-20s with a history of drug and alcohol abuse. He has had prior contact with the law but usually for minor offenses, although this may have given him some familiarity with how police operate and their responses to critical incidents. Aside from substance abuse, he has probably had a history of other psychological disorders, the most common diagnosis being schizophrenia or bipolar disorder, although there is at least one report of attempted SBC following a traumatic brain injury (Bresler, Scalora, Elbogen, & Moore, 2003). The crisis episode is commonly precipitated by the rupture of some

important relationship in connection with his self-esteem or social support, such as a family or job crisis, that leads to feelings of hopelessness, anger, and despair. Not surprisingly, a desperate reaction is most likely to be provoked where there is a confluence of such crises, such as getting fired and divorced at the same time.

In Wilson and colleagues' study (1998) of SBC incidents, all subjects resisted arrest or orders by police to surrender and all possessed a firearm or other lethal weapon that they used to threaten others. Forty percent of SBC subjects had received a psychiatric diagnosis at one time or another, and 60% had histories suggesting a psychiatric disorder. The most common diagnoses were depression and substance abuse. Almost half of this sample had attempted suicide previously. Two-thirds of SBC subjects in the 1998 study by Wilson et al. took hostages. SBC incidents that emerge from hostage-barricade incidents are more likely to involve a mentally disordered subject (Miller, 2005b, in press-a), which makes the situation even more unstable. Forty percent of SBC subjects in Wilson and colleagues' study (1998) were intoxicated with alcohol, but other drug use at the scene was rare. It may be that being strung out from lack of resources to obtain street drugs contributes to the crisis, and that alcohol is used as a second-choice drug, which then further disrupts judgment and self-control.

In Lord's (2000) study, many SBC attempts began as self-suicide crises, but when law enforcement arrived on the scene, the subjects seemed to have chosen to make a virtue of necessity and to delegate the lethal job to the officers.

Motivations for Suicide by Cop

Why would someone try to get themselves killed by a police officer? It must be noted that most of what we know about motivations for any kind of suicide, including SBC, comes from the study of people who have contemplated suicide and then changed their minds or were talked out of it, or from people who have actually attempted suicide but survived. Aside from academic curiosity, achieving some insight into the SBC subject's behavior may be useful for counseling officers who are disturbed by their role in the subject's death (Homant et al., 2000). This will be further discussed later.

Mohandie & Meloy (2000) have delineated a range of motivations for SBC, that, in fact, can be applied to most

kinds of suicide. Feelings of hopelessness, desperation, rage, and/or revenge usually occur in some combination in persons who attempt suicide. For such individuals, there appears “no way out,” other than to die. What may be unique to SBC cases, however, is the way in which these feelings are acted out. Many suicidal persons are concerned about what others will think of them after their death. Indeed, many suicide attempters have reported elaborate fantasies about what others will feel, say, and do after the subject is gone, usually involving imagined scenes of hand-wringing guilt and remorse on the part of survivors for what “they’ve driven me to do.” On rare occasions, suicidal police officers or ex-officers may stage SBC incidents precisely because they understand that once they fire their weapons at the responding officers, the latter will have no choice but to return fire (Hafenback & Nasiripour, 2005; Miller, 2005a).

If the suicide attempter believes that taking one’s own life bespeaks weakness or cowardice, what better face-saving way to go out like a warrior than in a hail of gunfire, brought down by overwhelming force of arms during a last act of heroic resistance? He didn’t necessarily want to die, they’ll all say, he was just killed while taking a stand, which further reinforces his status as the ultimate hero-victim, gratifying his need for validation, power, and importance. Often, this manipulation may not be conscious, the subject having truly convinced himself that he is just defending his integrity by resisting the police.

Another, related source of this clouding of motivations consists of religious prohibitions against suicide: the person may no longer want to live in this cold, cruel world, but he doesn’t want to go to hell, either. With a SBC, he can essentially tell God that it’s not his fault the police killed him. In many cases, the decision to have the police serve as executioners is made impulsively and, in some cases, the subject just as abruptly changes his mind and surrenders (Pinizzotto et al., 2005).

Practical considerations may underlie the wish to die but not to appear to have killed oneself, such as exclusion clauses for suicide on virtually all life insurance policies or lessening the shame to one’s family. Also, a person who wants to die may fear the physical pain and distress involved in actually taking his or her own life (cutting, suffocating), or may be afraid of chickening out at the last moment or botching the job which would only leave him a cripple or a vegetable. In this regard, SBC makes grim sense in terms of finality: being

gunned down by multiple police bullets is an efficiently lethal way to die.

Suicide By Cop: Cues and Signs

Virtually any police call involving a distressed person can lead to a SBC incident, including domestic disturbance, robbery in progress, NWAG (“nut with a gun”) calls, and so on. In fact, many encounters that might not have started out with the subject being suicidal may progress to that point as he feels his situation becoming increasingly desperate; this is also the case with many hostage crises (Miller, 2005b, in press-b). And, as with hostage crises, when it becomes clear that an encounter involves the threat to the subject’s and/or others’ lives, special caution must be taken in handling the incident. The following are some signs that a SBC incident may be imminent (Homant et al., 2000; Hutson et al., 1998; Kennedy et al., 1998; Mohandie & Meloy, 2000; Perrou, 2004a, Perrou & Farrell, 2004).

Verbal cues

Certain statements the subject makes during the incident may subtly or overtly indicate his or her desire to die by the hands of the police.

Explicit demands or challenges. “Come on, pigs, kill me! I don’t give a shit. Come on – what are you waiting for?”

Giving up. “You want me so bad? – come arrest me. I got nowhere to go, so it might as well be to jail.”

Setting deadlines. “I’m giving you till two o’clock to get out of here, then I’m coming out with my gun and I don’t give a damn what happens.”

Threats to others. “You guys clear out of here or the bitch gets it.”

Blaze of glory. “No way I’m going back to jail. You ain’t takin’ me alive. This is the moment of truth!”

Noble loser. “You pigs knew it was just a matter of time till you got me. Well, here’s your chance.”

Verbal will; final plans. “Tell my daughter I’m sorry for everything. The keys to my safety deposit box are in the dresser drawer;” “I don’t want no damn preacher at my funeral. Just have my brother say a few words;” “Tell everybody I just tried to do right in this world, okay?”

Religious references. “The final judgment will be in heaven;” “My pastor and I have an understanding;” “I’m right with God.”

Behavioral cues

Even without saying anything, a subject may indicate his or her desire to die by the hands of the police. Note that some of these cues are general indications of suicidal intent, while others may be more specific to SBC incidents.

The subject may call in the crime report himself to make sure there is a police presence and to prime them for danger when they arrive. As with many hostage crises, the SBC subject may make no substantive demands or refuse to negotiate with police. Drug or alcohol intoxication is almost always a bad sign because it increases instability and impulsivity, but as is the case with hostage situations, sometimes this can cause the subject to fall asleep, permitting a safe resolution. However, don’t count on it.

Immediately prior to a deadly action, the subject may be observed to hypervigilantly scan the environment or be heard to begin a verbal countdown. Certain actions by the subject may seem to clearly be goading the police into firing at him. He may advance on a police line, after being ordered to stop. He may brandish his weapon in a threatening way, point it at police, clear a threshold in a barricade situation, or actually begin firing; in fact, the latter is the decision point for officers’ returning fire in 89% of SBC situations studied (Kennedy et al., 1998). Perhaps most distressing for officers who have killed a SBC subject, he may have been observed reaching for a supposed weapon that turned out to be a toy gun, other harmless object, or just a pantomime intended to manipulate the police into shooting him.

The SBC subject may point the weapon at himself or threaten another person. He may actually begin to harm himself or that person. Even when wounded, he may continue firing or attacking the police or others, clearly signaling his intent to go out in a dramatic blaze of glory.

Contextual cues

To the extent that law enforcement responders can obtain any information on the subject, certain situational, demographic, and historical details about the SBC subject may be useful for assessing risk.

Many of the general risk factors for unstable, impulsive, violent behavior in general (Hall & Ebert, 2002; Palermo & Kocsis, 2005) apply to the SBC subject. Such subjects typically have an extensive mental health history, including previous hospitalizations for being a danger to self or others. They may also have a criminal history, usually involving impulsive, spontaneous acts of violence. Many have had prior run-ins with local police officers, and a few have had a family member or close associate killed in a police shootout. Some subjects identify with other SBC victims and some may fit the “blaze of glory” syndrome described above.

Subjects at high risk for SBC in standoff situations include those who have recently killed a significant other, killed a prized pet, destroyed or given away valued possessions, recently learned of a serious medical diagnosis, sustained a painful traumatic loss or bereavement, or may be facing a shameful life situation.

Police Response to an Ongoing Suicide by Cop Call

The following are some basic guidelines for officers handling a potential SBC incident. As with all such recommendations, these should be tempered by training, experience, and common sense (Campbell, 2005; Homant et al., 2000; Hutson et al., 1998; Kennedy et al., 1998; Lindsay & Dickson, 2004; Mohandie & Meloy, 2000; Perrou, 2004b). Mental health clinicians can play an important role in developing response protocols, conducting training, and providing on-scene operational support during crises (Blau, 1994; Greenstone, 2005; McMains & Mullins, 1996; Miller, 2006; Strentz, 2006).

Assess the situation

As with all potentially dangerous situations, take every call seriously, even if this is the umpteenth “emergency” with one of the local regular 911-ers. You never know which crisis is going to be the fatal one.

As with all crisis situations, secure the scene and assess the threat to safety of the subject, any third parties, including hostages or innocent bystanders, and yourself and fellow officers.

Try to obtain as much background information as possible on the subject. This may actually be easier with SBC subjects, who tend to be familiar locals, than with hostage-takers, who may be outsiders who come into a neighborhood

to commit a specific crime. With SBC subjects, sometimes the presence of a familiar, trusted officer is an asset; other times, it may lead to more trouble, especially if the subject has had a beef with that officer in the past.

Evaluate suicide risk

The overall risk of suicide, which in turn may be an index of the likelihood of a SBC episode, can be evaluated in terms of three important factors, each with two dimensions (Clark, 1998; Gilliland & James, 1993; Greenstone & Leviton, 2001):

Suicidal intent can be either *remote*: “Times like these, you get to feeling life just ain’t worth living. Or *immediate*: “I can’t take another minute of this – I’m checkin’ out.”

Suicidal plan can be either *vague*: “I think I got some drain cleaner under the sink; I dunno, maybe I’ll just turn on the gas, or turn on the car exhaust in the garage.” Or *specific*: “I got the razor to my neck and I’m ready to go.”

Suicidal means should be evaluated in terms of either *low availability*: “Dammit, I know my wife used to keep her pills around here somewhere.” Or *high availability*: “Got my Ruger in my hand, boys, so you do what you want.”

Suicidal means should also be evaluated in terms of *low lethality*: “Don’t think I can’t do some damage with this hammer.” Or *high lethality*: “I was an ordnance expert in the Navy, so when I tell you this baby’s gonna take off the side of the house, you better get outta there.”

Note that, whatever the apparent immediate threat level of these various dimensions, officers should not relax their vigilance, because a seemingly low-risk situation can turn deadly in a flash.

Establish contact

If you establish communication with the subject, introduce yourself and your organization by name and title. Try to establish rapport with the subject. Remember that, if there are no third parties in harm’s way, the subject is primarily a danger to himself and possibly to other officers responding to the scene. In such SBC situations, there may be more time and less sense of urgency than where hostages are involved. Unfortunately, this may also make the SBC scenario seem less important than a hostage crisis, and many officers may feel that it is a “waste of time” to spend hours talking down some nut who only wants to hurt himself. It may also seduce

officers into relaxing their vigilance, possibly leading to costly mistakes.

So, as a responding law enforcement officer, always remember a few things about SBC versus hostage situations. First, a life saved is a life saved, and it can be just as rewarding to rescue some poor dumb schmuck from himself as it is to talk down a cold-blooded hostage taker and keep him from harming innocent civilians. Second, you’re a professional, and just as a paramedic doesn’t get to decide who to resuscitate based on the subject’s intrinsic worthiness, it’s not your call as to who is worth expending your time and effort to save, as long as this can be done safely. Third, letting one’s guard down at a supposedly “bullshit” call has resulted in more than one officer losing his or her life to a subject who at first seemed harmlessly goofy but suddenly turned deadly. Finally, the types of crises encountered in law enforcement, and the methodologies used to handle them, have far more similarities than differences (Miller, 2006). So, the active listening and negotiating skills that you hone getting some disturbed street person to drop that hammer may sharpen the lifesaving edge you’ll need if you’re ever first on the scene at an armed hostage standoff at the bank.

Determine the main problem

Again, as with hostage crises, sometimes in SBC cases there is no specific problem: “Politicians are all the same. You can’t trust nobody. The world ain’t never gonna change.” In other cases, the issue is clearly defined: “I can’t believe she’s been banging my cousin. If she don’t come back here right now and apologize, I’m gonna show her what she made me do.”

As with hostage crises, it is sometimes helpful to ascertain if the subject’s needs are instrumental: “They tell me they gotta repo my car ’cause I missed some payments. Without a car, I can’t get to work. How’m I supposed to live?” Or expressive: “My ex-wife said it wasn’t her business no more what happens to me. Well, we’ll see how she feels about her ‘business’ when she’s gotta clean my brains up off her new floor.”

Talk the subject down

Use your toolkit of crisis intervention skills, guided by your knowledge, training, experience, judgment, and common sense, to bring the incident to a nonviolent resolution (Greenstone, 2005; McMains & Mullins, 1996; Miller, 1998,

2006; Slatkin, 2005; Strentz, 2006). Any combination of strategies may be employed, including those that follow.

Provide reassurance. “It sounds like you been through hell, man. But these cops out here want to help you, not hurt you. That’s why we called in the paramedics, see?”

Comply with reasonable requests. “Well, I’m not allowed to bring your boss in here to talk to you, but I promise I’ll give him that note you tossed us if you’ll drop the gun and come out.”

If there are no demands, ask about immediate needs. If hostages are not involved, there is less reason to make the SBC subject “bargain” for basic necessities. In fact, offering to make the subject more comfortable can be a humane, rapport-building gesture. However, you may want to suggest some kind of trade-off that will contribute to a nonlethal resolution: “Look, you’ve been in there for hours with no food or water or AC. How about I send in some burgers and cold drinks if you’ll at least put the rifle down, okay?”

Offer alternative, realistic optimism. “Hey, I can’t just make them give you your back pay and benefits, you know that. But plenty of guys have gotten Workers Comp lawyers and filed claims, and eventually they got a fair deal.”

Avoid being baited. One problem that may be unique to SBC incidents is that, if the subject is truly intent on dying, he may use the officer’s rapport-building process against him. As communication develops, the officer feels more and more at ease, and approaches closer and closer to the subject, whereupon the latter springs into an attack, leaving the officer no choice but to defend himself by lethal force. It is almost always these kinds of manipulative *bait-and-rush* scenarios that officers find the most distressing and demoralizing aspect of SBC scenarios: “How could I have been such an idiot not to see that coming?” Therefore, as rapport and communication begin to develop, always maintain a safe physical position and remain alert for any sign of sudden threat.

Consider non-lethal containment. A variety of LTLs, or *less-than-lethal* weapons and containment technologies now exist, and more are coming on the market all the time. Sprays, gasses, gels, nets, tasers, and flash-bang grenades comprise only a partial list, and many officers have used their ingenuity to devise their own less-than-lethal measures to take down a subject, including pinning the subject with a ladder, throwing a blanket over him, or even squirting him with a restaurant mustard dispenser. Remember, of course, that officer

safety is paramount. But if it is feasible to turn a suicide by cop incident into a tased-by-cop, sprayed-by-cop, laddered-by-cop, or garnished-by-cop incident, then a life has still been saved.

Consider “limited walk-away containment.” Where there are no hostages and no imminent danger, a response that lessens the risk to the surrounding community and, at the same time, ratchets down the tension level may be preferable (Perrou, 2004b). Many of the officers on scene may pull back, leaving a few officers at points of exit of the building and a few more at an outer perimeter in as unobtrusive a placement pattern as possible. Maintain communication with the barricaded subject, but keep demands for coming out as low-key as possible. Let time and exhaustion work in your favor. If the danger starts to build again, you can always have your personnel move closer and redeploy additional officers as needed.

Employ appropriate follow-up. Again, as with hostage situations, don’t neglect the subject after the crisis has been resolved. Remember the principle of “repeat customers” (Miller, 2006). Whereas hostage takers almost always do some serious jail time, many SBC subjects may be released from criminal or psychiatric custody fairly quickly if no threats to others were involved. Especially in smaller communities, you may well cross paths with the same character again, so you want his or her memory of you to be as positive as possible. Therefore, following a successful resolution of the SBC crisis, spend a few moments with the subject, commend him for his courage in doing the right thing, repeat your reassurance and your confidence in his ability to get his life back in order, and back up (within reason) any offers you made during the crisis. By doing so, you reduce the likelihood of a repeat episode, and you contribute to the overall future safety of your fellow officers and the community as a whole.

Aftermath of Suicide by Cop: Police Officers’ Reactions

Sometimes there is no choice but to take the subject down. As noted earlier, if SBC is a special form of officer-involved shooting, then the psychological reactions of the involved officers can be expected to be as great or greater than with almost any other kind of shooting scenario. In my experience, these reactions also occur, perhaps to a lesser degree, with more common types of non-shooting suicide scenarios where the best efforts of the responding officers to

talk the subject down fail to interdict his or her determination to take his or her own life. What is different about a SBC incident, however, is the degree of departmental, community, media, and legal scrutiny such an episode typically generates (Cloherty, 2004; Miller, 2004, in press-a).

The psychodynamics of SBC

It must be remembered that SBC is not always a clear-cut situation (Allen, 2004; Homant et al., 2000, Praet, 2002). In the least ambiguous case, a disturbed citizen has a beef with the police, so he purposefully calls them to the scene and then deliberately manipulates them into shooting him. Another relatively clear scenario involves a disturbed, suicidal subject who lacks the resolve to kill himself, so he baits the police into doing it for him.

But many situations begin with the subject threatening to kill himself, by himself – i.e. an “ordinary” suicide – and then turn into a SBC incident only when the subject feels threatened or overwhelmed by the arriving police presence. In still other cases, the incident begins as an aggressive action by the subject, such as a robbery or domestic dispute, and only turns suicidal when the subject feels he is out of options; as noted earlier, many of these scenarios may evolve into hostage crises. Officers involved in SBC shootings frequently second-guess themselves when they learn that the subject manipulated them into shooting him (Van Zandt, 1993). That aside, officers may reproach themselves for “unnecessarily” taking a subject’s life no matter what his motivation might have been (Clagett, 2004).

Still other cases, far more common in my experience, might be called “*suicide in front of cop.*” Here, the subject summons police to the scene, or they happen to arrive as part of a general call, and the subject makes a point of killing himself in full view of the officers (or within earshot, if by phone). This gesture may be performed out of sheer despair or capitulation, or the subject may want the officers – iconic symbols of societal authority – to “bear witness” to his act of desperate martyrdom. Alternatively, he may be trying to exert a different form of manipulative control, not by actually inducing the cops to shoot him, but by forcing them to witness his death as a way of highlighting their impotence in talking him down.

It is this issue of *control* that seems to disturb officers the most. Police officers hate to feel that they’ve failed. In

fact, paradoxically, many officers feel worse after failing to prevent a suicidal subject from taking his own life than they do after not being able to prevent a homicidal subject from killing another person. In turn, this reaction bothers them all the more because they believe they *should* feel worse about the homicide, since it involved the unwilling death of a helpless victim.

But, upon analysis and reflection, the psychological dynamic that emerges in many of these cases is as follows: The homicidal killer was either a cold-blooded scumbag who had no compunction about taking another’s life for his own gain or else he was so whacked out from drugs or mental illness that he didn’t know what he was doing or didn’t care about the consequences. Either way, in a strange, evil, crazy sort of way, the killing was “bound” to happen. In the first case, the killer was determined to get what he wanted by using an innocent victim as a pawn. And in a way, the aggressively assertive, forthright cognitive style, temperament, and action-orientation of most cops allows them to unconsciously identify with the resolve to “do whatever it takes” to survive and overcome a situation, even if they consciously repudiate the actual criminal motives and agenda of the offender.

Not that cops are all secret felons by nature, but the force of character that enables them to barrel through tough situations in order to do good is similar in type – although opposite in goal – to the criminal’s single-minded determination to do evil. And most cops have no trouble imagining themselves capable of “doing anything” in extreme circumstances, e.g., if their loved ones were in peril or their own lives depended on it; indeed, this extreme mindset is encouraged in “mental survival” and “mental toughness” training programs (Blum, 2000; Duran, 1999; Duran & Nasci, 2000; Miller, in press-d).

But giving up and taking one’s own life is consciously far more distasteful and therefore repudiated in the thinking of most cops, perhaps because the idea of surrendering or being overwhelmed is indeed a secret fear of many officers (Miller, 2005a, 2006), and therefore must be forcefully banished from conscious consideration. Psychologically, then, failing to prevent a subject from killing himself may symbolically stand for the officer’s unconscious fear that he may someday fail to prevent his own demons from wresting away his will to live. Worse still, where this officer becomes the actual instrument of death in a SBC case, the psychodynami-

cally fearful introjection becomes all the more disturbing because it has been acted out in real life, albeit on the proxy of the dead subject. Here's someone who gave up, cashed out, and had the cops write the check.

Psychotherapeutic strategies with officers involved in a SBC incident

As with other kinds of critical incidents, for mental health clinicians working with officers who have been affected by a SBC incident, I recommend a flexible and graded approach (Miller, 1995, 1998, 1999b, 2000, 2003a, 2006, in press-c). Begin with a standard operational debriefing much as would occur after an officer-involved shooting, hostage crisis, or other major critical incident. Guided by the principle that 20/20 hindsight = 20/20 insight = 20/20 foresight (Miller, 2006), view the debrief as a learning tool, so that an unfortunately tragic outcome this time can lead to a potentially better outcome next time. If several officers were involved in the call, a formal Critical Incident Stress Debriefing (Miller, 1999a; Mitchell & Everly, 1996) may be arranged to deal with shared reactions and to foster a sense of camaraderie and mutual support.

Notwithstanding the lesson in psychodynamics professed above, individual psychotherapy with an officer involved in a SBC incident should not dive into a Freudian analysis, but rather should begin in a practical, educative format, employing reality-testing and cognitive techniques (Blau, 1994). If necessary, have the officer go through a frame-by-frame recollection of the incident (Solomon, 1991, 1995), clarifying in his own mind what he or she did, what the subject did, what the other officers did, and so on (see Miller, 2006, for further details concerning law enforcement psychotherapy).

In this context, self-recriminations can be placed in the same kind of 20/20 "what-can-I-learn-from-this?" framework. The counselor can encourage the perspective that a true professional doesn't unrealistically expect to get it perfect every time, but that the same true professional is responsible for learning from his or her mistakes. He or she is expected to extract the maximum amount of insight possible from the failures, in order to optimally hone his or her skills for next time: "If you're willing to assess your performance honestly, learn from your mistakes, practice and retrain for excellence, and give 110% on the next call, then you're doing your damn job, officer, and no one can ask for more."

Only if these practical measures prove insufficient to restore the officer's equanimity and confidence should the mental health clinician delve into the more individual, personal, psychodynamic reasons for the officer's difficulty in coping with the SBC aftermath. Even then, go slowly and cautiously, and only as deep as you need to.

Sometimes, it may be a contemporaneous stressor that is impacting on the officer's ability to cope with the SBC episode. Perhaps the call came around the same time as a family member was dealing with a serious illness. Maybe the incident itself was too close to home: it is not that rare for police officers to have at least one immediate or distant family member with a mental illness and one of these relatives may even have attempted or completed suicide.

The issue should never be forced, but sometimes it emerges that the officer has "been there," i.e. has him- or herself gotten fearfully close to considering the ultimate check-out (Miller, 2005a) and, by dint of will-power or unwillingness to shame his family or colleagues, he was able to pull himself back from the brink. He may currently be going through a depressive crisis – and imagine the irony of a depressed officer trying to convince a suicidal subject to go on living and hoping. In a few rare cases, the experience may have a scared-straight effect on the officer: "Jeez, compared with what that poor bastard's going through, my problems don't seem so bad." But don't count on it, because everybody's pain is real to them, and persons in distress often lose the power of perspective. Acknowledge the distress, and keep the discussion focused on the positive and on the prospects for the officer's future competence and success.

CONCLUSIONS

Due to a combination of interpersonal manipulateness, personal identification, and lack of heroic status, most officers find SBC calls to be among the most disturbing shooting incidents when they are forced to take the subject's life. By utilizing sensitive, supportive, yet pragmatic and confidence-building therapeutic approaches in an atmosphere of mutual trust and respect, the police psychologist can powerfully aid in restoring an officer's resilience and ability to bounce back from the stress of this special critical incident. By emphasizing that officers use intervention "failures" as tools for learning, purposeless remorse can be turned into enhanced life-saving skills for next time.

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