


ORIGINAL ARTICLE

De-Escalation Under Duress: A Civilian Encounter During the Westfield Bondi Junction Mass Stabbing Attack

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ABSTRACT

On 13 April 2024, Joel Cauchi perpetrated a mass stabbing attack at Westfield Bondi Junction, Sydney, Australia, resulting in six fatalities and twelve injuries. During the attack, I, the author of this account, turned to face Cauchi while shielding my wife and three children, employing de-escalation principles drawn from Crisis Prevention Institute (CPI) Safety Intervention training. This article presents a first-person autoethnographic account of that intervention, situated within coronial inquest findings and crisis management literature. I describe the events from that afternoon, the instinctive and educated decisions made, and the contextual factors that may have shaped the outcome. Analysis of the intervention suggests that CPI principles - including verbal de-escalation, the supportive stance, and rational detachment - were applied, and that Cauchi, in a floridly psychotic state, unexpectedly diverted from attacking my family. Without establishing causality, the case raises important questions about the potential role of civilian de-escalation training in active threat situations. The use of a reflexive, first-person approach forms the theoretical grounding of autoethnographic methodology. Possible lessons for the field in relation to crisis management for practitioners, public safety educators, and policymakers are discussed.

1 | Introduction

It is axiomatic that active threat events in public spaces present extreme challenges for civilians who may be caught in the violent episode. Guidance from law enforcement and public safety agencies typically directs civilians to “Escape, Hide, Tell” (Recommendation 13 of the Inquest); prioritising evacuation and minimising direct engagement with a perpetrator (Coroner’s Court of New South Wales 2026a). However, such advice and guidelines do not always conform to real-world events. Individuals may find themselves trapped and unable to escape, they may be forced to act on protective instinct, or they may draw on professional training in ways that diverge from official guidance.

The human stress response to acute threat is well documented in crisis management and psychological literature. When confronted with danger, individuals typically exhibit one of three primary responses: fight, flight, or freeze (Maak et al. 2015; Wester 2011). The flight response involves immediate evacuation or escape from the threat; the foundation of “Escape, Hide, Tell” (Coroner’s Court of New South Wales 2026a, p. 9) protocols. The freeze response occurs when individuals become immobilised by fear, unable to process information or make decisions effectively, a phenomenon observed in multiple active threat scenarios (Coroner’s Court of New South Wales 2025c). The fight response involves direct confrontation with the threat,

Lessons for the Field

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though this is typically discouraged in civilian guidance due to the inherent risks involved.

What is less commonly documented, however, is a fourth response: a deliberate, controlled turn toward danger - not driven by panic or aggression, but by protective instinct combined with professional training in de-escalation. This response differs fundamentally from the reactive “fight” response; it involves conscious decision-making, application of learned techniques, and an attempt to manage rather than eliminate the threat. As Maak et al. (2015) note, individuals with prior crisis training may exhibit response patterns that diverge from untrained populations, yet empirical accounts of such responses in mass casualty events remain rare in the literature.

The Westfield Bondi Junction stabbing attack of 13 April 2024 was one such event. Within its 6-min duration, multiple acts of civilian bravery were documented. Some involved adopting objects used as weapons, and others where civilians were completely unarmed. Each brave act was distinct in character and circumstance. This article focuses on one of those acts: my decision to turn, face, and move towards the perpetrator, Joel Cauchi, while my family (and other civilians) was directly in the line of attack.

This article does not prescribe a model of civilian behaviour, nor does it claim that my intervention was definitively effective. Rather, the purpose of the article is to document a rare, first-person account of civilian crisis response during a mass casualty event, to examine how that response aligned with established de-escalation principles, and to offer possible lessons that may be useful for crisis management practice, training, and scholarship.

1.1 | Methodological Approach

This article employs autoethnography as its methodological framework (Table 1). Autoethnography is a qualitative research approach that combines autobiography with ethnography, using personal experience as a lens to understand broader cultural, social, or organisational phenomena (Ellis et al. 2010; Wellington 2000). It is particularly valuable in contexts where lived experience provides unique insight into phenomena that are difficult to study through traditional empirical methods (Polichtchouk and Varis 2025).

In crisis research specifically, insider, emic perspectives have been shown to yield insights unavailable to external observers; including the affective, real-time decision-making dimensions of crisis response that are difficult to capture through retrospective interview or observation (Macnamara 2021). Recent methodological scholarship affirms that autoethnographic and reflexive first-person approaches, when systematically conducted and transparently reported, constitute methodologically rigorous contributions to crisis and organisational research (Leppälä et al. 2024; Polichtchouk and Varis 2025). My insider positionality, as both participant and analyst, provides unparalleled access to the phenomenology of the intervention while also introducing potential bias, which is addressed through explicit reflexivity, triangulation with independent sources, and grounding in publicly available coronial evidence (Villanueva et al. 2026; Nissen 2022).

Hence, in crisis management research, autoethnographic accounts offer several distinct advantages. First, they provide insider perspective on decision-making processes under extreme stress; processes that cannot be ethically replicated in experimental settings (Nissen 2022). Second, they capture the phenomenological reality of crisis events: the sensory details, emotional states, and cognitive processes that shape response behaviour (Mroz and Thrasher 2022). Third, they contribute to reflexive practice by encouraging practitioners to critically examine their own actions and assumptions (Villanueva et al. 2026).

The autoethnographic approach in this article is grounded in several key principles:

1. First-person narrative voice: I write consistently in the first person (“I” and “we”), maintaining the subjective perspective that is central to autoethnographic inquiry.
2. Reflexivity: I critically examine my own background, training, assumptions, and emotional responses, acknowledging how these factors shaped my interpretation of events.
3. Contextualisation: I situate my personal experience within broader theoretical frameworks (de-escalation theory, crisis management literature) and empirical evidence (coronial inquest findings).
4. Transparency about limitations: I acknowledge the inherent limitations of a single-case, retrospective account, including

TABLE 1 | Research Framework within which the specific methodology has been selected.

Epistemology	Constructionism/interpretivism <i>(Knowledge of crisis is socially constructed through experience, narrative, and discourse)</i>
Theoretical perspective	Interpretivism - Autoethnography (reflexive insider perspective)
Research methodology	Qualitative methodology: Autoethnographic narrative
Data generating methods	First-person reflexive narrative (autoethnographic account) Triangulation with publicly available coronial evidence Independent documentary sources

the impossibility of establishing causality and the influence of memory and trauma on narrative reconstruction.

As Polichtchouk and Varis (2025) note, autoethnography is not simply storytelling; it requires rigorous engagement with theory, evidence, and critical self-reflection. Throughout this article, I draw on the coronial findings, literature and frameworks to contextualise and analyse my experience. The goal is not to generalise from a single case, but to offer a detailed, theoretically informed account that may inform future research, training, and policy development in civilian crisis response.

2 | Background: The Westfield Bondi Junction Attack

On Saturday, 13 April 2024, at approximately 3:30 pm, Joel Cauchi entered Westfield Bondi Junction shopping centre in Sydney's eastern suburbs with a 30-centimetre Ka-Bar hunting knife in his bag (Coroner's Court of New South Wales 2026b). The shopping centre became the site of the country's deadliest mass stabbing attack in recent history. Joel Cauchi, a 40-year-old man from Queensland, armed with the hunting knife, carried out a rampage lasting approximately 6-min across multiple levels of the shopping centre.

Cauchi stabbed eighteen people, resulting in six fatalities: Ashlee Goode, Jade Young, Yixuan Cheng, Pikria Darchia, Dawn Singleton, and Faraz Tahir (Coroner's Court of New South Wales 2026b). Twelve others, including a 6-month-old baby girl, sustained serious injuries but survived. At 3:38 pm, New South Wales Police Inspector Amy Scott confronted Cauchi and fatally shot him when he advanced toward her with the knife raised (Coroner's Court of New South Wales 2026b).

The coronial inquest into the attack, conducted throughout 2025 and early 2026, revealed critical details about Cauchi's mental state, the sequence of events, and systemic failures in security response (Coroner's Court of New South Wales 2026b). Key findings included:

1. Cauchi's mental health history: Cauchi had a documented history of schizophrenia and had been experiencing florid psychosis in the weeks leading up to the attack. He had searched online for information about serial killers and mass killings (Coroner's Court of New South Wales 2026c). Subsequent investigations established that Cauchi had been diagnosed with schizophrenia and had ceased taking prescribed antipsychotic medication since June 2019 (Coroner's Court of New South Wales 2026c).
2. Victim selection: Contrary to initial media speculation, the inquest found that Cauchi attacked "whoever was in his way" (Coroner's Court of New South Wales 2025a). Victims included both men and women of various ages, although many more women were killed and injured. The coronial inquest, which concluded on 5 February 2026, characterised his actions as a "floridly psychotic" (Coroner's Court of New South Wales 2025a, p. 15) murdering rampage.
3. Security failures: The inquest identified significant deficiencies in Westfield's security response, including delayed activation of emergency protocols, inadequate communication

systems, and insufficient training for security personnel (Coroner's Court of New South Wales 2026b). The indiscriminate nature of the violence, combined with failures in the shopping centre's security response, created extreme and chaotic conditions for hundreds if not thousands of shoppers and staff (Coroner's Court of New South Wales 2026b).

4. Civilian response: Multiple civilians intervened during the attack, using bollards, chairs, and other improvised tools to attempt to stop or slow Cauchi's progress. The inquest noted that these interventions, while brave, carried significant risk and that outcomes varied considerably (Coroner's Court of New South Wales 2026d). The coronial inquest's Recommendation 14 recognised five individuals for exceptional bravery: Inspector Amy Scott, who neutralised the threat; Ashlee Good, who, despite being fatally wounded, handed her injured infant to bystanders; Noel McLaughlin, who attempted to stop Cauchi; and Damien Guerot and Silas Despreaux, widely referred to as the "Bollard Men", who blocked and threw bollards at Cauchi before running to safety (Coroner's Court of New South Wales 2026a).
5. Police response: Inspector Amy Scott's rapid response and decisive action were credited with preventing further casualties. The inquest noted that Scott faced a "60 to 70 per cent chance of non-survival" in confronting an armed offender alone and without body armour (Coroner's Court of New South Wales 2025b, p. 104).

The inquest also examined the variability of civilian responses under extreme stress:

An individual's initial reaction to an attack may vary depending on a variety of facts including their situational awareness, the reaction of those around them and whether they have rehearsed their response. Stress and fear will cause different reactions in individuals and may diminish their ability to process information and make decisions.
(Coroner's Court of New South Wales 2025c, p. 1324)

This observation underscores the complexity of human behaviour in active threat situations and the limitations of prescriptive guidance that assumes uniform response patterns. My intervention, described in the following section, was documented in the coronial record through eyewitness testimony but was not included in Recommendation 14 or addressed in the inquest's analytical sections.

3 | Narrative: What Happened

3.1 | Before the Encounter

The following was recorded as a personal account of my family's encounter with Joel Cauchi at Level 5 of the Westfield Bondi Junction Shopping Centre on Saturday 13th April 2024 (Lynch 2025).

It was a typical Saturday afternoon for our family. We had walked from our home in Randwick to Queen's Park, where my

son played football (soccer) for Queen's Park. After the game, we walked to Westfield Bondi Junction shopping centre, a routine weekend outing. My son needed new football boots, and we planned to have lunch at the food court.

I was dressed casually: a Geelong Football Club (AFL) tracksuit top with hood, unzipped, over a Manchester City Premier League jersey. I wore a black cap that belonged to my son, which he had given me to mind earlier that day, while he played his football game. My wife and three children were with me - our eldest daughter, our son, and our youngest daughter.

At the food court on Level 5, my son was enjoying a big bowl of ramen noodles as a late lunch - a special treat we had from time to time. It was approximately 3:30 pm. The atmosphere was relaxed, typical of a busy Saturday afternoon in a popular shopping centre (Lynch 2025).

Earlier that day, around 1:30 pm, we had walked past a man outside Chemist Warehouse on Oxford Street, next to the Apple Store. He stood out because he was wearing a full Australian Kangaroos National Rugby League (NRL) kit - jersey and shorts. In the Australian context, this is unusual unless you are a player. I remember thinking at the time that he might be someone with mental health issues. This is not uncommon in the eastern suburbs of Sydney, particularly in Randwick, where we were living at the time (Lynch 2025).

My family and I had encountered people experiencing homelessness and mental health crises on multiple occasions in Randwick. High housing costs, a shortage of affordable housing, and broader economic and social factors had been driving an increase in homelessness in the area. My eldest daughter, who walked alone to school each day along Belmore Road, had been approached by people in distress on several occasions. One Saturday morning, she had tried to offer a drink and snack to a homeless man sitting on a corner; he had aggressively yelled at her to "fuck off." These experiences had been frightening for our children, and we had purchased a mobile phone for our eldest daughter specifically to increase her safety.

(Lynch 2025)

I mention this context because it shaped my initial interpretation of what was about to unfold. When I later saw the man in the Kangaroos jersey running through the shopping centre with a knife, my first thought was that he was having a bad day, struggling with self-regulation, and that police or security would arrive at any moment (Lynch 2025). I did not immediately grasp the full severity of what was happening.

3.2 | Recognising the Threat

"Quick, we have to go. Pack everything up, we need to move this way." My wife's voice was urgent as she pointed towards K-Mart.

"Hang on. We haven't finished eating," I replied. My son was still enjoying his ramen noodles.

No, we have to go, now. A man just told me there is a guy with a knife downstairs... he stabbed someone and is coming this way.

As we stood and prepared to leave, I reminded our son about his shopping item: "You haven't got your new football boots. Quick, grab them."

(Lynch 2025).

Movement, confusion, panic. We began walking quickly from the food court towards K-Mart on Level 5, in the direction the unknown shopper had recommended. There were people in a panic, running in the same direction, yet confusingly, there were also people moving in the opposite direction. One was an old man with a walking frame, moving slowly. My wife told him to turn around and go in the direction we were heading; the old man refused. Another man walking alongside the old man, who we presumed to be his son, signalled for us to continue.

(Lynch 2025).

In the commotion, our youngest daughter was bumped by another larger, frightened shopper who was running. The person stood on her thong (flip-flop), and she returned to collect it without thinking. Our family unit was broken as she fell behind. I knew that this was not ideal and that we couldn't allow this to happen again. We regrouped, and as a family we were once again moving. In the panic, anxiety grew, and our children wanted to run also. My wife held our children's hands and reminded them to be calm. We reiterated for everyone to remain calm and that it was important we stay together

(Lynch 2025).

The safety of our family was my priority. Thoughts rushed through my mind - I was very much aware of the seriousness of the situation and the sense of urgency required, yet I knew that a calm demeanour was imperative. As the parents, we needed to keep calm, think clearly, and stay together. If we panicked, then this would have a ripple effect and influence our children's emotions. I had learned the value of calmness from my time in Brunei working for the British Ministry of Defence in school leadership and from friendships formed with members of the British Forces

(Lynch 2025).

Another contributing factor was that I had played competitive sports; mainly Australian Rules Football, Gaelic Football and Rugby for many years at state, national and international levels. This would no doubt have also prepared me for keeping calm and remaining focused in moments of intense pressure.

I had many questions without answers: Are we moving away from danger or towards danger? Should we go into a shop, or would we become cornered? Was it just one knifeman or were there multiple? Where are security and/or the police, and how much longer will they be?

(Lynch 2025)

We continued to move swiftly but calmly. I walked behind my wife and three children as I surveyed for signs of imminent danger. As shopkeepers continued shutting their doors hastily, the feeling of anxiety grew - something was not right, danger felt close. "Keep calm, stay together and we will be fine." This was the verbal and non-verbal message we steadily and repetitively shared with our children. We were only walking for approximately thirty seconds, but it felt like minutes.

(Lynch 2025)

3.3 | The Decision to Turn

Then I saw motion to my left, my view partially obstructed by the Boost Juice store. As I looked, I saw a man chasing another on the opposite side of the floor; the man being chased accelerated away. I recognised the person chasing - it was the man we had walked past earlier outside Chemist Warehouse on Oxford Street, the man in the Australian Kangaroos NRL jersey. Immediately, I identified him as the man with the knife everyone was running away from.

(Lynch 2025)

He was holding a weapon - a long 30-centimetre hunting knife. I thought to myself: if we keep moving and stay together as we are, it will all be fine. I didn't want to run, for if a child slipped or turned another way, our family unit could become broken again. The children would be an easy target, and I wouldn't be able to physically protect my family members. My wife was extremely strong under the circumstances. She must have been terrified, but she didn't show it. As mothers do, she instinctively protected her children by keeping them close and calm.

(Lynch 2025).

The man, Joel Cauchi, as I would later learn, ran at another gentleman standing in front of Boost Juice, but fortunately the gentleman skittled away in the direction Cauchi had come from. Next, Cauchi looked up, saw our family, and much to my regret, began running towards us (Figure 1).

(Lynch 2025).

This all happened rather suddenly, and there were no police or security in sight, nor was there any immediate assistance. As experts in the coronial inquest have noted,

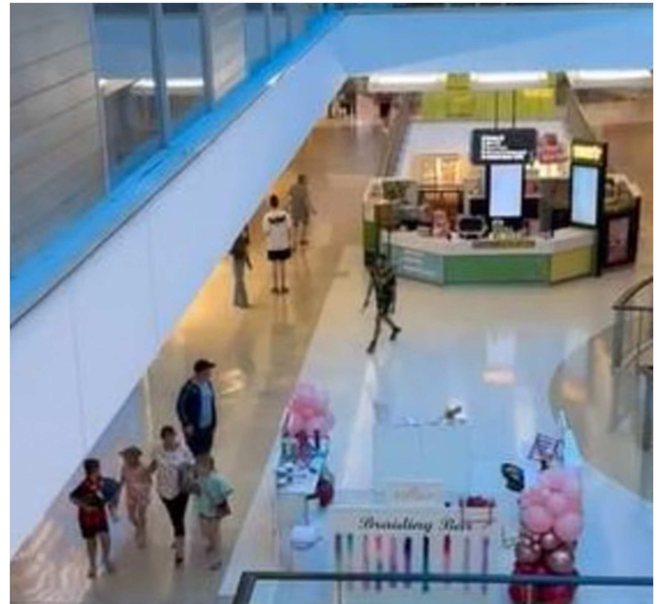


FIGURE 1 | Joel Cauchi preparing to run towards my family.

people in this pressure moment may freeze, may film on their phones or take another action that puts themselves or others in danger - they may take flight, or may fight.

(Coroner's Court of New South Wales 2025c).

Naturally and defensively, I turned and began moving towards Cauchi. I knew that I had to form a barrier, stopping him from getting through, protecting my family and any civilians beyond. From looking at Cauchi's physique, there was no question I was stronger, but I was also aware that when people are in adrenaline-filled rages, they can uncover incredible strength. My immediate concern, given the length of the knife, was that Cauchi had far greater reach than I. I also knew that time was of the essence, and any time I could stall him meant that help would be closer.

As Cauchi approached, I moved toward him, not aggressively, but deliberately. I stepped forward and slightly to the left, placing myself between him and my family. I held my arms out, with my palms open, showing I had no weapon. I did not look away (Figure 2).

3.4 | The Confrontation

A strange feeling came over me as I confronted Joel Cauchi - a thought that this was the moment, the moment that my life was about to end. Strange, because the thought of death for me personally is usually associated with fear and avoidance. However, on this occasion I felt calm and comfortable with this possibility. While I would do my best not to be stabbed, I did accept the dangerous situation I found myself in to be part of God's



FIGURE 2 | Facing Cauchi with hands and arms visible and open.

plan. Furthermore, I did not feel alone but rather was being guided by a familiar force.

(Lynch 2025)

As Cauchi approached, I said and suggested verbally and non-verbally, in a compassionate and empathetic manner, “It’s OK, it’s OK. Calm down.” His movements and unpredictability were like that of a wild animal; however, Cauchi did not sense fear in my presence. I showed him my open hands and held out my arms, suggesting I had no weapons. “I am not going to hurt you”, I said faintly. I approached from the side as much as possible, not to be perceived as a threat. This I knew from my experience as an educator to be the correct practice for managing children and adults in distress; de-escalating without making physical contact.

(Lynch 2025)

As I looked at Joel Cauchi, I couldn’t help but notice that he was avoiding direct eye contact with me. His eyes were staring and beady; they were looking deep beyond me. Cauchi was very different from the Joel Cauchi captured on video and shared during the coronial inquest. There was an absence of personality; he was in a trance, a psychosis. I thought at the time that he was looking at my two daughters, son, and wife, but he didn’t seem to be looking at anything.

(Lynch 2025)

Then suddenly, Joel Cauchi made the split-second decision to abort his attack and ran around my family and me, continuing on a different path.

(Lynch 2025)

3.5 | Aftermath

At the time, I thought that perhaps it was because of the children that he decided to move in a different direction. Later, I became aware how far from the truth this was, reading reports that Cauchi had stabbed a 6-month-old baby girl on the floor below. Seconds later, Police Inspector Amy Scott and civilians in support followed. I did point in the direction that Cauchi had run, but they were already aware of exactly where he had gone.

(Lynch 2025)

There is no explanation for why Joel Cauchi did not attack and stab me or my wife, two daughters, and son. As a barrier on the path, there is no question that I was in his way. Furthermore, out of the thousands of people at Bondi Junction Westfield, how was it that we even found ourselves that close to him? As Police Inspector Amy Scott stated when referring to her active armed offender training, “police look at a 60 to 70 per cent chance of non-survival if you’re partnered and vested up” (Coroner’s Court of New South Wales 2025b, p. 104). With no partner, no vest, no gun, no bollard, my only possible hope was de-escalation. Personally, I can’t help but think it was miraculous, a divine intervention, that we were not physically harmed. The first thing I did after the attack was attend Saturday vigil Mass at Our Lady of the Sacred Heart in Randwick, to reflect and thank God for protection.

(Lynch 2025)

As a family, we decided to keep a distance from attention around this horrific event. Innocent people were fatally stabbed and/or attacked immediately prior to and immediately following our encounter - within seconds. We were extremely fortunate and are most grateful that we were not physically harmed. Footage of our confrontation with Joel Cauchi was captured by a mobile phone and has been aired around the globe.

Thousands of people commented on the footage and photos across the social media platforms. After discussions with my wife, we chose to remain anonymous to protect our family from additional trauma associated with public identification – this was in our children’s best interest (Lynch 2025). However, as requested by the New South Wales Government, we did visit the Randwick Police Station the next day to report our experience and gave our contact details.

The coronial inquest documented the encounter through the eyewitness account of Tyson Rogers, the Scentre Group Facilities Coordinator, who was on Level 5 near Boost Juice at the time:

I remember clearly he was wearing rugby gear. He had a knife which I think was in his right hand. The knife was massive and it was hanging in his hand. He was not making any sound. I observed a man who was with his family. The man turned around to face the male with the knife. He made one or two steps towards the male with the knife. The male with the knife then made a degree turn away from the man with the family and continued to jog...
(Coroner's Court of New South Wales 2026d, p. 434)

This testimony, corroborated by CCTV footage, was timestamped at 3:37:43 pm, not long before Inspector Scott shot Cauchi at 3:38:40 pm (Coroner's Court of New South Wales 2026d).

4 | Situating the Intervention: De-Escalation Principles

4.1 | Professional Background and Training

My response to Joel Cauchi was not purely instinctive; it was shaped by years of professional training in crisis management and de-escalation. I have worked as an educator and school leader for over three decades (Lynch 2024). In these roles, I received extensive training in managing individuals in distress, including children and adults experiencing behavioural crises, mental health episodes, and acute stress reactions.

Specifically, I completed training through the Crisis Prevention Institute (CPI), an internationally recognised organisation that provides evidence-based training in de-escalation and crisis intervention (Crisis Prevention Institute 2021). CPI training emphasises several core principles:

1. Verbal de-escalation: Using calm, empathetic communication to reduce agitation and prevent escalation to physical aggression. (Crisis Prevention Institute 2021).
2. Non-threatening body language: Keeping hands visible and open, maintaining appropriate distance, and avoiding sudden movements (Figure 2). (Crisis Prevention Institute 2021).
3. The supportive stance: Positioning oneself at an angle to the individual in distress, rather than directly face-to-face, to reduce perceived threat and maintain personal safety (Figure 3). (Crisis Prevention Institute 2021).
4. Rational detachment: Maintaining emotional composure and avoiding personalising the individual's behaviour, recognising that aggression is often a symptom of underlying distress rather than a deliberate attack. (Crisis Prevention Institute 2021).
5. Environmental awareness: Continuously assessing the environment for safety risks and escape routes. (Crisis Prevention Institute 2021).

These principles are designed primarily for use in educational, healthcare, and social service settings, where staff may encounter



FIGURE 3 | The supportive stance.

individuals experiencing behavioural or mental health crises. They are not designed for active threat situations involving weapons or mass casualty events. I did not consciously run through these principles in the moment. Although, I had internalised these principles through practice, and they shaped how I responded. From the angle of my approach, the tone of my voice, the decision to show open hands and the words I chose. However, as I will discuss, several of these principles appeared to be relevant in my encounter with Cauchi.

In addition to formal CPI training, my time working with the British Ministry of Defence and forming friendships with members of the British Forces taught me the value of calmness under pressure. I learned that maintaining composure in high-stress situations is not only personally protective but also influences the emotional state of those around you; a principle that proved critical in keeping my children calm during the evacuation.

4.2 | Alignment With Crisis Management Research

My actions during the encounter with Cauchi aligned with several established principles in crisis management and de-escalation literature, though the context was far removed from the clinical or educational settings in which these principles are typically applied.

Research consistently demonstrates that calm, empathetic verbal communication can reduce agitation and aggression in individuals experiencing acute distress (Patel et al. 2018). Furthermore, research suggests that verbal de-escalation, including empathetic engagement, non-threatening posture, and calm vocal tone, can reduce agitation and interrupt escalating behaviour; including when individuals are experiencing psychotic episodes and specifically, for schizophrenia (Du et al. 2017; Patel et al. 2018; Miranda Ruiz et al. 2022).

A recent study of 120 patients found that applying de-escalation techniques with individuals diagnosed with schizophrenia was associated with reduced violent incidents, lower assessed risk levels, and improved quality of life (Liu et al. 2025). When I said to Cauchi, “It’s OK, it’s OK. Calm down,” and “I am not going to hurt you,” I was attempting to communicate non-threat and empathy. However, while Cauchi was in a floridly psychotic state, he may not have been fully responsive to verbal cues (Coroner’s Court of New South Wales 2025a).

Research also highlights the importance of prior training for assisting decision-making under stress. Steen and Pollock (2022) argue that safety-critical behaviour is substantially influenced by prior rehearsal and that stress can diminish the capacity to process information and make decisions in real time. The coronial inquest’s own expert evidence reflected this, noting that “an individual’s initial reaction to an attack may vary depending on a variety of factors including their situational awareness, the reaction of those around them and whether they have rehearsed their response” (Coroner’s Court of New South Wales 2025c, p. 1324). My CPI training and implementation within schools may have provided precisely this kind of rehearsed response framework.

Emotions also play a significant role in how one responds in a crisis. Dionne et al. (2018) argue that emotions interact dynamically with cognitive frameworks in crisis contexts and that emotion-sensitive interventions can improve outcomes. Strategies that support calmness, including self-compassion, connection with others, and a sense of shared humanity, are associated with more effective crisis response (Seppala 2019; Hawkey and Cacioppo 2010; Poulin et al. 2013). My awareness of a possible shared connection with Cauchi: we were both wearing sports attire and our earlier chance meeting outside Chemist Warehouse on Oxford Street; our family’s experiences of people with mental health conditions in Randwick; my focus on the children’s calm disposition; and my own sense of spiritual accompaniment (Lynch 2025) may all have contributed to the emotional regulation that enabled my response.

Despite the extreme danger, I maintained a degree of emotional composure and rational detachment. This was not an absence of fear - I was acutely aware of the risk - but rather a conscious effort to avoid panic and to focus on the immediate task of protecting my family and citizens. Research on decision-making under stress suggests that individuals with prior crisis training are better able to maintain cognitive function and execute learned behaviours even in high-threat situations (Steen and Pollock 2022). My training in rational detachment likely contributed to my ability to apply de-escalation principles rather than freezing or fleeing.

I used non-threatening body language when I showed Cauchi my open hands and held out my arms, signalling that I had no weapons. I approached from the side as much as possible, consistent with CPI’s supportive stance principle (Figure 2; Figure 3). Research on threat perception suggests that lateral positioning and open body language can reduce perceived aggression and facilitate de-escalation (Patel et al. 2018). Whether Cauchi consciously registered these cues is unknown, but the principle guided my behaviour nonetheless.

Research on altruistic behaviour under threat suggests that individuals are more likely to engage in risky protective behaviour when family members are in danger (Poulin et al. 2013). My decision to turn toward Cauchi was driven primarily by the instinct to protect my wife and children. This protective motivation may have overridden the natural flight response and facilitated the deliberate application of de-escalation techniques.

It is important to emphasise that I cannot establish causality. I do not know whether my de-escalation efforts influenced Cauchi’s decision to divert around my family, or whether other factors - his psychotic state, environmental stimuli, random chance - were responsible. The coronial inquest found that Cauchi’s behaviour was erratic and that he attacked “whoever was in his way” (Coroner’s Court of New South Wales 2025a). It is possible that he simply changed direction for reasons unrelated to my actions. However, the alignment between my behaviour and established de-escalation principles, the unexpected outcome, and the fact that it was unique - there is no record of Cauchi running from any other civilian or service person (armed or unarmed) - suggests that this case may offer insights for crisis management research and training.

4.3 | Contextual Factors and Limitations

Several contextual factors may have influenced the outcome of my encounter with Cauchi, and it is important to acknowledge these limitations in interpreting the case.

The coronial inquest found that Cauchi was experiencing florid psychosis at the time of the attack. His behaviour was unpredictable, and his responsiveness to environmental cues was inconsistent (Coroner’s Court of New South Wales 2026c). It is possible that his decision to divert around my family was unrelated to my de-escalation efforts and instead reflected the chaotic nature of his psychotic state.

I am a similar height to Cauchi, however, have a physically stronger physique - he may have perceived me as a more difficult target than other individuals he encountered. Perhaps my forward movement and positioning may have signalled potential physical resistance, prompting Cauchi to seek a less resistant path. Having said that, he did attack two security guards at the one time. Cauchi’s behaviour throughout the attack was erratic and not governed by rational decision-making, and his diversion may have been influenced by internal stimuli entirely unrelated to my actions.

My non-threatening approach and calm demeanor may have presented a less stimulating target for someone in a florid psychotic state, compared to fleeing or screaming individuals. Furthermore, my verbal phrase “It’s OK, calm down” may have momentarily registered within Cauchi’s psychotic state, creating a brief hesitation or disruption - a possibility consistent with research on verbal de-escalation in psychosis (Du et al. 2017).

My family and I encountered Cauchi relatively late in the attack sequence, after he had killed all six victims. Most of the stabbings occurred in a frantic 3-min burst beginning at 3:32:55 pm. After my standoff (3:37:43), there were no more recorded

stabblings. Was my confrontation on Level 5 a turning point? Did my actions of moving towards Cauchi and not retreating, create a cognitive shock, disrupting Cauchi's mental loop during this psychotic episode?

It is entirely possible that my family and I were simply fortunate. Active threat situations are inherently chaotic and unpredictable, and outcomes are influenced by countless variables that cannot be controlled or fully understood. I do not claim that my actions were definitively effective, nor do I suggest that similar actions would produce similar outcomes in other contexts.

I have described my experience as involving a sense of divine guidance and protection. This is a deeply personal interpretation, and I acknowledge that others may interpret the same events differently. From a research perspective, the subjective experience of calm and purpose under extreme stress is a recognised phenomenon in crisis psychology, though its origins - whether spiritual (Lynch 2015), neurobiological, or psychological - remain a matter of individual belief and interpretation.

What is known, is that I was unarmed and managed for an armed attacker - in a stabbing frenzy - to retreat and run away. An armed attacker who had stabbed 18 people and attacked two men within my vision, only 15- 20 metres distance away. Furthermore, my intervention did not escalate the threat, my family was not harmed, and no further stabblings occurred after my confrontation. Whether the de-escalation approach contributed to those outcomes, or whether the outcome would have been the same regardless of my actions, cannot be established from a single case. This account is offered not as proof, but as a documented instance that raises questions worth examining.

5 | Conclusion and Lessons for the Field

The Westfield Bondi Junction attack was a tragedy that claimed six lives and left lasting trauma for survivors, witnesses, and the broader community. My family and I were extraordinarily fortunate to escape physical harm. This account is not intended to glorify my actions or to suggest that civilian intervention is advisable in active threat situations. Rather, it is offered as a rare, first-person documentation of crisis response under extreme duress, with the hope that it may contribute to ongoing discussions about civilian preparedness, de-escalation training, and crisis management policy.

In the spirit of the *Journal of Contingencies and Crisis Management's* "Lessons for the Field" format, I offer the following reflections for practitioners, researchers, and policymakers:

Lesson 1: De-escalation training may have relevance beyond clinical and educational settings

De-escalation training, such as that provided by the Crisis Prevention Institute, is typically designed for use in clinical, educational, and social service settings. However, this case suggests that de-escalation principles - verbal communication, non-threatening body language, rational detachment (Crisis Prevention Institute 2021) - may have broader applicability in crisis situations, including active threat events. While I cannot

establish that my de-escalation efforts were causally effective, the alignment between my training and my behaviour under extreme stress suggests that such training may shape civilian response in unexpected ways.

Implication for practice: Crisis management training programs may benefit from incorporating de-escalation principles alongside traditional "Escape, Hide, Tell" (Coroner's Court of New South Wales 2026a) guidance. This is not to suggest that civilians should be encouraged to confront armed attackers, but rather that individuals who find themselves unable to escape may benefit from having a broader repertoire of response options grounded in evidence-based de-escalation techniques.

Lesson 2: Calm demeanour and non-threatening body language may matter in active threat situations

Research on threat perception and aggression suggests that calm demeanour and non-threatening body language can influence the behaviour of individuals in acute distress (Patel et al. 2018). While Joel Cauchi was in a floridly psychotic state and his behaviour was unpredictable (Coroner's Court of New South Wales 2025a), my conscious effort to maintain composure, show open hands, and approach from the side (Crisis Prevention Institute 2021) may have contributed to a moment of hesitation or redirection. This possibility warrants further investigation in crisis management research.

Implication for practice: Public safety guidance may benefit from acknowledging that, in situations where escape is not possible, calm demeanour and non-threatening body language may reduce the likelihood of escalation. This is not a guarantee of safety, but it represents a potential harm-reduction strategy grounded in established psychological principles.

Lesson 3: Prior training shapes response under conditions of extreme stress

The coronial inquest noted that "stress and fear will cause different reactions in individuals and may diminish their ability to process information and make decisions" (Coroner's Court of New South Wales 2025c, p. 1324). However, research also suggests that individuals with prior crisis training are better able to maintain cognitive function and execute learned behaviours under stress (Steen and Pollock 2022). My ability to apply de-escalation principles in the encounter with Cauchi was likely facilitated by years of professional training and experience managing individuals in distress; furthermore, remaining calm in intense scenarios.

Implication for practice: Investment in crisis training for professionals who work in public-facing roles such as educators, healthcare workers, retail staff and security personnel, may have broader societal benefits by increasing the likelihood that trained individuals will be present in active threat situations and able to respond effectively.

Lesson 4: De-escalation principles may be a valuable addition to the recommended "Escape, Hide, Tell" framework

Current public safety guidance emphasises evacuation and avoidance of direct engagement with attackers. This guidance is

appropriate and evidence-based. However, it does not account for situations where individuals are unable to escape, are trapped with vulnerable family members, or possess professional training that may enable alternative responses. A more nuanced framework that incorporates de-escalation principles as a supplementary option - not a replacement for evacuation - may better reflect the complexity of real-world crisis situations.

Implication for policy: Policymakers and public safety agencies may wish to consider developing tiered guidance that acknowledges the variability of civilian response and provides evidence-based options for individuals who find themselves unable to follow standard evacuation protocols. This could include basic de-escalation principles, situational awareness training, and guidance on protective positioning.

Lesson 5: First-person accounts of civilian crisis response are a valuable and underutilised resource

Autoethnographic accounts of crisis events provide unique insights into decision-making processes, emotional states, and contextual factors that are difficult to capture through traditional research methods (Ellis et al. 2010; Polichtchouk and Varis 2025). While single-case accounts cannot establish generalisable findings, they can generate hypotheses, inform training development, and contribute to a richer understanding of human behaviour under extreme stress.

Implication for research: Crisis management researchers may benefit from actively soliciting and analysing first-person accounts from civilians who have experienced active threat events. These accounts, when situated within broader theoretical and empirical frameworks, can complement quantitative research and contribute to more nuanced, contextually grounded crisis management theory.

6 | Final Reflection

I do not know why Joel Cauchi did not attack my family. I do not know whether my de-escalation efforts made a difference, or whether we were simply fortunate. What I do know is that my training shaped my response, that I felt a profound sense of calm and purpose in that moment, and that my family and I survived an encounter that could easily have ended in tragedy.

The Westfield Bondi Junction attack exposed significant failures in security response (Coroner's Court of New South Wales 2026b) and raised important questions about how we prepare civilians for active threat situations. My hope is that this account, with all its limitations and uncertainties, contributes to ongoing efforts to improve crisis management training, policy, and research. The victims of this attack - Ashlee Goode, Jade Young, Yixuan Cheng, Pikria Darchia, Dawn Singleton, and Faraz Tahir (Coroner's Court of New South Wales 2026b) - deserve nothing less than our sustained commitment to learning from this tragedy and working to prevent future loss of life.

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This research involved publicly available content and did not require institutional ethics approval. The author adhered to ethical principles including protecting family privacy, respecting victims and their families, and acknowledging limitations of self-study methodology.

Consent

Not applicable. This research did not involve patients or clinical data. The author provides informed consent for the use of personal experience and publicly available information about the intervention.

Conflicts of Interest

The author declares no conflicts of interest.

Data Availability Statement

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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