



**Police Federation
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TASER™: FREQUENTLY ASKED QUESTIONS

What is a Taser?

The Taser is a device that emits electricity via two wires and barbs that strike a person that a police officer needs to subdue. It can also be used in 'stun mode' directly against a person's body. It is a conducted energy device (CED) classified by police and the military as a 'less than lethal' device.

It has been in use for more than 27 years in the USA. Around the world some 11,500 law enforcement agencies use around 260,000 CEDs.

When do police use the Taser?

Police may use a Taser when a person is an imminent threat to a police officer or a member of the public, but when use of a firearm is not warranted. It gives the officer another option along with the baton or capsicum spray and firearm for controlling dangerous and violent suspects. It is generally classed on a similar level as capsicum spray on the 'use of force' continuum and is certainly less lethal than a firearm.

How risky is use of the Taser?

One of the most objective and authoritative studies carried out by the UK Defence Scientific Advisory Council Sub-Committee on the Medical Implications of Less-Lethal Weapons 'concludes that the risk of life-threatening or serious injuries from the M26 (or the later X26) Taser is very low'¹. The assessment of medical risks was undertaken by the UK Defence Science and Technology Laboratory.

¹ UK Police Scientific Development Branch *Further Evaluation of Taser Devices*, David I Wilkinson, Publication No 19/05. (PSDB 19/05)

In November 2008, after numerous trials and research, the UK Home Office announced the issue of 10,000 Tasers to 30,000 police across the 43 Police Forces in England and Wales. Derek Talbot from the Association of Chief Police Officers (ACPO) said that their trial showed that in 80% of incidents where Tasers were used, the situation was resolved and the Taser was a proportionate, low risk means of resolving violent incidents².

A recent report by the US Department of Justice, *Study of Deaths Following Electro Muscular Disruption: Interim Report*, June 2008³, found that 'although exposure to CED is not risk free, there is no conclusive medical evidence within the state of current research that indicates a high risk of serious injury or death from the direct effects of CED exposure'. It also found that the risk may be greater with continuous or repeated discharge of the Taser, and for at-risk individuals such as small children, the elderly, those with heart disease or pregnant women.

What effect does it have on the person?

The Taser's electrical current affects the human central nervous system resulting in neuro-muscular incapacitation or uncontrollable muscle contraction and pain, so that the person is subdued or immobilized, and falls to the ground, generally without causing serious harm or death. As a result, it is effective on people affected by alcohol, drugs, rage or in an unstable mental state.

The 'most intense effects of the Taser last only for the duration that the electricity is applied'⁴, but the subject may then have aching or tingly muscles and feel dazed, confused or lethargic.

What level of electricity is delivered by the Taser?

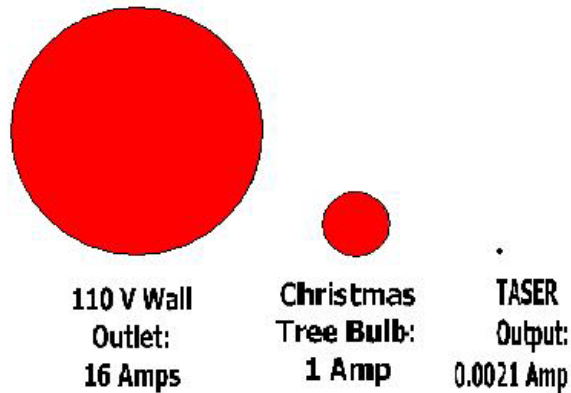
It is important to note that volts do not kill; it is 1 to 2 amps that can kill. The Taser delivers 0.0021 amps to the body. In comparison, a defibrillator in an ambulance delivers an electrical charge several hundred times stronger.

² Police to get 10,000 Taser guns, *The Sunday Times*, November 23, 2008.

³ www.ojp.usdoj.gov

⁴ Ibid, pp 57.

TASER: Low Current



Current Comparison⁵

What kinds of injury to the person Tasered can result?

The person may be injured from the resulting fall or, in a small number of cases, the barb from the Taser may cause injury and need to be removed by a GP or in hospital. The risk of serious head injury from the fall is considered to be low⁶.

Does the Taser affect heart function?

In healthy volunteers, no change in cardiac function has been shown and in intoxicated persons, no significant difference in cardiac function has been observed.⁷ Similarly, in physically exhausted adults no effect on cardiac function has been established. Pacemakers and implantable cardiac defibrillators are not affected by the Taser.

While the risk of a Taser affecting the heart, or causing a cardiac event, is judged to be extremely low, Taser International has revised its operational warnings and is now advising users to avoid chest shots when possible⁸. Back shots remain the preferred area when practical. Frontal shots should be aimed at the lower torso. This advice is aimed at reducing potential risk.

⁵ Source: *Safety of TASER Electronic Control Device*, Appendix 1, *An Introduction to Taser*, pp 11, December 4 2007.

⁶ PSDB 19/05, pp iv.

⁷ *Journal of the Academy of Emergency Medicine*, Vol 14, Issue 5 , pp 63 and 104, 2007

⁸ Taser Training Bulletin 15.0 *Medical Research Update and Revised Warnings*, 30 September 2009.

Can injuries be averted by use of the Taser?

Compared with injuries when police firearms are used, and when capsicum spray, batons or police dogs are used, injury rates for police officers and the person being subdued are significantly lower which is why police forces are making Tasers more widely available to front-line police officers. Use of Taser CEDs helps reduce the risk of incidents escalating to lethal force levels.

Has anyone been killed by a Taser?

Amnesty International⁹ claims that around 350 people have died after contact with a Taser. This does not mean that the Taser was the actual cause of death.

The UN Committee against Torture is claimed to have said that use of the Taser amounts to torture. In fact the Committee called on the United States to deploy Tasers only as a non-lethal alternative to using firearms.¹⁰

Analysis of autopsy reports by medical researchers¹¹ found high levels of illegal substance use (78%), (particularly use of stimulants like cocaine or methamphetamine (86%)), cardio-vascular disease (54%), and excited delirium (75%) in those who died after the application of a Taser.

'Some frequently abused drugs have the potential to contribute to any cardiac-related morbidity or mortality that may arise in the context of taser use'¹².

A jury¹³ in Texas, USA in June 2008 found that the use of a Taser for an extended duration contributed 15% to the death of a man. The man's own actions, including toxic methamphetamine ingestion, were found liable for 85%. The jury exonerated the City of Salinas, the Salinas Police Department and the five police officers from any liability and found that excessive force was not used. Taser was assigned the 15% liability for negligent failure to warn that extended or multiple Taser CED applications on compromised individuals could contribute to cardiac arrest. Compensatory and punitive damages were awarded against Taser. Taser International is appealing against the decision.

That case is the first legal finding of a Taser CED contributing to a cause of death out of seventy (70) legal cases. The case highlights the importance of appropriate policies, robust training and effective warnings about the use of the Taser. The International Association of Chiefs of Police has a useful model policy

⁹ See www.amnestyusa.org/print.php .

¹⁰ UN Committee against Torture, (USA Report) July 2006, para 35.

¹¹ Strote, J.; Range Hutson, H., Taser use in restraint-related deaths, Journal of Prehospital Emergency Care, Vol 10, Issue 4, pp 447-450, 2006.

¹² PSDB 19/05, pp 48.

¹³ Betty Lou Heston, et al. v. City of Salinas, Taser International Inc, et al

on CEDs for police services¹⁴. Taser International provides training updates at www.taser.com.

Taser International warns that '(t)he effect of repeated (more than three) or continuous (more than 15 seconds) device exposures on humans has not been extensively studied and may increase the risk of inducing an adverse event.'¹⁵

If the Taser is not the cause of death, what is?

Amongst many possible causes of death, excited delirium is thought to result in some deaths where a Taser is used. This is delirious behaviour that is very physically active and extremely strong, violent, combative and/or mentally agitated to the point where it can result in death. Excited delirium may be caused by illegal stimulant drugs, alcohol withdrawal, psychoses or acute manic crises. Other possible causes of death include drug overdose and positional asphyxia where the weight of an officer on the person's chest in an attempt to restrain the person may cause death.

Is a Taser used on officers during training?

Yes, it is used extensively on police officers during Taser training.

When should a Taser not be used?

The Taser has an effective range of 4.6 metres. It may be impossible for officers to safely get within effective range of offenders who are armed with knives, iron bars etc. Offenders who are moving rapidly also increase the likelihood that both barbs may not connect and hence the Taser would be ineffective.

What kind of accountability is built into Taser use?

The latest Taser automatically stores, in an encrypted data file, the time, date duration, temperature and battery status of the last 2000 firings. This can be downloaded to a computer via a USB connection.¹⁶ The serial number of the cartridge used is also recorded. If a Taser Cam is fitted, it makes an audio and video record of the event when the device is in on-mode. An infra-red assist capacity is available for use in low-light conditions.

Claims of widespread Taser misuse are grossly exaggerated. In the recent NSW trial of 300 Taser deployments, there was one complaint of misuse, the investigation of which is underway.

¹⁴ See www.theiacp.org/pubinfo/PolCtr.htm.

¹⁵ Taser website, www.taser.com.

¹⁶ PSDB 19/05, pp 58.

Does the use of the Taser by police have other advantages?

Most importantly, use of the Taser does reduce the risk of injury to police officers, combative subjects and people in the vicinity.

- Use of the Taser by front-line police does save lives. Reinforcing the great benefit of getting Tasers out to frontline police, the Queensland Coroner, Michael Barnes, in March 2008 found that the deaths of four mentally ill men, shot by police in separate violent standoffs, all could have been prevented had Tasers been available.
- It frequently contributes to a quick, effective and safe resolution of incidents. The 'mere sight of the taser was enough to resolve the conflict in 55% of the times it was pulled from the holster'¹⁷.
- It can dramatically decrease the number of assaults on police officers – WA Police saw a decline of 40% in such assaults; Florida Police had a 93% decrease. NSW aims to halve the 3000 assaults per annum on police officers.
- This in turn reduces police injuries, workers' compensation claims and lost days on duty. The Police Association of NSW estimated direct savings of more than \$32 million dollars per annum in NSW alone from the use of Tasers.
- It gives officers a wider range of options in conflict management scenarios, including those most associated with self-defence and restraint¹⁸.
- It can minimize the need for officers to use other, more lethal, techniques on suspects and offenders.

The Western Australian police have had Tasers for front-line officers since 2006. The Queensland Government announced in July 2008 that it would roll out 3000 Tasers state-wide over twelve months.

The New South Wales Government announced in June 2009 that it would provide 1,962 Tasers to be rolled out to front-line police over eighteen months, together with eight hours of initial training, a written test and annual recertification of officers. Strict accountability will be in place through recording of audio and visual data for each Taser use.

Currently, Victoria, Tasmania, South Australia and the ACT restrict the use of Tasers to their specialist tactical response squads.

¹⁷ NSW Police Minister, Tony Kelly, Media Release, 14 June 2009.

¹⁸ PSDB 19/05, pp 98.

The Police Federation of Australia supports the rollout of Tasers to frontline police officers nation-wide. We also strongly support the development of national guidelines for Taser use.

13 October 2009