Call-Type Landscape

Domestic and family calls account for more than one in four fatal edged-weapon encounters; crisis-oriented calls cluster high on less-lethal deployment but carry low officer injury rates; weapon-specific dispatch categories show the largest engagement distances and the highest less-lethal use.

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Takeaway

Over the decade from 2015 to 2024, domestic and family calls produced more than one in four fatal edged-weapon encounters (544 of 1,970; 27.6%), making them the single largest dispatch category by a wide margin. Crisis-oriented calls — suicidal and self-harm, mental health and crisis, and welfare and wellness checks — together account for a further 11.6 percent of cases (228 of 1,970) and show the highest rates of less-lethal deployment. Weapon-specific dispatch categories — calls that explicitly reference a knife or edged weapon, or another weapon — account for 11.3 percent of cases and show the largest average engagement distances and the second-highest less-lethal deployment rates. Officer injury rates vary substantially across call types and are not consistently elevated in the categories most associated with proximity or crisis.

Background

The category under which a call was dispatched structures nearly every aspect of officer response: expected threat type, available backup, applicable protocols, and — where they exist — crisis or de-escalation resources. A call coded as “mental health and crisis” should, in principle, trigger different tactical preparation than a “warrant apprehension” or a “domestic disturbance.” Whether the case data supports those distinctions — or reveals that outcomes are more similar across categories than dispatch vocabulary implies — is the central question for this report.

The present analysis describes the distribution of the 1,970 fatal edged-weapon encounters in the EWRL dataset across 23 reportable dispatch categories and examines how five key dimensions — case volume, crisis presentation, engagement distance, encounter duration, and less-lethal deployment — vary across those categories. Officer injury rates are examined as a secondary outcome.

Research context

The call category assigned at dispatch is the primary filter through which police resources, co-responder availability, and applicable protocols are allocated before an officer arrives on scene. The research literature on police mental health co-response has grown substantially since 2015. Puntis et al. (2018) conducted the first systematic review of co-responder models across multiple countries and found generally positive outcomes on diversion from arrest and subject satisfaction, though study quality was low and no randomized trials had yet been published [(Puntis et al., 2018)]. Fisher et al. (2024) examined the barriers and enablers to implementing police–mental health co-responder programs and found that institutional resistance, funding instability, and call classification systems that do not flag mental health content at dispatch were among the most common structural barriers [(Fisher et al., 2024)]. Rowe et al. (2025), reviewing civilian-led crisis response programs specifically, found that programs removing police from the response showed reductions in law enforcement involvement, though most programs lack control conditions and the evidence base remains limited [(Rowe et al., 2025)]. Atherley (2026) examined operational risk management in police response to mental health demand and found that misclassification at dispatch — calls with significant mental health content that arrive without a mental health flag — is common and represents a structural obstacle to protocol-based response improvement [(Atherley, 2026)]. Clifford (2023) identifies pre-dispatch recognition of crisis as a critical intervention point where fatal outcomes may be averted through alternative response routing [(Clifford, 2023)].

The EWRL data reinforce the misclassification problem at scale: only 42 of 1,970 fatal encounters (2.1%) were dispatched under a "mental health and crisis" category, while 1,204 cases (61.1%) carried the mental illness flag at researcher coding. The gap between dispatch recognition and documented crisis presentation is the central policy-relevant finding of this report.

Data and methods

Dataset. The analysis draws on the full Edged-Weapon Response Lab dataset (N = 1,970), covering fatal police encounters involving an edged weapon documented in the Washington Post Fatal Force database [(Washington Post, 2025)] and Mapping Police Violence [(Mapping Police Violence, 2026)] for January 2015 through December 2024.

Call category (E_CallCategory). Each encounter is assigned a single primary dispatch category based on the call type recorded at dispatch, supplemented by narrative review where the dispatch record was unavailable or ambiguous. The coding hierarchy resolves to the most operationally specific category when multiple call types apply. Twenty-nine categories were used in raw coding; six categories with fewer than ten cases are suppressed in this report and are combined into an undisclosed residual in cross-tabulations.

Engagement distance, encounter duration, less-lethal deployment, and officer injury are defined in the EWRL research dataset [(Machacynski, 2026)].

Crisis indicators. Mental illness (D_Illness) and suicidal intent (D_Suicidal) flags are used to characterize the crisis profile of each category. These are decedent-level flags and are independent of the dispatch category; a domestic call may carry a suicidal flag if the decedent was documented as suicidal, even if the call was not dispatched as such.

Suppression. All counts are drawn from the suppressed public aggregate. Cells with fewer than five records are not displayed. For more information see EWRL Methods — Suppression and privacy (/methods/suppression-and-privacy).

Findings

Overall distribution

Twenty-three dispatch categories each contain ten or more cases and are reported individually; six categories with fewer than ten records are suppressed. The 23 reportable categories account for 1,956 of 1,970 cases (99.3%).

The Domestic / Family category is the largest single category by a substantial margin (544 cases, 27.6%). The next four largest categories — Person with Knife / Edged Weapon (189, 9.6%), Disturbance / Disorder (128, 6.5%), Suicidal / Self-Harm (125, 6.3%), and Stabbing (123, 6.2%) — each account for roughly one in fifteen cases. Together, the top six categories — adding Assault / Fight (116, 5.9%) — cover 61.0 percent of the dataset.

Figure 1. Distribution of fatal edged-weapon encounters by dispatch category, 2015–2024 (N = 1,970; categories with fewer than ten cases suppressed).

Four thematic clusters

For interpretive purposes the 23 reportable categories can be grouped into four operationally distinct clusters.

Interpersonal-violence calls — Domestic / Family (544), Stabbing (123), and Assault / Fight (116) — together account for 783 cases (39.7%). These are calls where interpersonal violence is the presenting problem. Stabbing and Assault / Fight calls show similar proximity profiles (mean distances of 5.6 ft and 5.8 ft, respectively) with above-average officer injury rates (4.9% and 12.1%).

Crisis calls — Suicidal / Self-Harm (125), Mental Health / Crisis (42), and Welfare / Wellness Check (61) — together account for 228 cases (11.6%). Illness coding is present in 99.2 percent of Suicidal / Self-Harm cases (124 of 125), 100 percent of Mental Health / Crisis cases (42 of 42), and 83.6 percent of Welfare / Wellness Check cases (51 of 61). Suicidal intent is documented in 95.2 percent of Suicidal / Self-Harm cases (119 of 125) and 33.3 percent of Welfare / Wellness Check cases (29 of 61) — a substantial rate for a category not dispatched as a suicidal call.

Weapon-explicit calls — Person with Knife / Edged Weapon (189) and Other Weapon / Armed Person (33) — together account for 222 cases (11.3%). These are the categories in which the dispatch record explicitly

references the weapon. Person with Knife encounters show the largest average engagement distance across reportable categories (9.0 feet) and a low contact-range rate: 29 of 139 cases with known distance (20.9%) involved contact range, compared with 47.1 percent in the Domestic / Family category. Less-lethal deployment is highest in Person with Knife calls among the major categories (51.3%), consistent with their longer distances and more drawn-out duration profiles.

Enforcement calls — Warrant / Apprehension (108), Burglary / Break-In (78), Robbery / Carjacking (67), and Theft / Property Crime (33) — together account for 286 cases (14.5%). These calls involve an enforcement or apprehension objective that is distinct from the immediate crisis or domestic context. Warrant / Apprehension cases show relatively low illness coding (23.1%) and the second-highest less-lethal deployment rate (50.9%), suggesting that extended encounters and tactical deployments are more common in this category than the crisis or domestic groups.

Figure 2. Crisis profile (mental illness and suicidal intent flag rates) by dispatch category, 2015–2024 (reportable categories only).

Less-lethal deployment and officer injury by call type

Less-lethal deployment rates vary substantially across categories, ranging from 20.0 percent in Unknown / 911 Call encounters (5 of 25) to 61.9 percent in Mental Health / Crisis encounters (26 of 42), with the overall dataset rate at 39.7 percent (783 of 1,970). The three categories with the highest less-lethal deployment rates — Mental Health / Crisis (61.9%), Person with Knife / Edged Weapon (51.3%), and Warrant / Apprehension (50.9%) — span all three thematic clusters, suggesting that less-lethal deployment is driven not by a single dimension of the call but by a combination of encounter duration, available time and distance, and tactical disposition.

Officer injury rates also vary across categories. The Suicidal / Self-Harm category shows the lowest officer injury rate among major categories (4.0%, 5 of 125); suicidal encounters typically orient the subject's behavior away from officers. Welfare / Wellness Check encounters show an officer injury rate of 23.0 percent (14 of 61) — the highest among substantial categories — a pattern consistent with calls that arrive without a clearly threat-identified subject and may resolve in unexpected proximity. Domestic / Family encounters have a lower officer injury rate (7.2%, 39 of 544) than their proximity profile would suggest.

Figure 3. Less-lethal deployment rate and officer injury rate by dispatch category, 2015–2024.

The Hostage / Kidnapping category

Despite its small size (24 cases), the Hostage / Kidnapping category warrants brief notice. It shows the highest contact-range rate of any category with known distance data: 20 of 22 cases with known distance (90.9%) were contact range, and the mean distance is 1.4 feet — by far the lowest in the dataset. At the same time, officer

injuries were recorded in zero Hostage / Kidnapping cases — consistent with the pattern in domestic encounters where the subject's immediate threat is directed at a third party rather than at officers.

Interpretation

What the findings show. The distribution of fatal edged-weapon encounters across dispatch categories is highly unequal: domestic and family calls alone account for more than a quarter of cases, and the top six categories account for three-fifths. Within that concentrated distribution, the thematic clusters behave differently on every measured dimension. Crisis calls have near-universal illness and suicidal coding but moderate distances and low officer injury rates. Weapon-explicit calls have the largest distances and the highest less-lethal rates. Enforcement calls have moderate distances, high less-lethal use, and low illness coding. These differences have implications for resource allocation, training, and the design of pre-contact protocols.

What the findings do not show. Dispatch category is assigned at the time of the call and often reflects the reporting party's description rather than the full situational picture. The data do not reveal what proportion of calls in each category arrive with sufficient information to trigger category-appropriate protocols — a call coded as Domestic / Family may arrive at the scene with no knowledge of an edged weapon, and a call coded as Mental Health / Crisis may arrive with no knowledge of the specific risk posed. The dataset also does not capture the much larger population of calls in each category that did not end in a fatal encounter.

What would change the conclusion. Systematic data on non-fatal outcomes by dispatch category — including de-escalations, less-lethal resolutions, and subject surrender — would allow comparison of whether fatal outcomes are more or less likely in some categories than others, net of encounter frequency. Agency-level data linking dispatch protocols and outcomes would allow assessment of whether category-specific protocols are associated with different distributional profiles.

Limitations

Call category assignment reflects the dispatch category where available and narrative review otherwise. In a proportion of cases — particularly those involving initially ambiguous calls that developed into crisis encounters — the coded category may not reflect what was known at dispatch. The 29-category scheme collapses some heterogeneity; "Disturbance / Disorder," for example, includes a wide range of call types.

Engagement distance and encounter duration are missing for a substantial fraction of cases in most categories (typically 20–35 percent), and missingness is likely non-random across categories. Categories with lower body-worn camera coverage may have systematically different missing-data patterns from those with higher coverage.

How to cite

Machacynski, B. (2026). *Call-Type Landscape* (EWRL-26-005). In *Fatal Edged-Weapon Encounters, 2015–2024* (Version 1.0). Edged-Weapon Response Lab. https://droptheknife.org/reports/call-type-landscape

Data snapshot. S-20261002, deposited at Zenodo https://doi.org/10.5281/zenodo.22650264 (https://doi.org/10.5281/zenodo.22650264).

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