<u>Comments on CPD's Policy Suite on</u> Interactions with Persons with Disabilities Issued May 9, 2025

Submitted to the CPD Portal on May 27, 2025

CPD has continued to refine initial drafts of these policies on police interactions with people with disabilities in important ways. Notably, CPD has reorganized parts of the suite to clarify and streamline the policies. CPD has also added language around accommodations and clarity that officers need not identify the specific disability in order to provide accommodations. The policies have evolved and are far more responsive to the needs and rights of those with disabilities than before. Nonetheless, many of the concerns the Coalition originally raised about the policies remain.

The policies still fall short of acknowledging and addressing the disproportionate harm by police on people with disabilities, particularly people of color who are at higher risk of use of force and arrest.

- The policy still does not provide clear guidance on how officers can avoid harm by avoiding unnecessary interactions with police, calling on non-police responders as an alternative, and avoiding arrests whenever possible. In assessing the situation, the officers should be directed to consider the outcome risks to the person with the disability and whether the law enforcement response is needed at all or if other resources could be more effectively utilized to resolve the issue.
 - o For example, over the last year, officers have demonstrated confusion about the mandates of Illinois law under CESSA and recent program development to increase non-police response options. Clear and effective guidance must be provided to officers on CESSA, the CPD's commitment to collaborate and enhance available non-police response options, and to set forth officers' responsibilities and duties in calls where non-police responders may also be present or may be more appropriate. CPD committed under the consent decree to working to reduce criminal legal systems involvement of people with disabilities due to police interactions. That commitment must be reflected and implemented in this policy with specific protocols to direct police conduct in these interactions to avoid arrest, use of force, and other harmful outcomes.
- While the policies include guidance on de-escalation, they should also provide clear guidance on the approach to prevent any escalation in the first instance, including consideration of how police interactions can escalate interactions with people with disabilities into crisis, or lead to use of force, and whether a police response is necessary at all. This is particularly important in this policy given the well documented history of police escalation of interactions involving people with disabilities.

- As mandated by the Illinois Civil Rights Act and the Americans with Disabilities Act (ADA), the policies should require CPD to determine whether Chicago police more frequently stop, search, arrest, detain, and use force against Black and Latinx people with disabilities compared to white people and if so, analyze whether other law enforcement strategies could achieve the same or better public safety outcomes while reducing the disparate impact on people of color with disabilities.
- CPD should set an express goal of reducing any intersectional disparate impact of policing on people of color with disabilities and create a plan to meaningfully reduce these long-standing disparities.

The policy suite must be revised to give adequate guidance on recording, reporting, and confidentiality of disability information.

- These policies must explain to CPD members their responsibilities to report disability information. Paragraph 119 of the consent decree requires reporting of all incidents involving individuals with mental, behavioral health, developmental, and intellectual disabilities, as well as co-occurring conditions, whether known, suspected, or perceived. See also Paragraph 759 (defining broadly the term "individual in crisis"). Reporting of disability information is also required in use of force reports. See Paragraphs 571 and 572. The policy revision should include evaluation of the forms used and whether changes are needed to appropriately collect the needed information.
- Once CPD begins collecting the required data, as described above, the data should be analyzed and used to track disparities, officer training needs, and possible officer discipline.
- Guidance must be provided on the confidentiality of disability information, including the
 exceptions on when and how disability information may be disclosed or utilized by CPD
 members. Officers should be directed to limit their inquiries into disability-related
 information. Individuals should not be unnecessarily questioned about their disabilities,
 such as, for example, why they need an assistive device, during investigatory stops,
 traffic stops and other encounters.

The categorization of disabilities by physical and non-visible continues to mischaracterize certain disabilities and ignore others, especially mental illness.

• We appreciate the importance of highlighting the fact that many disabilities are not visible. Our ongoing concern, however, is that by distinguishing the policies as between physical or non-visible, officers may be misled about what actions to take or what qualifies as a disability.

- While CPD has separate policies on crisis intervention that include guidance on interacting with people with mental illness (as well as other behavior health issues and developmental disabilities), mental health disabilities are also disabilities within the meaning of federal and state law. See 28 CFR § 35.108. People with mental health disabilities are likely the largest segment of people with disabilities that officers engage with and they must be fully incorporated into these policies.
- The non-visible disability policy continues to define non-visible disabilities without adequate incorporation of mental and behavioral health disabilities. Instead, it reads as a policy primarily regarding individuals with intellectual and developmental disabilities (ID/DD).
 - o In section V. where the policy lists commonly encountered non-visible disabilities, it still only lists autism spectrum disorder and dementia. While these are important disabilities to highlight, mental health disabilities, learning disabilities, speech and language disabilities and TBI are all even more prevalent. By only listing ASD and dementia under section V. it gives the false impression that those are the most common non-visible disabilities.
 - o In section VI. of the non-visible disability policy, again the policy seems to separate someone being affected "by a mental health condition" or in crisis from someone who is a person with ID/DD. The consent decree defines crisis specifically to include interactions with individuals with ID/DD.
- If CPD continues to categorize the policies by physical and non-visible, it is important that CPD makes clear that some disabilities can be both. For example, the physical disability policy includes information on diabetes, that while physical, in many instances is non-visible.

While the policies have improved in emphasizing the legal requirements under the ADA, they must still be refined to clearly convey that the need to make reasonable modifications and accommodations to usual methods of interaction or handling an encounter are required by law.

- The policy's improved legal definition of "reasonable modifications" is welcome. At other places the policies refer to "accommodations," which is not defined. This can be resolved by simply adding a parenthetical noting "also referred to as reasonable accommodations" in the definition.
- The parent policy, section VI. titled "accommodating people with disabilities" only lists accommodations for facilities, service animals, parking, and sign language interpreters. This is far too narrow given that that majority of police interactions with people with disabilities involve those who have mental and behavioral health disabilities. Other

examples should be listed, such as: use of time and space as an accommodation, other communication accommodations beyond sign language interpretation, and also reference to the other guidelines which offer examples of other reasonable modifications.

- In the non-visible disability and physical disability sub-policies, there are various sections: "general guidelines", "accommodating persons who have non-visible disabilities," "effective communication," "de-escalation," and "investigatory stops and custodial arrests." Each of these sections specify important legally required accommodations that need to be understood as such. But by labeling only one of the sections "accommodations," it confuses what is an accommodation that may be required by law to ensure equal access of people with disabilities with what are suggestions of how to interact with individuals with disabilities. In fact, many of the suggestions in the various sections could be legally required accommodations or modifications.
- The ADA definition continues to misstate the purpose of the ADA. The ADA requires that officers not only ensure that people with disabilities are treated the *same* as others, but actually that officers must often do things *differently* when engaging with people with disabilities in order to ensure that, by virtue of their disabilities, they are not subjected to more harsh or disparate results from those encounters. See e.g. 28 CFR § 35.130(b)(7) and (8).

The policy must provide more than a training bulletin to train officers. For training to be effective it must be in-person, interactive and incorporate the experiences of people with a broad range of disabilities. A training bulletin simply is not enough.