

# Staying calm with mentally ill is key, inquest told; Officers cannot diagnose those with a disorder, psychiatrist says

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It is very important to remain calm when trying to de-escalate a violent situation with a mentally ill person, an emergency psychiatrist testified at a coroner's inquest Friday.

"It's most important to try to engage in a calm manner, but it's one of the hardest things to do," said Dr. Mara Goldstein, who works at St. Michael's Hospital.

Goldstein was speaking at an inquest into the deaths of Reyal Jardine-Douglas, Sylvia Klibingaitis and Michael Eligon, who all suffered from mental health disorders and were holding sharp objects – knives or scissors – when they were shot by Toronto police.

The inquest has heard that new police officers receive 12 hours of training in communicating with the mentally ill, and some refresher training every year. While they are taught to speak softly and offer to help, once the person poses an "imminent threat," their mental state is no longer considered.

Psychiatrists have years of medical training that help them identify disorders and communicate with the mentally ill. Learning how to manage your own fear is a part of that, said Goldstein.

Asked whether she thought front-line police officers would be able to diagnose mental health disorders, she said no.

Goldstein said violence among the mentally ill is rare and difficult to predict. Disorders most likely to lead to dangerous behaviour, such as schizophrenia or psychosis, are less predictable than disorders like depression, she said.

"When it comes to the loss of touch with reality, which is the realm of psychosis, it becomes much less predictable, because the patient is responding to voices they might be hearing and paranoia they might be experiencing."

Under the Mental Health Act, police can take individuals in for a psychiatric assessment if they appear to pose a danger to themselves, a danger to others, or show an inability to care for themselves. The person may be hospitalized for up to three days for an assessment before being released or admitted, voluntarily or involuntarily.

The hospital may refuse admission even when a person is requesting it. Goldstein testified that it is becoming more difficult to gain access to an in-patient psychiatric facility. The inquest has heard that all three shooting victims had had failed interactions with the mental health system.

Klibingaitis, 52, visited the Centre for Addiction and Mental Health 10 days before her death and asked to be admitted. She left the hospital without the doctor's knowledge. Police shot her on Oct. 7, 2011, after she left her home with a knife.

Eligon, 29, escaped from the psychiatric ward of Toronto East General Hospital on Feb. 3, 2012. He was wandering around a residential neighbourhood carrying two pairs of scissors when he was shot dead by police.

Jardine-Douglas, 25, was taken by his family in the early hours of Aug. 29, 2010, to Scarborough Hospital for a mental health assessment. He fled the hospital and later that day was shot by police after he pulled a knife on a bus.