THE POLICE RESPONSE TO PEOPLE WITH MENTAL RETARDATION

TRAINERS GUIDE

PROPERTY OF
National Criminal Justice Reference Service (NCJRS)
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Police Executive Research Forum
This document provides general information to promote voluntary compliance with the Americans with Disabilities Act (ADA). It was prepared under grant # 91-CR-CX-0011 from the U.S. Department of Justice. While the Department of Justice has reviewed its contents, any opinions or interpretations in the document are those of the Police Executive Research Forum and do not necessarily reflect the views of the Department of Justice. The ADA itself and the Department's ADA regulations should be consulted for further, more specific guidance.
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OVERVIEW

The Police Executive Research Forum (PERF) is a national membership organization composed of chief executives from municipal, county and state law enforcement agencies. PERF's goal is to improve the delivery of police services through the professionalization of law enforcement executives and officers, the development of new knowledge through research and experimentation, and open debate on criminal justice issues.

This material was prepared by PERF under a grant from the U.S. Department of Justice to provide technical assistance to law enforcement agencies on Title II of the Americans with Disabilities Act (ADA). Its purpose is to aid law enforcement agencies in their efforts to improve the police response to people with disabilities.

Title II of the ADA prohibits discrimination on the basis of disability by any state or local government or its agencies. Covered entities include police and fire departments, state legislatures, city councils, state courts, public schools, public recreation departments and departments of motor vehicle licensing. All covered entities must allow people with disabilities to participate fully in all their services, programs and activities. All law enforcement officials employed by a state or local government agency must adhere to principles of nondiscrimination in carrying out their duties. Law enforcement agencies may be held liable for failing to provide their services to people with disabilities on the same basis as provided to others.

The following training curriculum on responding to people with mental retardation is one in a series of products that address the police response to people with disabilities. Other training curricula on the police response to people with seizure disorders, people with speech and hearing impairments, and people with mental illness are also available. In addition, PERF has produced model policies and videotapes on complying with the ADA.

For those agencies interested in training their officers or supervisors on the requirements of ADA, we have included a training module in each of these curricula. These can be given alone or in conjunction with one or more of the disability-specific modules.

For more information on these or other subjects, please contact:

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1120 Connecticut Ave. NW, Suite 930
Washington, DC 20036
202/466-7820
202/466-2670 (TDD)
BACKGROUND

With the passage of the Americans with Disabilities Act (ADA), and the implementation of Title II governing state and local government services, law enforcement personnel, like other public servants, need to improve their knowledge, skills and understanding in interacting with people with disabilities. The ADA gives people with disabilities the right to have access to mainstream American life in employment, public services, consumer goods and services, transportation, leisure activities, educational activities, and telecommunications on the same basis as anyone else. As doors continue to open for people with disabilities and they participate more fully in community life, it is likely that the frequency with which they have contact with the police will also increase.

While this curriculum is aimed at improving services to citizens with mental retardation, many of these suggestions for a proper police response may also apply to the 72 million Americans who are functionally illiterate, and to those people who have difficulty understanding complex social situations. Complying with Title II of the ADA will improve the quality of police service to a large number of citizens—a goal shared by police professionals across the nation.
TRAINING SUMMARY

Time: 25 minutes for pre-test and review (optional)

Two hours for lecture covering definitions, how mental retardation differs from mental illness, common interactions between police and people with mental retardation, and how to identify and respond to people with mental retardation (Modules I-V).

20 minutes for break

30 minutes for question and answer period (Module VI)

30 minutes for additional activities (Module VII)

Target Audience:
- police officers/deputies
- supervisors
- administrators
- civilian employees

Objectives: At the conclusion of this program, participants will be able to:

a. define mental retardation and recognize common traits of people who have mental retardation;

b. apply techniques for responding effectively to situations involving people with mental retardation, who may be encountered as victims, witnesses, suspects, and/or arrestees; and

c. deal in a fair and sensitive manner with people who have mental retardation who have need for police services.
LESSON PLANS

RECOGNIZING AND RESPONDING TO

PEOPLE WHO HAVE MENTAL RETARDATION
MODULE I: Nondiscrimination Requirements Under the ADA

According to the ADA, people with disabilities are entitled to the same services that law enforcement agencies provide to anyone else. They may not be excluded or segregated from services, be denied services, or otherwise be provided with lesser services than are provided to others. Law enforcement agencies have an obligation to ensure that their officers and civilian employees provide fair and equal treatment to people who have disabilities.

Law enforcement officers come into contact with people who have mental retardation in the same ways they come into contact with other members of the community. They may be pedestrians, victims, witnesses, suspects or offenders. They may be runaways or lost. However, when individuals with mental retardation find themselves in situations that involve the police, they may react differently than other members of the community.

To serve this population effectively, officers and deputies must be prepared to deal with the difficulties that people with mental retardation may have in comprehending situations; knowing who to trust; knowing what to say; or knowing how to find their way home, avoid being taken advantage of or keep out of harm’s way. Under the ADA, law enforcement agencies are required to modify their policies, practices and procedures in reasonable ways when necessary to provide fair and equal treatment to people with disabilities. In many instances, this can be achieved by being more aware, taking a little extra time or making a little extra effort when responding to situations involving people who have mental retardation.
MODULE II: What is Mental Retardation? How is It Recognized?

A. Definition of Mental Retardation

1. What is mental retardation? Mental retardation originates during a child's developmental period (Appendix A). People with mental retardation mature intellectually and emotionally at a rate that is significantly below average. Mental retardation is one of the nation's leading disabling conditions. Over 7.5 million Americans, almost 3 percent of the U.S. population, have mental retardation. Each year, more than 125,000 newborn children are added to this population. Mental retardation exists when the following three criteria are met:

   - A person's intellectual functioning level, as measured in a standardized IQ test, is below 70.
   - Related limitations exist in two or more of the following adaptive skill areas: communication, self-care, home living, social skills, self-direction, health and safety, functional academics (basic reading, writing and arithmetic), leisure, work, and use of community services (such as public transportation).
   - Onset of the above criteria occurs before the age of 18.

The existence of all three criteria indicates that a person may be diagnosed as having mental retardation. If even one condition is absent, the person is not considered to have mental retardation. Anyone, however, could become functionally disabled at any age from brain damage, resulting from encephalitis or similar infections or conditions, or from severe head injuries.

Mental retardation is not a disease, and it should not be confused with mental illness (Appendix B). Unlike mental illness, mental retardation is permanent, although the functional limitations the individual experiences can be lessened. With appropriate support over a period of time, the life functioning of the person with mental retardation will generally improve.

As a rule, people who have mental retardation are not dangerous or violent. As with all people, fear and panic may lead the person with mental retardation to exhibit different behavior (e.g., aggression, crying, running away, etc.) The way in which a law enforcement officer responds to a person who has mental retardation may either escalate or allay the person's fear and panic.
2. **Degrees of Mental Retardation**\(^1\). There are four degrees of mental retardation: mild, moderate, severe, and profound (Appendix C).

a. **Mild Retardation**: People with mild retardation constitute the vast majority (89 percent) of people with mental retardation. They differ from people who do not have mental retardation only in their rate and degree of intellectual development. Mild retardation is not characterized by unusual or distinctive physical characteristics.

Mild retardation includes people whose intellectual functioning, as measured on a standardized IQ test, ranges from 51 to 70. People who have mild retardation can live independently. Many are able to hold regular jobs. However, they may need guidance or assistance when faced with new or unusual situations.

b. **Moderate Retardation**: People with moderate mental retardation constitute approximately 6 percent of people with mental retardation. Their disability is usually apparent before school age. Appropriate educational opportunities throughout the developmental years can prepare these individuals for satisfying and productive lives in the community.

Moderate retardation includes people whose intellectual functioning, as measured on a standardized IQ test, ranges from 36 to 50. A person who has moderate retardation can usually travel alone in familiar places and may live independently or semi-independently. Most people with moderate retardation live in a family or group residential setting and many attend sheltered work or adult community programs.

c. **Severe or Profound Retardation**: The remaining 5 percent of people with mental retardation have severe or profound retardation (IQ approximately 35 or less). They often have poor motor development, little or no communicative speech, and other disabilities. Adults with severe mental retardation may be able to perform simple tasks under close supervision. Some people who have severe or profound retardation can learn to care for their basic needs. Officers and deputies are not likely to come into contact with a person with severe or profound retardation, except as a victim.

\(^1\)Although the concept of these levels of mental retardation has recently been found to be overly simplistic, we feel that they are suitable for the purpose of helping law enforcement officers recognize that the degree of mental retardation varies among individuals.
People who have mental retardation frequently have difficulty assessing situations and people, which can make them susceptible to abuse or manipulation by others. Some are not able to reason well enough to understand the consequences of their acts and are therefore unable to form the intent to commit a crime.

B. Other Disabilities Mistaken for Mental Retardation

People with a variety of disabilities that cause difficulties in speech, hearing, motor control, memory or learning, but do not affect intellectual development, are sometimes treated as if they have mental retardation, which can be frustrating. To get a better feeling of whether or not a person may have mental retardation, an officer or deputy should engage him or her in a short conversation. Initial exchange of questions and answers may provide clues to determine whether the person has full intellectual capacity but difficulty in speaking or hearing, or has mental retardation. This will enable the officer or deputy to respond to and serve the individual in an effective, respectful manner.

1. Differences Between Mental Retardation and Down Syndrome. Down syndrome is a genetic disorder that results from an additional chromosome. Down syndrome often affects both physical and mental development. People with Down syndrome are often recognized by their physical characteristics, which may include a rounded face, slanted eyes, short neck, short stocky build, etc.

Down syndrome is not mental retardation, and people with Down syndrome exhibit a wide variety of mental and physical abilities. Most people with Down syndrome are also diagnosed with some level of mental retardation, ranging from mild to severe or profound. Law enforcement officers and others should not assume, however, that a person with Down syndrome also has mental retardation. While rare, there are people with Down syndrome who do not have mental retardation.

A law enforcement officer who comes into contact with a person with Down syndrome should use his or her best judgment to determine whether the person also has mental retardation. The section of this curriculum titled “Identifying the Presence of Mental Retardation” discusses traits to look for.

2. Differences Between Mental Retardation and Mental Illness. Mental illness is the term used for a group of disorders including schizophrenia, major depressive disorders, and a varied group of pathological states. Although a person with mental retardation may also have a mental illness, there is no direct link between these two disabilities.

Mental illness and mental retardation are two different types of impairment. While mental illness can occur at any age and is sometimes temporary and reversible,
mental retardation is a lifelong condition that begins at birth or in early childhood. Mental retardation is characterized by significantly below average ability to learn and process information. Mental illness is characterized by disturbances in thinking, feeling and relating, and may affect anyone, regardless of intellectual capacity.

C. Identifying the Presence of Mental Retardation

The appearance and behaviors of most individuals with mental retardation do not differ from those of other people. Mental retardation is often not readily apparent. There is no single way of determining whether a person has mental retardation or to what extent it may exist. While some people with mental retardation have other disabilities as well, there is no correlation between mental retardation and the presence or severity of other disabilities. Except in cases in which profound developmental disabilities exist, physical characteristics will rarely indicate the presence of mental retardation.

Below are some difficulties that individuals who have mental retardation may experience and that can indicate that a person has mental retardation. However, the presence of one or more of these characteristics does not necessarily mean that the individual has mental retardation. People with other types of disabilities may also experience some of these same difficulties. It is not necessary for a police officer, deputy, dispatcher, or other law enforcement employee with direct citizen contact to diagnose mental retardation (or any other mental or physical disability) with precise accuracy. What is necessary is to respond to each individual in an appropriate way.

People with mental retardation may have difficulty in communication and behavior. With respect to communication, the individual may:
- have limited vocabulary.
- have difficulty understanding or answering questions.
- have a shorter attention span.

With respect to behavior, the individual may:
- act inappropriately.
- be easily influenced by and eager to please others.
- be easily frustrated.
- have difficulty with the following tasks:
  - giving accurate directions.
  - counting or handling money.
  - using the telephone and telephone book.
  - telling time easily.
  - reading and writing.
- have difficulty assessing situations or people.
- have difficulty dealing with new situations, such as an incident that involves a law
enforcement officer.2, 3

Grade level or educational achievement should not be used as a method for determining if the possibility of mental retardation exists, as this is not always a reliable indicator.


MODULE III: Interaction with Law Enforcement

The majority of people with mental retardation do not engage in criminal activity. Among those who do, some may understand the consequences of their illegal activity, while others may not. In addition, police experience has shown that individuals with mental retardation may have a poor ability to assess situations and people that may make them vulnerable to being used by lawbreakers as foils, runners or couriers. They may also make errors in judgment on their own that lead them to break the law.

Many people with mental retardation who come into contact with law enforcement officers may be “street smart” and have good survival skills, and, as a result, their disability may not be readily discernible. Their desire to please and get along with other people, especially authority figures, can make it difficult for law enforcement officers to discern the person’s disability and respond in an effective and appropriate manner.

A. Common Interactions

1. **Lost or Runaway Person**: One of the most common contacts a law enforcement officer will have with someone who has mental retardation will result from a call involving a lost or runaway person. On occasion, an individual who appears to be loitering or behaving suspiciously may in fact be someone who has mental retardation and is lost.

2. **Suspicious Person**: The actions of adults who have mental retardation may include being excessively open to strangers or playing with neighborhood children, and may cause some alarm for others who do not understand the nature of mental retardation.

3. **Victim**: A person with mental retardation may be unable to use abstract reasoning to understand dangerous situations. This may make him or her vulnerable to victimization. Like anyone else, a person who has mental retardation who is abused by his or her family, caregiver or guardian may be reluctant or afraid to provide information about those abusing him or her.

4. **Citizen Complaints**: Members of the community may not understand the nature of mental retardation, and when they come into contact with a person who has mental retardation, or observe them behaving unusually, they may call the police. Officers should explain to the complainant the difference between behavior that is illegal and behavior that may be unusual but is not illegal.

5. **Criminal Offenders**: People who have mental retardation may be involved in criminal activity. However, some offenders with mental retardation may not fully understand concepts of law and illegal activity. Offenders may not realize that an act was criminal or that they may have been manipulated by a lawbreaker.
Officers should take these possibilities into consideration when determining the appropriate disposition.

B. Misinterpreting Characteristics

Officers may misinterpret situations because the learned coping skills used by people with mental retardation can make it difficult to understand the situation and respond effectively. For example, a person who is lost may deny this, because he/she does not want to bring attention to his/her inability to find his/her way home. When questioned, a person with mental retardation may respond with the answers he/she thinks the officer wants to hear, even when he/she does not understand the questions. A person with mental retardation may volunteer information to the officer that turns out to be erroneous, because he/she enjoys the attention or wants to be seen as helpful.

A person with mental retardation may become passive and afraid to speak, or become frustrated because he/she cannot understand or respond to what the officer is saying.

Like anyone else, people with mental retardation may overreact when encountered by a police officer or deputy, due to fear and lack of understanding of the situation. Their confusion or overreaction can be misinterpreted as a sign of resistance or aggression.

Some people with mental retardation (particularly when mental retardation is accompanied by other disabilities) may appear incoherent, physically unsteady, confused and disoriented, or frightened. These characteristics can be misinterpreted as evidence of drug or alcohol abuse.

Modules IV and V provide guidance for responding effectively when a person exhibits characteristics associated with mental retardation.
MODULE IV: Improving Response To Victims and Witnesses Who Have Mental Retardation

The following suggestions are designed to improve interaction between law enforcement officers and people who have mental retardation. Tips for responding to people who have mental retardation are contained in Appendix D.

- Give people with mental retardation the same respect you would show any other individual. (Most people with mental retardation do not like being called "retarded" or even having the word "retardation" used in reference to their disability. When speaking to the individual, use the phrase "person with a disability.")

- Treat adults as adults. Do not treat adults who have mental retardation as children.

- If possible, arrange to question the person in a calm setting, free of distractions.

- Speak directly to the person. Do not assume a person who has mental retardation is incapable of communicating. Do not assume a companion must interpret for the person who has mental retardation.

- Use simple, concrete and concise language.

- Use the person's name often.

- Use declarative sentences. Keep sentences short.

- Break complicated series of instructions or information into smaller parts.

- Use open-ended questions that require more than just a "yes" or "no." For example, "Tell me what happened."

- If a person does not respond to a question, ask it in a different way.

- New information may need to be presented in different ways (e.g., say it and show it).

- Simplify written instructions and signs. Take time giving information.

- Have the person repeat the information in his or her own words or ask you questions about anything he or she does not understand.

- Whenever possible use pictures, symbols and actions to help convey meaning.

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Check for comprehension by asking the person to tell you how he or she is going to act on the information you are providing (e.g., directions to a location).

If the person does not understand, repeat the information, using simpler words.

Don’t ask leading questions that elicit certain responses. For example, “You knew you were breaking the law, didn’t you?”

Take extra steps to communicate effectively, ease fear and show support. Above all, use patience.

Law enforcement must respond rapidly to calls reporting that a person with mental retardation is lost or has run away, because an individual with mental retardation may not be able to make the critical judgments necessary to keep himself or herself from injury or other harm. When the person is located, the officer must approach him or her in a calm and reassuring manner because, if called in a loud voice or approached in an aggressive manner, the person may not respond or, out of fear, may seek a place to hide for an extended period of time. When contact is made and the individual appears to be unable to travel independently, or is a juvenile, the officer or deputy should notify family or guardians, or transport the individual to them as appropriate. If unable to elicit information about the person’s residence, officers or deputies should contact the appropriate social services agency.

In conclusion, when officers or deputies respond to someone who has mental retardation, they may need to take a little extra time or make a little extra effort to communicate with and serve the person effectively.
MODULE V: Offenders and Suspects with Mental Retardation

As noted earlier, there is no correlation between mental retardation and criminal behavior. However, people who have mental retardation:

- may not fully understand the concepts of law and illegal activity, or realize that an act is or was criminal in nature;
- may not fully understand his or her involvement in a criminal activity or the consequences of his or her involvement;
- may be vulnerable to manipulation by a law breaker because of their mental retardation; and
- may be particularly vulnerable in an atmosphere of threats and coercion, or in one of false friendliness designed to induce confidence and cooperation.

Also as noted earlier, a person with mental retardation may not understand or comprehend questions he or she is asked. Some people with mental retardation may respond to questions incorrectly or give misinformation. A person with mental retardation may give self-condemning answers regarding his or her part in a crime, if such answers appear to evoke desired attention from the police or others. In numerous cases, people with mental retardation have confessed to crimes they did not commit because of the attention they received from the police or attorneys.

A. Alternatives to Arrest

At times, it may be necessary or desirable to seek alternatives to traditional arrest and incarceration. Although it is not the role of a law enforcement officer to make a judicial decision, officers usually have some discretion in deciding whether to arrest someone or dispose of the case by some means other than arrest. They may exercise this discretion when a situation involves a person who they believe should not be detained or charged, based on evidence suggesting the likelihood of mental retardation and limited understanding of the concepts of law and illegal activity.

For example, officers and deputies may recognize the lack of intent to commit a crime and determine that home care is warranted. Officers and deputies may release the person who has mental retardation to family, friends or guardians and, in doing so, obtain information necessary to complete appropriate reports.

Referral to an agency providing shelter and social services may be another alternative to arrest. Human services agencies (health departments, state or local chapters of The Arc, the local independent living center, special education departments, mental health or mental retardation programs, local associations of people with retardation, family and child welfare organizations,
etc.) may be contacted to provide guidance.

B. Arresting and/or Interviewing

An officer or deputy who takes a person with mental retardation into custody should make every effort to notify parents, legal guardians or other appropriate support people.

In communicating with the person, officers and deputies can follow the suggestions outlined in Module IV for questioning victims and witnesses.

As mentioned earlier, some people with mental retardation have a strong desire to please authority figures and may demonstrate an unusually quick desire to confess. However, the consequences of a confession may not be fully understood by a person who has mental retardation, and he or she may make a false confession in order to cooperate with the officer conducting the interview. This fact is often brought out in court on the issue of admissibility of statements. Therefore, officers and deputies must be cautious in accepting confessions as statements of fact.

Individuals with mental retardation may have difficulty understanding law enforcement procedures and consequences. They are less likely than the average person to be aware of their Constitutional rights, including the Miranda warnings. Even in those cases in which a person appears to appreciate the content of Miranda, officers must be cautious and make every effort to be sure that the warnings are understood. Providing the Miranda warnings in a written form may present additional comprehension problems, since most documents of this type are written at a sixth or seventh grade reading comprehension level, while many people with mental retardation may have poor or no reading skills. Appendix E is a simplified version of the Miranda warnings that may make it easier for a person with mental retardation to understand his or her rights.

Officers should read and explain the modified Miranda warnings slowly and carefully. If officers or deputies are not sure that a suspect understands his or her rights, they should ask the suspect to explain each phrase of the warnings in his or her own words. They can also check for understanding by asking the individual such questions as what a lawyer is and how a lawyer might help him or her.

When there is adequate evidence that the suspect has understood and willingly decided to answer questions without legal assistance, the ADA does not require law enforcement officers to provide an attorney for a suspect with a disability. PERF, however, recommends that whenever interviewing a suspect who has or is believed to have mental retardation, law enforcement officers find legal representation for the suspect and have the attorney present prior to questioning, as a safeguard in protecting the suspect’s Constitutional rights.

If the suspect requests legal assistance, the officers should give him or her help in finding an attorney, just as they would for anyone else.
During the interview questions should be asked simply, clearly and distinctly. As a safeguard to ensure admissibility, PERF recommends that law enforcement personnel videotape an interview with a person with mental retardation, although videotaping is not required by the ADA.

If law enforcement officers believe a suspect may not have been capable, because of mental retardation, of forming the intent to commit the crime for which he or she was arrested, or that a suspect’s mental retardation is relevant in some other way to prosecutorial decision-making, they should inform the prosecutors of their belief and the basis for it. It is important for law enforcement officers to realize, however, that only the information about a suspect’s mental retardation that is necessary for prosecutors to have should be disclosed.

In most cases, standard policies and procedures for arrest and lock-up will apply to people with mental retardation. In some cases, it may be necessary while awaiting arraignment or trial to detain the suspect in an alternative location where his or her health and safety can be more easily protected.

NOTE: Department procedures for arresting and detaining suspects, specifically those dealing with people who have disabilities, should be reviewed here.
NOTE TO INSTRUCTOR: There are many issues to be raised during an open discussion/question and answer period. Instructors should reemphasize key issues such as the lack of correlation between mental retardation, physical appearance and criminality. Among items to be considered for general discussion are:

1. personal experiences of participants in interacting with people who have mental retardation (job-related, family-related, etc.);

2. departmental policies and procedures directly or indirectly relating to the response to people who have mental retardation;

3. the department’s policies and procedures directly or indirectly relating to the police response to people with disabilities (trainers may wish to discuss provisions of the ADA);

4. the detrimental impact of jokes, stereotyping and other biases on the quality of response to people with disabilities, and the importance of treating all citizens with respect;

5. success and failure of support agencies and systems as resources for police officers and deputies (including specific agencies in your community that are most helpful) in meeting the needs of people who have mental retardation, and, if needed, the steps that can be taken to improve such services;

6. consideration of officer safety in interacting with people who have mental retardation;

7. tactical response for situations such as a missing child or adult who has mental retardation; and

8. time required to provide quality service to people with disabilities versus the traditional demand for officers and deputies to handle a call quickly so that they may be readily available to handle other calls for service.
MODULE VII: Other Activities For Instructors

1. Construct and administer a pre-test and post-test, unique to the policies and needs of the local community.

2. Invite individuals with mental retardation to meet with the class to openly discuss their abilities and needs, and any experiences they may have had in contacts with police.

3. Have officers role play the delivery of the *Miranda* warnings to suspects who have mental retardation or have officers role play with the invited individuals who have mental retardation.
INFORMATION AND RESOURCES

For more information on this topic contact the Department of Justice, the local chapter of The Arc, the Disability Rights Education and Defense Fund, one of the regional ADA Disability and Business Technical Assistance Centers, or any of the other organizations cited below:

U.S. Department of Justice
ADA Information Line
800-514-0301 (Voice)
800-514-0383 (TDD)

The Arc of the United States
500 E. Border St., Ste. 300
Arlington, TX 76010
(817) 261-6003 (Voice)
(817) 277-0553 (TDD)

Disability Rights Education and Defense Fund (DREDF)
(800) 466-4232 (Voice/TDD)

U.S. Department of Education
Disability and Business Technical Assistance Centers
800-949-4232 (Voice/TDD)
(Call automatically connects to closest center.)

Disabilities Research and Information Coalition, Seattle (WA)

National Down Syndrome Congress, Park Ridge (IL)

National Down Syndrome Society, New York (NY)

President's Committee on Mental Retardation, Washington, D.C.

Kennedy Institute, Baltimore (MD)
REFERENCES

The following publications were used for reference in the preparation of this curriculum:


PRE-TEST
For Training on Recognizing and Responding To People with Mental Retardation

1. Mental retardation is defined by:
   a. slow speech and deficits in gross motor skills
   b. significantly below average general intellectual functions existing concurrently with limitations in adaptive skill areas
   c. onset of retarded development before age 6

2. Most people with mental retardation have:
   a. severe or profound mental retardation
   b. moderate mental retardation
   c. mild mental retardation
   d. mental illness

3. Communicating with a person with mental retardation is influenced by the individual's:
   a. companion or guardian
   b. mental age and experience level
   c. chronological age

4. People with mild or moderate mental retardation are most likely to remember instructions if you:
   a. tell them to their companion, who will then explain instructions to the individual
   b. write the instructions down
   c. ask the person to demonstrate or repeat the instruction back to you

5. People with mental retardation may find themselves involved with the criminal justice system because:
   a. of the high correlation between mental retardation and criminality
   b. some are unable to use abstract reasoning to understand the consequences of their acts
   c. some are so eager for acceptance that they may be used or manipulated by criminals
   d. they generally refuse to abide by society's rules
6. Adults who have mental retardation may enjoy being around and playing with children because:
   a. they are bigger, and therefore can coerce children
   b. they enjoy playing with people of the same or similar developmental and intellectual levels

7. Police officers and deputies should know the traits of people with mental retardation so they can:
   a. keep them from interacting with known lawbreakers
   b. avoid them on the street
   c. identify the possibility that the person may have mental retardation and react accordingly

8. Before interrogating a suspect who may have mental retardation, officers and deputies should be sure:
   a. the suspect reads the *Miranda* warnings and signs the form
   b. legal representation will be available
   c. that the *Miranda* warnings are understood
PRE-TEST ANSWERS

1. b
2. c
3. b
4. c
5. b and c
6. b
7. c
8. c
APPENDIX A:
Causes of Mental Retardation

• Prenatal Events or Problems
  Environmental Factors
  Genetics
  Disease
  Accidents
  Mothers' substance abuse

• Perinatal Events or Problems
  Environmental Factors
  Disease
  Accidents
  Prematurity
  Anoxia

• Postnatal Events or Problems
  Environmental Factors
  Disease
  Accidents
  Neglect or abuse
## APPENDIX B:
Mental Retardation Is a Condition,
Not an Illness or Disease

<table>
<thead>
<tr>
<th>MENTAL RETARDATION</th>
<th>MENTAL ILLNESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>-Refers to significantly below average intellectual functioning</td>
<td>-Has nothing to do with intelligence</td>
</tr>
<tr>
<td>-Refers to impairment in social adaptation</td>
<td>-Characterized by loss of contact with reality</td>
</tr>
<tr>
<td>-Occurs during the developmental stage (i.e., infancy or childhood)</td>
<td>-Can strike anyone at any time</td>
</tr>
<tr>
<td>-Mental retardation is permanent</td>
<td>-Mental illness is often temporary</td>
</tr>
</tbody>
</table>
# APPENDIX C: Degrees of Mental Retardation

<table>
<thead>
<tr>
<th>Degree</th>
<th>Percentage of MR Population</th>
<th>IQ Levels (100 Is the Average)</th>
<th>Social Skills</th>
<th>Community Integration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild</td>
<td>89%</td>
<td>51-70</td>
<td>Learns academic and prevocational skills with some special training.</td>
<td>May live and work in the community.</td>
</tr>
<tr>
<td>Moderate</td>
<td>6%</td>
<td>36-50</td>
<td>Can be independent in familiar surroundings.</td>
<td>May live and work in the community.</td>
</tr>
<tr>
<td>Severe</td>
<td>3.5%</td>
<td>21-35</td>
<td>Has ability to care for personal needs.</td>
<td>Can contribute in a structured work environment. Can live in a supervised home.</td>
</tr>
<tr>
<td>Profound</td>
<td>1.5%</td>
<td>20 or less</td>
<td>May be able to learn basic self care skills. Secondary disabilities are possible.</td>
<td>May be able to work in highly structured activities. Needs supervised living arrangements.</td>
</tr>
</tbody>
</table>
APPENDIX D:
Tips for Effective Response to People Who Have Mental Retardation

- ARRANGE A CALM SETTING
- IDENTIFY YOURSELF
- STATE YOUR PURPOSE
- SPEAK SLOWLY AND DISTINCTLY; USE SIMPLE LANGUAGE AND REPEAT INFORMATION
- HAVE THE PERSON REPEAT THE INFORMATION OR ASK QUESTIONS
- USE VISUAL AIDS
- OBSERVE NONVERBAL BEHAVIOR
- LISTEN TO WHAT IS SAID AND WHAT IS NOT SAID
- ASK OPEN-ENDED QUESTIONS
- WATCH FOR OVERCOMPLIANCE
## APPENDIX E:
Modified Miranda Warnings

<table>
<thead>
<tr>
<th>Traditional</th>
<th>Modified</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. You have the right to remain silent.</td>
<td>I WANT YOU TO KNOW THAT YOU HAVE RIGHTS.</td>
</tr>
<tr>
<td>2. Should you give up the right to remain silent, what you say can and will be used against you in a court of law.</td>
<td>Number one: You don't have to talk to me. No one will try to make you talk. Please tell me, in your own words, what I told you.</td>
</tr>
<tr>
<td>3. You have the right to have an attorney present during questioning.</td>
<td>Number two: But if you do talk to me, I can tell the court. The judge will find out what you say. The judge will then decide if you did something wrong or not. Please tell me, in your own words, what I told you.</td>
</tr>
<tr>
<td>4. If you want an attorney, but cannot afford one, one will be appointed for you.</td>
<td>Number three: You can talk to a lawyer if you want. You can have a lawyer help you. You can talk to a lawyer before I ask you questions. Your lawyer can be with you when I ask you questions. Please tell me, in your own words, what I told you.</td>
</tr>
<tr>
<td>5. Do you understand these rights as I have explained them to you?</td>
<td>Number four: If you don't have money for a lawyer, we will get one for you. You don't have to pay. You can have the lawyer for free. Please tell me, in your own words, what I told you.</td>
</tr>
<tr>
<td></td>
<td>Number five: Do you have any questions about what I have told you?</td>
</tr>
<tr>
<td></td>
<td>Number six: Do you want a lawyer?</td>
</tr>
</tbody>
</table>