Police exist to ensure community safety. Unfortunately, whether because of an increased police presence in selected neighborhoods, implicit or explicit bias, or other factors, minority youth disproportionately experience negative encounters with police. Adolescent accounts of such encounters are distressing. Youth with whom we consulted recalled many, including 1 in which 2 adolescents were setting up a community event, and only the darker-skinned adolescent was stopped and questioned about his activity. Negative police interactions pose a threat to adolescents’ psychological and physical health. Physicians can address these patients’ experiences, educate them about their rights, and help them stay safe.

Minority youth receive disproportionate police attention. In Chicago, ~60% of surveyed African American and Latino high school students reported having been stopped by police, half of whom characterized the experience as negative and disrespectful. Of the young, African American boys surveyed, >70% reported a stop in 2002, which is >3 times the city average. Behavioral disparities do not explain such extreme trends. In New York City, African American people were far more likely to be stopped and frisked, although <3% of frisks revealed weapons or contraband, and white people were more likely to be found with such items. Such disparities may underlie negative attitudes about police among minority youth. Disparities also characterize arrests for crimes and noncriminal infractions, such as truancy. African American youth are more than twice as likely to be arrested than their white peers and 2.5 times more likely to be arrested for curfew violations, rates that far outpace disparities in the underlying behavior. Finally, minority youth are more likely to experience police use of force. According to 2010–2012 federal data, young, African American boys were 21 times more likely than their white peers to be shot to death by police. Fatal police encounters are rare but
highly salient given extensive media coverage, for example, the police shooting of 11-year-old Tamir Rice, who was killed while playing with a BB gun in a park in Cleveland, Ohio. Against this backdrop of potential physical harm, psychological impacts attending police interactions are understandable.

**PHYSICIANS CAN PLAY AN IMPORTANT ROLE IN HELPING YOUNG, MINORITY PATIENTS KNOW THEIR OPTIONS AND STAY SAFE IN POLICE ENCOUNTERS**

Many African American parents address these dangers with their children, particularly boys, in what colloquially is called “the talk.” Doctors can offer patients, including other minority youth, their own version of the talk. These recommendations are based on our expertise and that of groups such as the American Civil Liberties Union. The talk’s details may be adjusted to the context of the patient’s life, including age.

An easy way to initiate the talk is to ask if the patient has had negative police interactions. If so, you can probe those experiences to gather information and offer support. If not, you can give positive feedback (eg, “I’m so glad.”). In either instance, you can ask if the patient has discussed the issue with his or her parents and then segue to the talk (eg, “The police are there to help all of us, including you. But sometimes, you might feel like they are trying to harass or hurt you. This comes up for a lot of kids, and I want to help keep you safe.”).

Three fundamental points can be communicated verbally and supplemented with a handout. (Research reputable sources, such as your local American Civil Liberties Union chapter, for appropriate handout material.) These recommendations are written in the way you might address them with your patients.

**First, I Want You to Know Your Legal Rights With the Police**

Rights belong to you, and no one, not even an adult, can take them away.

- If stopped by the police, you have the right to ask why and to get an explanation;
- If the police ask you questions, you do not have to answer. You can politely say, “I’d rather not answer, thanks;”
- You can ask, “Am I free to leave?” If they say yes, you can say, “Thank you,” and walk away. If they say no, you can ask why;
- If they say you are under arrest, you have the right to say, “I am not answering your questions, and I would like a lawyer.” It is extremely important to consider using this right. You can always answer questions later when you have a lawyer;
- If the police ask to pat you down or search your possessions, such as your jacket or backpack, you have the right to say, “No, I don’t consent to the search.” They might have a legal right to search you anyway. If they don’t, they should respect your decision; and
- You have the right to file a complaint if you have been disrespected or abused. Your parents and I can help you find out how.

**Second, I Want You to Remember That Your Main Goal Is to Get Home Safely**

Sometimes, that means choosing not to exercise your rights. For example, you may let an officer search your backpack although you could say no, if your gut tells you that is a safer choice.

Certain choices always are the safest ones. Don’t run away, no matter how tempting that is. Stay calm, speak politely, and don’t argue even if you feel the police have stopped you for no reason and are being rude to you. You can complain to me and your parents afterward, but don’t do it on the street. Don’t lie even if you think it might help you. Show your cooperation (for example, show your hands and say out loud, “I am cooperating”) even when you don’t want to.

It is hard to keep your cool in these situations, so I want you to think about it now. If you are stopped, remind yourself of this talk. Rehearse it in your head.

**Third, It Is Not Fair That You Have to Worry About Negative Police Interactions**

The most important thing is to stay safe, but it is normal to be worried or angry about this. If you have a negative police interaction, come talk with me about it. I will do my best to listen and help.

**IT’S WORTH TAKING THE TIME TO ADDRESS THIS THREAT TO YOUR PATIENTS’ HEALTH**

Although doctors have many priorities during a primary care visit, we encourage those who serve minority youth to put the talk high on their list and include parents in this process. Parents may want your help in thinking through whether, when, and how to give their children the talk and may appreciate getting backup from you.

Youth cannot unilaterally eliminate these risks; police also have a role. Although no data yet show whether the talk reduces risk, individual stories show ways in which persons who implement its strategies have been able to deescalate potentially dangerous police encounters. Youth have a better chance of reducing their risks by taking control over their reactions, understanding their rights, and knowing they have your support. Addressing this risk may buffer against psychological harm by positioning the physician as a resource and ally. Showing concern, sharing knowledge, and offering
support may enhance both young, minority patients’ psychological and physical health and your relationships with them.

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