The Police Negotiation Cadre of the Hong Kong Police

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Abstract

When suicidal individuals are in a crisis mode and an extremely dangerous physical position, a structured and intentional way of communication to facilitate the person-in-crisis from being highly emotional to rational in a very short time is very challenging. The revised Behavioral Influence Stairway Model (BISM-2) provides the method by which law enforcement officers or negotiators reestablish social support of person-in-crisis through effectively dealing with emotions, demonstrating empathy, establishing rapport, and initiating behavioral change through influence and credibility of the negotiator during the negotiation. In Hong Kong, the Police Negotiation Cadre (PNC) routinely deals with a unique form of suicide where persons-in-crisis frequently choose jumping off high-rise buildings

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as their preferred means of suicide. This chapter aims to introduce the BISM-2 model and its implication in suicide crisis negotiation. A real case study is included to illustrate the efficiencies and usefulness of the BISM-2 for suicide by jumping from a height. The chapter will end with a recommendation of how post-crisis intervention should be recognized as an essential suicide prevention initiative.

Keywords

The revised Behavioral Influence Stairway Model (BISM-2) · Suicide crisis intervention · Negotiation · Hong Kong · Case study

Introduction

Globally, there are approximately 800,000 people who complete suicide on an annual basis. Asian countries account for approximately 60% of all suicides, but there is a great mismatch in the region between the scale of the problem and the resources available to prevent suicide in these countries [52]. Hence, in addition to the limited availability of medical and mental health professionals, non-allied health professionals such as law enforcement officers play important task-sharing roles in suicide prevention in the community. The existence of easy access to lethal means in Asia, e.g., pesticide and high-rise buildings, contributes to many impulsive suicidal behaviors that require the immediately available measures from non-clinical professionals.

Hong Kong is one of the world's most populated cities with a population density at 6930 persons per km^2 (with an area of 1106.8 km^2 sustaining a total population of more than 7.5 million). Inevitably, more than 90% of the residents live in high-rise buildings [5]. Unofficial figures find that Hong Kong ranks first in the world in numbers of both skyscrapers and tall multistory buildings with more than 7832 existing buildings [27]. There were about 910 suicides (12.2 per 100,000 in 2018) in Hong Kong [6], and jumping from a height is the most common method for suicide mainly due to easy access to buildings.

Wong et al. [50] examined suicide by jumping in Hong Kong that occurred between January 1, 2002 and December 31, 2007, using Coroner's Court death files, and found that the Coroner recorded 6125 suicides with known ages and places of death and jumping accounted for 2964 deaths (48.4%). The vast majority (2521 or 85.0%) of suicide by jumping in Hong Kong occurred at residential locations: 1501 (50.6%) occurred from within the decedent's apartment, 292 (9.9%) from the same floor, and 552 (18.6%) from the same building or housing estate. Only a small percentage involved jumping from heights in public areas (5.3%): hospitals (1.1%) and holiday houses (1.6%). The very high proportion of suicide by jumping occurred from decedents' apartment, or nearby residential settings is consistent with other research findings where high-rise buildings are prevalent [7].

Means restriction is one of the most highly effective evidence-based methods of suicide prevention [7]. It is documented that erecting physical barriers in public areas, such as bridges and railways, can reduce the number of highly public ("iconic") suicidal deaths occurring at those sites around the world [16, 26, 49]. With regard to reducing the overall suicide rate in Hong Kong, suicide by jumping however should be considered as an entirely different phenomenon than jumping suicides at public or iconic places because most suicides in Hong Kong are ecologically embedded and occur at the residence of the deceased. This phenomenon, along with the ubiquity of high-rise residential buildings in Hong Kong, highlights the inability of implementing restriction of means as an effective suicide prevention strategy for residential suicide-by-jumping incidents. Moreover, the proximity of residential high-rise buildings often thwarts the effective use of suicide prevention equipment such as air mattresses.

A characteristic of residential suicide-by-jumping incidents is its high visibility. Most suicidal individuals typically climb out of a window or balcony from his or her own apartments or go to the roof of the building to jump, where they are easily seen from the ground and other buildings. Most of these incidences occur because of interpersonal crises and oftentimes the suicidal person has not yet decided to jump. This hesitation makes the act even easier to be noticed by others and reported to the police. Hence, this creates an opportunity for law enforcement officers, especially the police negotiators, to engage the suicidal persons by using suicide crisis intervention communication. Therefore, police negotiators in Hong Kong play a significant role in suicide prevention during the window of opportunity presented by the suicidal person-in-crisis' indecision and dilemma on whether to live or die at the height. This chapter aims to explain and illustrate with a very recent real case study on how the Police Negotiation Cadre of the Hong Kong Police Force use suicide crisis negotiation base on the revised Behavioral Influence Stairway Model (BISM-2) to prevent suicides by jumping from residential buildings in Hong Kong.

The Police Negotiation Cadre of the Hong Kong Police

The Police Negotiation Cadre (PNC) of the Hong Kong Police Force (HKPF) provides 24 h callout services to resolve imminent crisis situations through negotiation. The cadre is composed of specially trained police officers with a wide spectrum of expertise within the HKPF who voluntarily assemble to resolve crisis situations through negotiation. The PNC was established in 1975, originally as a segment of the HKP counterterrorism response mechanism, making it the second oldest police negotiation team in the world; only the New York Police Department has an older police negotiation team [21].

To become a PNC member, interested police officers must go through a 1-day selection program that includes the ability to listen, participate in impromptu communication, and resolve simulated crisis situations, such as suicide and barricaded incidents. Thereafter, candidates are assessed on their performance, and they must pass a psychological examination. Successful candidates undergo an intensive

2-week training program that emphasizes the ability to perform under stress and fatigue. The training involves over 120 h of lecture, skills practice, and role-playing with special emphasis on crisis and suicide negotiation. Upon successful completion of the training, each new member participates in callouts under the direction of an experienced negotiator [21]. The PNC continually conducts in-house training for their negotiators using specialists from other overseas crisis negotiation teams such as the US Federal Bureau of Investigation (FBI), the UK Metropolitan Police, Scotland Police, Australian Federal Police, and the Singapore Police [21].

Crisis Intervention in Theory

Caplan [2] and Carkhuff and Berenson [3] described a crisis as that which a person perceives as presenting overwhelming obstacles to achieving desired goals or outcomes but cannot be managed through the usual problem-solving methods. In most, if not all crisis situations, the involved individuals are characterized by having irrationality and overly expressive behavior from the perspective that emotions, rather than reason, are driving behavior [31, 34]. Moreover, the persons-in-crisis often perceive a loss or fears the loss of something of value or a need, i.e., grievance and injustice, rejection from significant others, loss of employment, a decline in health status, financial reversal, or loss of freedom [17, 18, 24, 25, 29, 35, 44], and the blame for that loss is usually placed on a person, group, or organization.

Hence, a crisis state has the following general characteristics: (1) the person-in-crisis behaves at an intense emotional and irrational level (rather than at a rational/thinking level in clinical settings) in response to a situation that is perceived as overwhelming, (2) the situation has usually occurred within the past 24 to 48 h, and (3) the event is seen as a threat to one's physical, psychological, and/or social well-being [34, 45]. The crisis state is frequently the result of confronting situations that the person-in-crisis has never encountered with feelings of helplessness, hopelessness, and powerlessness and perceived absence of social support [31, 34].

Before the persons-in-crisis enter the crisis stage, they may have sought help from people in their social support networks. When no one is willing or can assist, then the person goes into a crisis mode. Accordingly, his/her normal functioning driven by rationality is disrupted, and the problem-solving cognitive process is now dealt with on an emotional level which further enhances the volatility of the crisis [45]. Therefore, restoring the ability of a person to cope through the reestablishment of baseline functioning levels is the primary purpose of crisis intervention [19, 23, 33, 44, 48].

The Revised Behavioral Influence Stairway Model (BISM-2) in Crisis Negotiation

Crisis intervention is a specialized and intentional process that involves the venting of emotions and building credibility between the negotiator and the person-in-crisis to a point process of assisting the person-in-crisis in returning to his or her normal

functioning level, and the negotiator becomes part of the social support network of the persons-in-crisis in a very short period of time [13, 34].

The original Behavioral Change Stairway Model (BCSM) was developed by the FBI's Crisis Negotiation Unit [47] and is comprised of five stages that lead to behavioral change of the person-in-crisis. These stages occur in a specified order: (1) active listening, (2) empathy, (3) rapport, (4) influence, and (5) behavioral change [22, 42, 43, 45]. It is important to note that these stages occur in sequence and one stage cannot be skipped to get to the next stage faster. For example, a negotiator cannot skip from Stage 1 (active listening) to Stage 4 (influence) without first having developed empathy and rapport (Stage 2 and Stage 3) with the person-in-crisis [42, 44]. The most important thing to remember is that if the negotiator is not making progress, it is always best to go back to Stage 1 and start over again. Another critical aspect of the BCSM is the importance of frame of reference [28, 33, 44]. In this context, the negotiator must be aware of when to stay in the person-in-crisis' frame and when to transition to the negotiator's frame [28].

Due to the rather inflexible nature of the stairway structure of the BCSM, the model was revised with respect to reorienting active listening as the foundation of the stairway (rather than just the first step), focusing on negotiator influence rather than person-in-crisis behavioral change, and emphasizing the development of a relationship between the negotiator and the person-in-crisis as the basis for generating instrumental behavior on the part of the subject [12, 22, 32, 45].

Recently, the Behavioral Influence Stairway Model (BISM) [46] was further improved that makes a distinction between rapport and trust as the transition point between moving from the person-in-crisis' frame of reference to the negotiator's frame [28]. In addition, another improvement of the BISM-2 was changing "relationship" to "credibility" as a better descriptor of the person-in-crisis' perception of negotiator expertise and trust [20]. The BISM-2 (see Fig. 1) graphically depicts and explains the process of influencing instrumental or rational behavior on the part of the person-in-crisis and building credibility on the part of the negotiator in an effort to establish an environment where the person-in-crisis voluntarily accepts and acts upon the suggestions and directions of the negotiator [44]. The negotiator tries to prompt the person-in-crisis to have the responsibility for generating instrumental behavior to help oneself [13, 22, 32, 45].

The Revised Behavioral Influence Stairway Model (BISM-2)

Stage 1: Core Active Listening Skills

Persons-in-crisis have a universal need to have their unique stories or narratives be heard and understood [2, 3, 33, 38, 44]. Active listening attends to these needs from the standpoint of the person-in-crisis, and it is the first step in diffusing intense negative emotions and developing negotiator credibility that will ultimately lead to behavioral change and an end to the crisis [33, 34, 39, 40]. Active listening encourages the person-in-crisis to ventilate emotions, and the negotiator tries to create a safe environment for the persons-in-crisis to discuss the underlying issues of

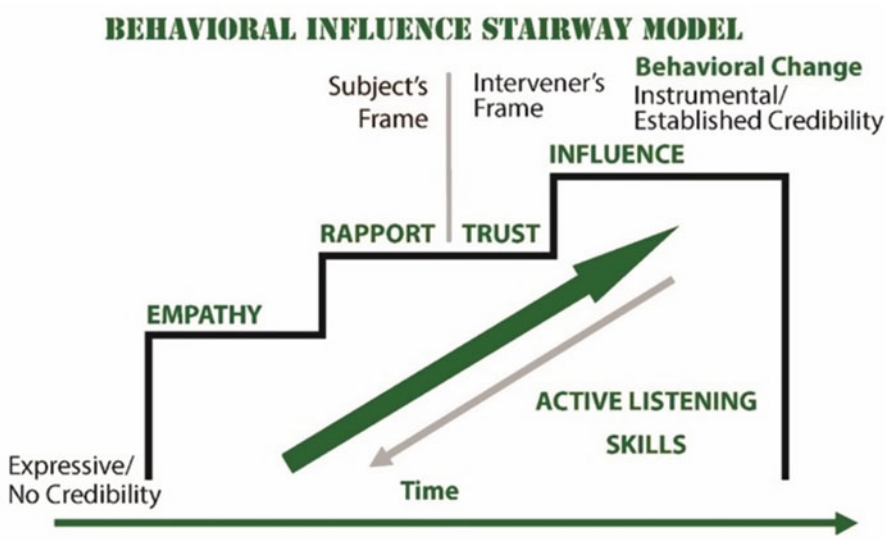

Fig. 1 The revised Behavioural Influence Stairway Model (BISM-2)

event(s) that resulted in the crisis, and it provides the foundation for influencing the person-in-crisis to voluntarily comply with the suggestions and directions of the negotiator [15, 32, 44]. Therefore, it is the responsibility of the negotiator to determine the needs and concerns of the person-in-crisis from his or her perspective and empathetically echo those needs and concerns back to the person-in-crisis in their frame of reference based on the limited available information the negotiation team may have at the onset of the negotiation [38].

To examine the core needs and concerns of the person-in-crisis, the negotiator must "draw" out these elements without asking them directly [15] and hopefully with the support from other negotiators at the back to triangulate the information. This amounts to staying in the person's frame of reference and ensuring that it is "all about the person-in-crisis" and not about the negotiator [42]. For example, if the negotiator simply states, "I know you're hurt because your wife left you," the response from the person-in-crisis may be something like, "You don't know anything about me, just go away." In this example, the negotiator left the frame of the person and spoke from his own point of view, which is an obstacle to negotiation. If, for example, the negotiator had said, "you sound really hurt about your wife leaving you," this keeps the negotiation in the person-in-crisis's frame of reference; thus, the person-in-crisis may reply: "I am hurt, because I really love her." In this example, the negotiator stays in the person-in-crisis's frame, which demonstrates empathy and further credibility on the part of the negotiator [15, 22, 42, 43, 45]. The ability of the negotiator to "step out of the conversation" and remaining in the person-in-crisis' frame creates a perception of safety while mutual purpose and mutual respect are developed [32].

Active listening skills form the foundation of the BISM-2 and are comprised of core and supplemental groupings. The core group comprises the elements of mirroring, paraphrasing, emotion labeling, and summarizing [36–38, 39–42, 44]. The supplemental group consists of minimal encouragers, open-ended questions, effective pauses (silence), and "I" statements [36, 37, 39–42, 46]. Although there are no hard or fast rules, supplemental active listening skills should be used when necessary to enhance the effectiveness of the core skills towards influencing behavioral change [22, 39, 40, 42, 43, 45].

Mirroring is the first core active listening skill employed because it demonstrates attentiveness on the part of the negotiator and it "draws" out elements of what is important to the person-in-crisis, which can then be used to determine the most important concerns and needs of the person-in-crisis [22, 42, 43, 45]. Mirroring refers to repeating the last few words or keywords of what the person-in-crisis has used. By repeating the last few words of the person-in-crisis, the negotiator encourages the person-in-crisis to keep on talking, which results in drawing out "new" material for the negotiator to work with that is relevant to the person-in-crisis. Mirroring ensures that the discussion content is provided solely by the person-in-crisis rather than by the negotiator, thereby keeping the conversation in the person-in-crisis's frame of reference, thus furthering the negotiation [28]. Here is an example of a mirroring exchange between the person-in-crisis (P) and the negotiator (N):

P: "They just don't care."
N: "They don't care."
P: "Yeah, that's why I got fired."
N: "You were fired."
P: "Yeah, I got fired because management doesn't care about me and wanted to hire Robert."

Paraphrasing is a process where the negotiator restates what has been said in his or her own words back to the person-in-crisis [47]. Paraphrasing is used by the negotiator to restate the content of what the person-in-crisis said during the mirroring process to ensure that the negotiator understands the information from the perspective of the person-in-crisis [38]. This demonstrates to the person-in-crisis that the negotiator is trying to understand his or her specific situation from a cognitive or content perspective. When a negotiator paraphrases what the person-in-crisis said in his or her own words, it is perceived as empathy by the person-in-crisis and demonstrates that the negotiator is engaged, cares, and is listening [22, 42, 43, 45]. Here is an example of paraphrasing: "You were fired because Gilbert decided to let you go because they wanted to hire Greg."

Emotion labeling is the key to reestablishing a sense of rationality to the person-in-crisis, which must be present before problem resolution can occur [22, 42, 43, 45]. Emotion labeling refers to the negotiator identifying the emotion(s) that the person-in-crisis is feeling and simply relaying it back to the person-in-crisis [47]. This gets at the heart of what the person-in-crisis is experiencing because

most content issues are surrounded by emotion(s). Labeling the person-in-crisis' fear of loss and inability to cope diffuses his or her power, and it interrupts the person-in-crisis' feeling pattern, which provides the opportunity to generate newer feelings, such as safety and well-being [47]. Even if the negotiator misidentifies the emotion, it still demonstrates to the person-in-crisis that the negotiator is trying to understand the situation, which tends to deescalate highly volatile emotions. Here is an example of emotion labeling: "You sound angry," "You seem frustrated," or "I hear disgust in your voice."

Summarizing combines the content of the paraphrase with the feeling identified by emotion labeling into the negotiator's own words [47]. This process is a final clarification by the negotiator of what the person-in-crisis is experiencing, and it assures the person-in-crisis that the negotiator understands the situation from the perspective of the person-in-crisis [22, 38, 42, 43, 45]. An example of summarizing would be: "Let me make sure I understand what you're saying. You lost your job because they wanted to hire Greg and that make you angry, Paul. Am I right?"

Supplemental Listening Skills

Unlike the core active listening skills, the following supplemental active listening skills (minimal encouragers, open-ended questions, effective pauses, and "I" statements) are not used in any specified order but are used to enhance the efficiencies and effectiveness of the core active listening skills [22, 42, 43, 45]. Minimal encouragers are verbal and nonverbal cues to the person-in-crisis that the negotiator is being attentive to what he or she is saying and experiencing [8, 9]. They also demonstrate that the negotiator is psychologically present with the person-in-crisis and that the negotiator is genuinely trying to understand the perspective of the person-in-crisis [47]. Minimal encouragers are used while the negotiator is listening [22, 42, 43, 45]. Verbal encouragers are comments such as "uhhuh," "yes," "right," and "okay." Nonverbal encouragers are actions such as nodding the head, tilting the head, leaning forwards, watching the person-in-crisis's eyes or mouth as they speak, or mirroring the nonverbal behaviors of the person-in-crisis.

Open-ended questions prompt the person-in-crisis to expand on his or her concerns and perspective and encourages clarification, which is used by the negotiator in employing more primary active listening strategies (mirroring, paraphrasing, emotion labeling, and summarizing) all in an effort to bring the person-in-crisis to a more rational state of mind [22, 42, 43, 45]. Open-ended questions do not limit the responses to *either-or* or *yes-no* answers but require elaboration and detail on the part of the person-in-crisis. Open-ended questions may include questions that start with "what" or "when" or statements such as "tell me more about. . . ." Open-ended questions can also be used by the negotiator to take the conversation in a specific direction, such as assessing the degree of threat to another person. For example, if the person-in-crisis has relayed that he lost his job because "my horrible boss fired me," then the negotiator could move the conversation towards determining the status of the boss by asking "tell more about your boss."

Effective pauses or silence before or after meaningful comments by the negotiator provides the person-in-crisis the ability to focus on what the negotiator is saying

[22, 42, 43, 45]. Pausing just before or after saying something important tends to cause the person-in-crisis to listen to the content of the message because the pause breeds anticipation (if done before the meaningful comment) and reflection (if done after the meaningful comment). Effective pauses are especially good when used following an open-ended question, which sets up a quid pro quo situation where the longer the pause, the more tempting it is for the person-in-crisis to respond. For example, the negotiator could use an effective pause in this way: "Tell me about where you grew up. . . (pause)" or "Let me know if I have this right. . .(pause). . .you are angry with your mother because she never showed you love" or "You sound angry about the loss of your father. . .(pause). . .tell me more about that."

"I" statements are the only time a negotiator should consider leaving the person-in-crisis' frame of reference during Stage 1 of the BISM-2 [44]. "I" statements can be used sparingly to generate empathy or to neutralize verbal attacks by the person-in-crisis [22, 28, 42, 43, 45]. To generate empathy, "I" statements are used by the negotiator in the form of appropriate self-disclosures within the context of what the person-in-crisis is describing. For example, the negotiator may say: "I am a father too, but I can't imagine what it must be like to lose a son. It must be terrible." When being verbally attacked, the negotiator can use the "I" statement to gently point out a person-in-crisis's counterproductive behavior. For example, the negotiator could say: "When you say that I don't care, it frustrates me because I am trying to understand your situation and I really want to help you." Once the negotiator has completed the "I" statement following the person-in-crisis's verbal attack, he or she should immediately return to the person-in-crisis's frame, for example: "Now tell me more about when you lost your job."

It is noteworthy that for active listening to be effective, the person-in-crisis must maintain a sense of ownership over the outcome of the crisis, which can only be accomplished via perception management and remaining within the frame of the person-in-crisis [28]. In many cases, the negotiator is the only person in the life of the person-in-crisis who has tried to understand and respond to the crisis in the person-in-crisis's frame of reference [28]. In these cases, the negotiator becomes the missing social support in the person-in-crisis's life, and it is this support that takes the person-in-crisis out of crisis, eventually providing the negotiator an opportunity to suggest coping strategies and ultimately solutions to the crisis [44].

Stage 2: Empathy

Empathy implies an identification with and understanding of another's situation, feelings, and motives [22, 42, 43, 45]. The negotiator uses empathy to see through the eyes of the person-in-crisis [15, 38]. An example of an empathetic statement would be: "It is understandable how you would be angry over that." In crisis intervention, the goal is not to feel pity for the person-in-crisis but to establish credibility through effective communication whereby positive and constructive steps can be taken towards resolving the crisis in a collaborative fashion [38]. A person-in-crisis will not care about what the negotiator has to say until the person-in-crisis is convinced that the negotiator genuinely cares and wishes to help [20].

An important consideration with regard to developing empathy is the importance of tone [44]. Tone indicates attitude and genuineness through inflection and pitch, and it expresses emotion, demeanor, and projected sincerity. Tone influences how the person-in-crisis perceives the meaning of what the negotiator is saying. It is this perception of meaning that counts the most in effective crisis intervention, whether the perception is based in reality; therefore, all strategies and tactics must be based on their impact upon the person-in-crisis. The way a negotiator says something is far more important than the content alone. Empathy seeks to first understand and then to be understood on the part of the negotiator, which form the building blocks of rapport and trust [15, 22, 38, 42, 43, 45].

Stage 3: Rapport-Trust

Rapport and trust can be built simultaneously; however, there are important differences for negotiation. Rapport focuses on establishing a bond or connection between the negotiator and the person-in-crisis that is characterized by smooth, in-sync communication, mutual affinity, and respect [20]. Rapport requires the negotiator to remain in the person-in-crisis' frame of reference, as most people enjoy talking about themselves, especially with respect to their values, feelings, and thoughts [20, 28]. Good rapport is characterized by the ability of the negotiator to make the person-in-crisis comfortable in talking about his or her concerns and needs through proper pacing [20]. Pacing is the process of matching the person-in-crisis in conversation. For example, if the person-in-crisis is exhibiting anger, the negotiator should also become angry (but only briefly) in order to sync with the person-in-crisis, thus allowing the negotiator to lead the person-in-crisis out of his or her negative frame [20, 28]. Another aspect of pacing is matching the rate of speech, as people speak at a rate that is consistent with their thought processes and internal representations [20]. Persons-in-crisis process information through feelings and emotions and tend to speak slower than normal; therefore, it is important for the negotiator to match the person-in-crisis's rate of speech to be more effective in gaining rapport [20, 33, 34].

As rapport increases, it transits into trust, where the person-in-crisis believes that the negotiator is reliable, is truthful, and will act on what he or she says. It should be noted that as trust is established, the negotiator necessarily transitions into his or her own frame of reference in order to guide the person-in-crisis to an acceptable resolution [15, 28]. Once trust has been developed, the person-in-crisis is poised and ready to listen to what the negotiator suggests and, as a result, the person-in-crisis is ready to be influenced by the negotiator to act. Trust leads to person-in-crisis compliance provided it has been established before the request is made [8, 9].

Stage 4: Influence

Once the negotiator has demonstrated interest, care, and an understanding of the person-in-crisis' problems, as well as mutual affinity and confidence with the person-in-crisis, then the negotiator has established influence [22, 39, 40, 42, 43, 45]. Influence is the act or power of producing an effect without apparent force or direct authority, that is, the negotiator is now able to lead the negotiation [20]. Influence can be affected by the negotiator through careful applications of positive affirmations, a

cooperating and helpful attitude, and reciprocation [8, 20]. Positive affirmations are non-patronizing or non-placating compliments based on facts that the negotiator makes to the person-in-crisis to demonstrate reverence and respect. For example, if the person-in-crisis is a father and has indicated that he loved his children, then the negotiator could comment, "Paul, it seems that you really love your kids and that makes you a good man."

Being cooperative and helpful is the basis of why negotiation works because this element allows the negotiator to end the crisis by becoming the person-in-crisis' "social support network." The negotiator should use keywords such as "we" and "us" when referring to helping the person-in-crisis. Reciprocity breeds influence because of the human tendency to return favors. This quid pro quo obligation develops when the negotiator is kind and understanding, and it is cemented once the person-in-crisis trusts the negotiator. The very fact that the negotiator is trying to help the person-in-crisis is oftentimes enough to compel reciprocation, as it is challenging to remain difficult with someone who is trying to help [8, 15].

Keep in mind that at this stage in the BISM-2, the person-in-crisis has left the irrational and emotional stage and is ready to entering into a rational state of mind and the negotiator has established credibility with the person-in-crisis to the point where the person-in-crisis is willing to accept the suggestions and act upon the directions of the negotiator as a prelude to behavioral change [15, 22, 42, 43, 45]. In other words, the negotiator has earned the respect to suggest a course of action to the person-in-crisis, and they work together to identify solutions and alternatives that are mutually acceptable. Once influence is established, the negotiator builds themes, defense mechanisms, minimizations, or blending concepts that serve as precursors to ending the crisis [17, 18, 24, 25, 29, 33, 35, 44]. Themes comprise reasons that would explain, justify, mitigate, or excuse the crisis, and it addressed distorted thinking by putting a "different narrative" on the situation. Defense mechanisms use rationalization and projection of blame to reduce volatile emotions, whereas minimization downplays any negative behavior exhibited by the person-in-crisis. Blending is where the negotiator and person-in-crisis agree where they can without conceding, reduce real or perceived differences, and find common ground.

Stage 5: Behavioral Change

Behavioral change will occur only if the previous four stages have been successfully completed and credibility has been formed on the part of the negotiator with the person-in-crisis. It cannot be stressed enough that the key to behavioral change and successful crisis intervention and negotiation is a positive relationship between the negotiator and the person-in-crisis, via the implementation of active listening, empathy, rapport-trust, and influence strategies and tactics [22, 42, 43, 45]. It is only at this point that the person-in-crisis will do as the negotiator suggests for no other reason than the fact that the negotiator asked the person-in-crisis to do so.

Special Considerations During Suicide Crisis Negotiations

There are several behavioral and verbal clues that indicate potential suicidal tendency and severity of the person-in-crisis, and the negotiator must be aware of them

through the stages of negotiation. The behavioral clues may include (1) giving personal items away, (2) putting affairs in order, (3) writing a note, (4) tested or trialed with the particular suicide means, (5) slowed thinking or indecisiveness, (6) mood changes, (7) sudden elation-hyperventilation, and (8) withdrawal or reckless or impulsive behavior. Some direct and indirect verbal clues may include the following: (1) "You won't have to put up with me any longer."; (2) "I can't go on."; (3) "I will resolve my problem my own way."; (4) "I'll make _____ suffer."; (5) "They'll be better off without me."; (6) "All of my problems will end soon."; (7) "I just wish it would all end."; (8) "I wish I were dead."; (9) communicating in the past tense, and (10) a verbal will [36, 37, 43].

There are questions that negotiators can use to explore the suicidality of the person-in-crisis explicitly: (1) "Are you having thoughts about killing yourself?"; (2) "Do you have a plan for committing suicide?"; (3) "What are you planning to do?"; (4) "How long have you been planning it?"; (5) "Have you ever had thoughts about killing yourself before?" "When?" "What stopped you before?"; (6) "Have you ever tried to kill yourself?" "What happened?"; and (7) "Have you been drinking or using drugs?"

Also, when speaking to a suicidal person-in-crisis, the negotiator should encourage talking openly about the finality of death. Efforts should be made to find out what is meaningful and valuable to the person-in-crisis and use these "hooks" to identify other options and alternatives. The negotiator should emphasize reasons against suicide such as the following: (1) foster the belief that the person-in-crisis can eventually cope with and survive the crisis or loss; (2) point out the grief or hardship on their family; (3) concerns about the effects of suicide on their children, if appropriate; (4) pain of dying and unknown consequences about the finality of death; (5) social disapproval; (6) moral, religious, and ethical reservations; and (7) emphasize that *suicide is a permanent solution to a temporary problem* [43, 44].

Uniqueness About Crisis Negotiation with Suicides-by-Jumping

According to Dalfonzo [11], most suicidal individuals choose jumping from a height as the suicide means for several reasons: (1) convenience, (2) high visibility causes greater chance for intervention, (3) dramatic public spectacle, and (4) making a statement and getting a response from others. Dalfonzo [11] classified jumpers into two categories: (1) suicidal individuals and (2) subjects with other motivations (SWOM). Suicidal individuals are those individuals who have decided to end their lives by jumping from a height. Intervention with suicidal individuals usually involves verbal or physical distraction of the person-in-crisis while the negotiator or other individuals physically prevents the person-in-crisis from jumping for the prevention of accidental slipping. SWOMs, which account for approximately 84% of jumpers, are those individuals who use threats of suicide as a *cry for help* in obtaining attention and resolution to other problems relating to the family, work, or other relationships [11, 12]. Having said that, given the prevalence of suicide by jumping and easy access to high-rise buildings in Hong Kong, the jumping from a height suicidal phenomenon would have a mixture of multiple reasons and explanations that may be different to the situation as descried by Dalfonzo [11].

Since most suicide-from-height negotiations involve face-to-face negotiations, the negotiator should make sure they are physically safe and attempt to describe the safest way for the person-in-crisis to come down from their dangerous position. This should be done very early in the negotiations and in a non-threatening and nonjudgmental manner. For example, the negotiator may say: "It seems that you are not ready to come down or you are in such a dangerous position that you cannot come down by yourself, when you do want to come down, could you please accept the help by the fire service officers. . . ." It should be noted that while person-in-crisis are on the ledge, they may experience a feeling of power and control over others, including the negotiator. As such, the person-in-crisis may make threats. It is important that the negotiator understand the difference between offensive and defensive threats [12]. Offensive threats involve threats of action taken unilaterally by the person-in-crisis, such as threatening to jump because of something that happened. Defensive threats involve threats of action taken if the negotiator does something, such as "If you try to grab me, I will jump." The negotiator has little control over offensive threats; however, the negotiator has much control over defensive threats. Also, the physical positions of the negotiator must also be concerned to protect the safety of the negotiator. If the negotiator is in a rather dangerous and energy-consuming position, other negotiators on the scene may take turn to talk to the person-in-crisis with his or her acknowledgment.

There is another group of people called baiters who may affect the outcomes of the suicide crisis intervention. Baiters are individuals who taunt, jeer, or even encourage the person-in-crisis to jump and are usually present in large crowds, or when the crowd is a substantial distance from the person-in-crisis, which is particularly common in the context of Hong Kong. The removal of the crowd can be used as a tactic to gain influence with the jumper [11, 12]. For example, the negotiator might say, "Paul, the people down there seem to agitate you and are getting in our way. Would you like me to have them removed?" Other tactics the negotiator can use is to minimize the "drama" of the event by removing bystanders, emergency vehicles, news reporters, and other visual or auditory stimuli from the person-in-crisis's view. This is also called "normalizing the perimeter," and it is effective in getting the person-in-crisis to consider other alternatives to suicide. The negotiator should "soften" his or her appearance by wearing plain clothes and concealing any weapons or police equipment and formulate delivery plans that require the person-in-crisis to come down to receive the item (food, cigarettes, water, etc.) even if the person-in-crisis only comes down temporarily.

However, indicators of progress that the negotiation is working can be subtle but visible and may include the following: (1) the person-in-crisis facing the negotiator or making eye contact, (2) the person-in-crisis allowing the negotiator to get closer, (3) the person-in-crisis telling the negotiator he or she is tired or afraid, and (4) the person-in-crisis disclosing what he really wants, be it tangible (i.e., a bottle of water, a cigarette) or intangible (i.e., a wish to talk to a family member) [11, 12]. Suicide can be the result of change, choice, control, self-punishment, punishment of others, or mental illness. Suicidal feelings, thoughts, and behavior are almost always associated with symptoms of depression, anxiety, or the result of medical problems

involving a chemical imbalance [10, 36, 37]. Negotiators should always be concerned and relay compassion when the possibility of suicide is raised, and it is important to take immediate steps to address it by practicing the above.

A Real Case Study in Hong Kong

This case study happened in Hong Kong in April 2020 and the negotiating team spent about 13 h to persuade the 16-years-old to be rescued by the fire service officers and the young person was finally persuaded to abort his suicide attempt. The following case illustration includes information collected at the scene, discussions and interviews with the involved police officers, and an interview with the parents of the young person about 3 months after the event. The inclusion of the case study in this chapter aims to document and explain how the BISM-2 is implemented in a very imminent risky real-life situation.

The person-in-crisis was a 16-year-old male who was born in the Mainland China and moved to Hong Kong about 4 years ago. He lived with his mother and elder sister at the time when he attempted suicide, and his father was living in Yunnan, China, because he disliked the idea of living in Hong Kong. The person-in-crisis had been receiving neuropsychological treatment from a public hospital with no known psychiatric disorder for several months before the attempt. A day before the attempt, the young man had a dispute with the mother over the heavy use of computer and Wi-Fi during the school lockdown due to the COVID-19 situation, and the young man had locked himself in his room for almost 40 h after the dispute. At around 1400 h on a Saturday, the young man climbed out of the window from his room and sat at the building ledge of the 18th floor (see Picture 1) after hours of seclusion in his room.

The incident was then reported to the police and officers from the Hong Kong Police Force and the Fire Services Department arrived. The fire services officers assessed the situation and indicated that given the height (18th floor) and the dangerous location (at a very narrow windowsill) of the young man at the building ledge, rescue could only be made if he were cooperative. In other words, any physical rescue (i.e., air mattress) would not be effective and suicide crisis negotiation appeared to be the only option for resolving this incident. Accordingly, the Police Negotiation Cadre (PNC) was summonsed and 10 PNC team members arrived at the scene and started to negotiate with the young person. Below shows the process of the negotiation and the usage of skills of the BISM-2 model.

Timeline	Explanations	Verbal questions or nonverbal gestures/skills used
1240 – Fire Services Department (FSD) referred the "person lock-in" case to police	Before the PNC team arrived, the person-in-crisis climbed out of the window and FSD assessed the safety of the person-in-crisis and the surrounding and decided that negotiation may be the most appropriate way to help given	

(continued)

Timeline	Explanations	Verbal questions or nonverbal gestures/skills used
	the dangerous position of the person-in-crisis	
1344 – PNC was summonsed		
1430–1440 – PNC members arrived	For division of labor, one member was assigned as the negotiate person. Other members are responsible to liaise with person-in-crisis's family, friends, or other significant people to gather more information about the person-in-crisis. In this case, the father (through WeChat because he was in China), the mother, the sister, the neuropsychologist, and a friend were either contacted by phone or talked directly	Active listening and teamwork
1442 – A female PNC member proposed to deliver a can of soft drink to person-in-crisis but was refused	To initiate conversation and for rapport building. However, the person-in-crisis probably saw accepting the offer was a sign of accepting the help by PNC. To maintain the control over the police, he refused to accept the offer. The female PNC also asked a few questions to break the ice, but the person-in-crisis refused to say anything as well	Empathy – Offering the soft drink was used to show a caring attitude
1450 – A male PNC member took over the negotiation	Since the person-in-crisis refused to talk to the female PNC, it was thought that changing to a male member might help	Active listening skills, mirroring – PNC member mirrored the person-in-crisis's behavior, e.g., sitting, to create a sense of coherence
1545 – An additional male PNC member joined the negotiation	The person-in-crisis did not say much nor responded to the PNC even when different topics were brought up	Rapport-trust building – with an additional PNC member, they could take turn of finding to get the person-in-crisis to respond
1700 – The female negotiator offered the person-in-crisis a pizza but was refused again	According to the mother, the person-in-crisis might like a piece pizza especially in a rather chilled temperature at the windowsill almost 40th floor outside the building	Empathy – Offering the pizza was used to show a caring attitude
1735 – The female PNC member hanged a can of soft	With this offering by a female PNC member, and the two	Active listening skill, open-ended question – Some

(continued)

Timeline	Explanations	Verbal questions or nonverbal gestures/skills used
drink to the person-in-crisis but was not collected	male PNC members negotiating, it was hoped that a sense of caring by a larger group of people would be enhanced	question used: "Do you want to guess how old I am?" "Do you like playing computer games?" "How did you come out?"
1735 – The two male negotiators continued with the negotiation	The other arrived PNC members were searching information about the person-in-crisis. More information about the person-in-crisis's challenges at school and dispute between parents were identified as issues that could be brought up to engage the person-in-crisis	Throughout the process, all supplemental active listening skills were used
1915–1930 Time out		
1930 – The involved male negotiator and a new negotiator restarted to engage the person-in-crisis but with the negotiation tone enhanced	Although the person-in-crisis sometimes responded by looking at the PNC but still decided to take control of the situation by not saying much to the negotiators, the tone was raised a bit to make the person-in-crisis realized that it had been almost 6 h of negotiation and not much was achieved	
2000–2015 – The neuropsychologist who had been seeing the person-in-crisis for a few months was contacted and she stated that the person-in-crisis had not suffered from any diagnosed mental problems/illness and recommended that the PNC members should avoid talking about any family issues	The neuropsychologist was contacted because the PNC members would like to know if he was affected by any psychiatric illnesses and wish to get to know more professional information about the person-in-crisis	Triangulation of information
2010 – Time out		
2020 – The two male negotiators continued negotiating with the person-in-crisis	The person-in-crisis has a few responses and talked about the pricing of houses, investment, and life as an immigrant in Hong Kong	Active listening and rapport-trust building continued to be used. The person-in-crisis started to have some responses with the negotiator because one of the negotiators shared his own personal experience as an immigrant from Mainland China to Hong Kong. It seemed that

(continued)

Timeline	Explanations	Verbal questions or nonverbal gestures/skills used
		the person-in-crisis had finally found something he thought it was worthwhile to talk about. Hence, the negotiator talked about the challenges and his way of overcoming the issues in young adulthood and how and his perspective of being a policeman was shared with the person-in-crisis
2035 – The female negotiator once again delivered a jacket to the person-in-crisis. The person-in-crisis took it but threw it to the male negotiator	The mother told the PNC members that the person-in-crisis loved that jacket. Hence, given the sudden changed of weather, the jacket was given to the person-in-crisis. However, since the person-in-crisis did not develop the rapport with the female negotiator, to maintaining the control over the situation, he refused it	Empathy
2115 –The person-in-crisis was suggested to go back to his room with the help of the fire services officers	The person-in-crisis insisted on staying on the windowsill and refused to return to safely place even though it started raining heavily had become very windy. It was worried that the rain and the wind might create an even more dangerous situation for the person-in-crisis. Therefore, the negotiation tone was raised	Active listening continued to be used with an attempt of finding a person-in-crisis that the person-in-crisis might be interested. Influence was used to see if the person-in-crisis could change his mind
2144 – A relieving plan was proposed given that the team had been negotiating with the person-in-crisis for the entire 8 h shift	After 8 h of execution of the negotiation, in general, another team would be asked to take over to avoid burnout or fatigue	It was later discovered that some observers of the police team reported that the person-in-crisis appeared to be quite anxious and was checking and looking where the negotiators were. The observer suggested that the person-in-crisis might be looking for the negotiator to chat more
2300 – The team members decided to remain in the negotiation	Instead of talking to the person-in-crisis, the negotiator attempted to engage the person-in-crisis by	Tried a nonverbal way to engage with the person-in-crisis

(continued)

Timeline	Explanations	Verbal questions or nonverbal gestures/skills used
	playing mobile game on his phone to see if that could get the attention of the person-in-crisis	
2320 – His mother was briefed and invited to talk to the person-in-crisis together with the negotiator	After very careful deliberation, the whole team agreed to invite the mother to join the negotiation because the person-in-crisis seemed to have some responses when family issue was mentioned a few times during the whole negotiation. The mother had started to talk about the study plan in overseas with the person-in-crisis. She also talked about the arrangement of the whole family, including the father, with the person-in-crisis. The person-in-crisis started to cry out very loudly and started to talk back to the mother. The negotiators provided guidance to the mother and suggested to use silences throughout the conversation to allow the person-in-crisis to ventilate his emotions	Teamwork. The mother was briefed on what to and what not to say. The negotiators also provided advices along the way. The sister was also comforted by the female negotiator in the apartment. All four core skills of the BICM-2 were used simultaneously because the person-in-crisis had started to respond. The other PNC members who were not involved in the talking process were starting to plan out the physical rescues plan with the fire service officers
0050 – The person-in-crisis agreed to return to the apartment with the assistance from the fire services officers		Influence and behavioral change
0115 – Rescue completed, and PNC had their debriefing		Teamwork and for future improvement

The Sad News and the Need for Post-Crisis Suicide Prevention Work

Given that this case study was probably one of the longest suicide crisis negotiations had been exercised by the PNC, the involved negotiators were eager to visit the person-in-crisis and his parent and sister again within weeks after the incident. The aim of the visit was to attempt to provide further assistance, if necessary, for the family and for capacity building for the PNC. Hence, the corresponding author was also invited to the post-crisis visit by the PNC to provide on-site professional counseling advices. However, due to the social unrest situation and the intense

occupation of work-related issues, the involved negotiators and the corresponding author had yet to visit the person-in-crisis and his family.

Very sadly, about 3 months after, we received the news that the person-in-crisis had jumped from a height and completed suicide. The PNC contacted the family immediately and arranged to meet with the parents to provide brief bereavement support and offered the opportunity for the parents to ask questions about the negotiation process. The four involved negotiators and the corresponding author visited the parents in a different apartment about 1 month after the person-in-crisis had completed suicide. The father had moved to Hong Kong immediately after the person-in-crisis attempted suicide and hence he was involved in the visit. The visit lasted for about 3 h, and the parent mainly talked about several issues: (1) the events happened in a few hours before the person-in-crisis jumped to death; (2) the reasons leading to the person-in-crisis attempted and his final suicide from their perspectives; (3) the aftermath of the suicide and the impact on them and the sister; and (4) the suggestions for preventing other youth suicides in Hong Kong.

In general, the parents told that the father had a temper outburst towards the person-in-crisis over the heavy use of Wi-Fi minutes before the young man jumped to his death. The father broke the Wi-Fi router and yelled at the person-in-crisis. The mother tried to separate them, and while the father was going into his room and the mother was trying to get a towel for the person-in-crisis, the person-in-crisis jumped out of the balcony. The parents told that after the suicide attempt, the person-in-crisis appeared to be normal but was receiving private psychiatric intervention. During that month, the family did discuss about leaving Hong Kong to Canada and with the hope that the person-in-crisis and his sister could have a better study environment.

It was told that the person-in-crisis was a very intelligent and righteous young man. In the academic year of 2018–2019, he was honored as one of the top students in the school. He also represented for the Hong Kong Ski Team and interested to be an e-sport athlete. However, during the school lockdown in the pandemic, he felt that the education emergency policy had been unfair to many students, especially those with no adequate equipment for online learning. Hence, he decided not to show up during the online lectures organized by his school despite that the school had given him several warnings. Also, since he could not participate in any physical training due to the closure of all sports facilities, the time he spent on the Internet was much increased and that initiated most of the arguments with the parents. The arguments had made person-in-crisis became more emotional unstable and aggressive to his father whom he cared a lot especially during the time that he could live with his father again after 4 years of separation. Hence, the last very heated argument with the father was the leading incident towards his suicide.

This sad incident has demonstrated the importance of post-crisis intervention. Previous research has indicated that, once the crisis has been mitigated and the person-in-crisis has been returned to his or her pre-crisis state, it is important to initiate and maintain open lines of communication as a preventative measure against these individuals engaging in future suicide attempts. The belief that someone who has survived a suicide attempt is unlikely to try it again is a grossly inaccurate assumption when, in fact, the opposite is true. Between the first 3 and 12 months

after a suicide attempt, individuals are at their highest risk for making a second suicide attempt, which is likely to be more successful than the first one [1]. An analysis of research data regarding successful suicides revealed that among those individuals who had made previous attempts, 1 in 25 people had engaged in a fatal attempt within a 5-year period [1]. Although the evidence for post-crisis suicide prevention is limited, there are several studies that the readers may be interested.

Motto and Bostrom [30] experimented with 843 patients who had all refused ongoing care and who were randomly divided into an experimental and control group. The experimental group was contacted by letters at least four times per year over the course of 5 years, and the control group received no contact during the study period. The results revealed that when comparing the groups, the patients in the experimental or contact group had a lower suicide rate during all 5 years of the study with a particularly significant reduction during the first 2 years but the differences diminished over the course of 14 years. Motto and Bostrom [30] concluded that the implementation of a systematic program of contact or communication with individuals who are at risk for suicide seemed to provide a significant preventative impact. A similar study conducted by Carter et al. [4] found that when postcards were sent to the experimental group at 1, 2, 3, 4, 6, 8, 10, and 12 months following their discharge from the hospital, the number of repeated suicide attempts among the control group was much higher within that 12-month duration. Wong, Kwok, Michel, and Wong [51] conducted a study involving individuals who aborted their suicide attempts after negotiating with the PNC in Hong Kong. A sample of the individuals was contacted 1 month and 3 months following the aborted suicides. The results indicated that 88% of the individuals felt positive about being contacted and talking about the suicide attempt. Moreover, 75% of the individuals rarely or occasionally thought about killing themselves and 63% did not expect to make another suicide attempt [51]. These studies generally show that even the follow-up is done by a simple letter, a post-card, or a phone call, the risk of repeating suicide can be reduced among the discharged individuals from hospitals.

Conclusion

In conclusion, the book chapter has introduced how the BISM-2 and its components, especially active listening skills, can be used by law enforcement officers in crisis situations to help deescalating the emotions volatility of persons-in-crisis to be more rational persons who can be influenced for behavior change accordingly. In other words, in situations where health professionals may not be appropriate to provide suicide prevention interventions, law enforcement officers play a very important role as part of the suicide prevention force. Although it is sad to include a case study who eventually completed suicide, this hours-long suicide crisis negotiation shows how active listening skills are used as the foundation throughout the negotiation process. Equally important, the team spirit, division of labor, and patience among a team of negotiators are contributing factors to the outcome of the negotiation. By involving the non-officers, i.e., mother in this case, after careful consideration may also help to

Photo 1 The dangerous position of the person-in-crisis

change the situation rapidly and positively. It is understood that after the suicide crisis negotiation is completed, law enforcement officers are not obligated to continue post-crisis intervention with the persons-in-crisis. The important learning lesson of this case study and previous studies on following up of discharged suicidal individuals from hospital has highlighted the needs for such follow-up as another form of suicide prevention initiative. If the responsible officers may not have the time and resources for the post-crisis interventions, with the consent of the saved persons-in-crisis, they may consider collaborating with suicide prevention centers or suicide prevention researchers and bridging them with the person-in-crisis and that will bring mutual benefits to all involved parties (Photos 1 and 2).

Acknowledgments The year 2020 marks the 45th Anniversary of the PNC, and the motto of the PNC – "Who Cares Wins" – is synonymous and symbolic to the cadre's commitment to selflessly saving lives. The commitment of PNC members is self-evident in everyday lives. Without the sustained dedication of the support of a wide spectrum of mental health professionals and academia, the accomplishments of the PNC could never be realized.

Photo 2 The suicide crisis negotiation in action

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