MITIGATING THE EMOTIONAL IMPACT OF STRESS ON LAW ENFORCEMENT PERSONNEL

Let's take an honest look at law enforcement stress and suicide.

This article discusses how to prevent further tragedies.

"The reason that so many of our public servants suffer in silence is that they fear the unknown. It is easier to suffer in silence than to fear losing one's gun, badge, career, and the respect of fellow officers."

—Olivia Johnson, DM
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Mitigating the Emotional Impact of Stress on Law Enforcement Personnel

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Dear Colleagues:

The very nature of the law enforcement profession, along with the accompanying rigors and demands placed on its officers, routinely invites stress into the lives of those who serve. But not all stress is negative. In fact, a certain amount of stress is expected and can be lifesaving by keeping officers aware and responsive to critical incidents. It's our response or lack thereof to stress that is the problem. We often fall victim to the mental cliché of "I can handle it on my own," and in so doing, we allow our stress levels to go unchecked and unmanaged. This approach is not only unhealthy, but it can ultimately prove deadly.

Stress, both positive and negative, affects everyone; no one is immune. Openly discussing stress and understanding how to best address and manage it in our lives is the answer.

To that end, we invite your review of the following article by Dr. Olivia Johnson and Dr. Tina Jaeckle, subject experts from the VALOR Program. The article is designed to orient the reader on the most common types of stress. In addition, they identify the ways and means by which officers and administrators can effectively cope with both personal and organizational stressors.

The Bureau of Justice Assistance VALOR Program is committed to the entire spectrum of officers' safety, health, and wellness. We challenge individuals and organizations alike to confront stress head-on. The time to start is now.

Sincerely,

Patty Dobbs Hodges
Senior Program Manager
VALOR Program

About the Authors

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Dr. Olivia Johnson is a senior research associate for the Institute for Intergovernmental Research and the resident wellness subject expert for the VALOR Program. She is the founder of the Blue Wall Institute, an organization dedicated to improving the quality of life for first responders through training and education on the dangers of the job. Because of her dedication in raising awareness of first-responder issues, Dr. Johnson was named the Illinois state representative and an active board member for the National Police Suicide Foundation. Dr. Johnson is a veteran of the U.S. Air Force. She worked for four years as an officer with the Sandoval, Illinois, Police Department and for one year as a federal police officer with the U.S. Department of Veterans Affairs Police Department. Dr. Johnson holds a doctorate degree in organizational leadership management from the University of Phoenix, School of Advanced Studies; a master's degree in criminology and criminal justice from the University of Missouri–St. Louis; a bachelor's degree in workforce education and development from Southern Illinois University; and an associate's degree in administration of justice from Southwestern Illinois College.

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Dr. Tina Jaeckle is a licensed clinical social worker in Florida and has approximately 25 years of mental health and crisis intervention experience. Dr. Jaeckle presently serves as an associate professor and as the criminology program coordinator at Flagler College, St. Augustine, Florida. In addition, Dr. Jaeckle has presented nationally on issues of crisis/critical incidents, suicide (law enforcement), child abuse/homicide, domestic violence, mental illness, and high-conflict families. She serves as the mental health coordinator for several CISM, hostage/negotiation, and crisis intervention teams and now consults with numerous law enforcement agencies across the nation.

Dr. Jaeckle has extensive experience in the development, coordination, and training of law enforcement critical incident teams and peer support programs. She also completed a master of science degree in criminal justice with a specialty track in the behavioral sciences from Nova Southeastern University and earned a Ph.D. in the humanities and social sciences with an emphasis in conflict analysis and resolution (specialty in crisis management) from the same institution.

Mitigating the Emotional Impact of Stress on Law Enforcement Personnel

Abstract

The safety of communities nationwide is directly affected by the health and wellness of the officers sworn to protect them. Therefore, it remains imperative that those who serve in our nation's law enforcement remain aware of and educated on the most compelling stressors that impact them and, more important, where and how to seek assistance when necessary. In addition, the responsibility to train, educate, and properly care for this population falls not just on individual officers but also on the shoulders of supervisors, agency administrators, clinical personnel, and others. Everyone has a role; hence the intended audience for this document. Education and support from all levels are also necessary to build and retain a strong resiliency profile. Ultimately, stress awareness, coupled with an understanding of ways and means to manage one's stress, further serves to mitigate the emotional impact of stress on law enforcement personnel.

This article will address the following points:

1. Stress is normal and can be lifesaving, but it must be managed appropriately to avoid negative consequences.
2. Unmanaged stress can lead to negative consequences for officers both personally (e.g., failed and struggling relationships, substance abuse, domestic violence, anger/rage) and professionally (e.g., being written up, citizen complaints, excessive use of force, accidents, altercations). It can also result in post-traumatic stress disorder (PTSD).
3. Two of the most common types of stress experienced by officers include critical-incident stress and cumulative stress. Appropriate actions can be taken to reduce the impact of stress. Officers must be intentional about their actions and honest about what they are dealing with.
4. Resilient officers are able to handle and deal with stress more appropriately, reducing, in turn, the negative consequences faced by officers and their agencies.

Introduction

Law enforcement has inherent dangers. In the ten years from 2006 to 2015, 1,620 officers were killed in the line of duty (Officer Down Memorial Page [ODMP] 2006–15), 489 of them feloniously (U.S. Department of Justice [DOJ], 2006–15). Many aspects of the job require a high level of diligence and vigilance from officers throughout their shifts. The consistent need to function at a peak performance level is physically and mentally exhausting. The basic job duties, though essential, often contribute to physical and emotional stress, which can compromise an officer's ability to effectively serve and protect. Incessant exposure to cumulative stress and traumatic events can wreak havoc on the bodies, minds, and lives of this nation's public servants. Maintaining their health and safety often requires a delicate balancing act.

In an attempt to produce this balance, President Trump vowed his support for law enforcement personnel by signing an executive order in January 2018 focused on the health and safety of the men and women who put their lives on the line every day. In a July 4, 2017, speech, President Trump said of law enforcement, "You are the 'thin blue line' between civilization and

chaos. You are the force that protects our liberty by defending our laws and the right of all people to live in peace." Being a line in the sand between civilization and chaos is not only a huge honor and responsibility but also an enormous burden. This burden will continue to take a toll on the physical, emotional, and psychological well-being of those who swore to defend that line in the sand.

Many officers begin their careers motivated and focused; yet in a few short years, they may become disengaged and struggling. It is important to understand the dynamics that can transform law enforcement officers from being idealistic and committed to being cynical, angry, and burned out. The societal and organizational factors influencing officers' emotional well-being have changed significantly in the last two decades (www.ncjrs.gov/leresources/safety.html). The increase in firearms-related line-of-duty deaths, the prevalence of negative social media accounts, deteriorating community relationships, demands for agency transparency, and continuous changes in policy are several of these factors. Policing has become a complicated career choice, and the need for self-care is, without question, imperative—not only to survive the profession but also to thrive long-term. Emotional well-being can fluctuate even in a short time, making self-monitoring vital. The following can be done to promote positive emotional well-being:

- Be mindful of how you feel and behave.
- Implement stress management techniques (e.g., deep breathing, yoga, hobbies).
- Do not allow emotions to take over.
- Develop and maintain a positive outlook.

Supervisors and administrators must:

- Maintain personal relationships with those in the direct line of supervision.
- Provide additional programs to reduce stress (e.g., yoga, deep breathing, league and team sports, family events).
- Provide specialized training in stress management for law enforcement personnel.
- Highlight available programs and resources.
- Conduct individual feedback to check on officers or participate in ride-alongs.

Stress and the Systems Approach

Police officers experience stressors from many sources, including the paramilitary and the bureaucratic nature of law enforcement organizations (Violanti and Aron, 1995); traumatic events, such as the death of an individual or the homicide of a fellow officer (Violanti, 2004); and lack of support, criticism, stigma, and abuse from citizens (Anshel, 2000). Research indicates that organizational stressors are reported at higher levels than are experiential stressors (Brooks and Piquers, 1998; Buker and Wiecko, 2007; Griffin, Hogan, Lambert, Tucker-Gail, and Baker, 2010; Kohna and Mazmanian, 2003; Morash, Haar, and Kwak, 2006); however, critical incidents and other stressors are also associated with negative outcomes, such as post-traumatic stress disorder [PTSD] (Kirschman, 2006; Weiss et al., 2010). An officer's emotional well-being clearly does not occur in a vacuum; instead, it should be viewed in a systems perspective and approach. The officer is merely one part of a larger system. When one component of the system is not balanced, the rest

can become dysfunctional and destructive, resulting in a vicious cycle. While self-care is often viewed solely as an individual responsibility, police agencies and administrators should equally share this responsibility as mutual partners for an overall healthy system.

The long-term effects of burnout are especially harmful to the person suffering from it, the employing organization, individual citizens with whom burned-out officers interact, and the larger community (Schaible and Gecas, 2010; Schaufeli and Peeters, 2000). Specifically, burnout among police officers can result in increased absenteeism, health problems, increased citizen complaints, excessive use of force, heightened levels of aggression, increased use of alcohol or drugs, strained relations with family and friends, poorer interactions with citizens, elevated feelings of helplessness, a heightened risk of depression, increased turnover intent and turnover, more frequent suicidal thoughts, reduced life satisfaction, and lower quality of work (Berg et al., 2003; Griffin, Hogan, Lambert, Tucker-Gail, and Baker, 2010; Kohan and Mazmanian, 2003; Kop and Euwema, 2001; Kop et al., 1999; Manzoni and Eisner, 2006; Martinussen et al., 2007; Maslach, 2003; Mostert and Rothmann, 2006). Ongoing education and workshops on stress management, work/life balance, and positive lifestyle choices for both officers and command staff are necessary to effectively address these issues. A training block on this component should be considered a mandatory part of academy curricula in order to establish positive habits early in officers' careers. Officers face stress on a daily basis, but the inability to de-stress has serious consequences for their overall health. Line officers can implement the following actions to help mitigate the negative effects of stress:

- Get 6 to 8 hours of restful sleep each night.
- Develop a social network of friends in which to confide.
- Limit consumption of nicotine, caffeine, and alcohol.
- Practice deep-breathing exercises, yoga, meditation, etc.
- Develop cognitive reframing techniques.
- Use exercise as a means to relieve stress.

Supervisors and administrators must:

- Provide ongoing workshops and trainings in stress management.
- Develop an agency peer support team.
- Include stress awareness in academy training blocks.

Effects of Stress on Relationships, Communication, and Identity

It is well documented that the stress of the job eventually affects an officer's personal life, relationships, communication patterns, and identity. Officers develop a shell or protective barrier to safeguard them from the situations they confront on a daily basis. As a result of this emotional barrier, officers may develop maladaptive coping mechanisms, which include bad habits such as abusing alcohol, excessive smoking, insomnia, and a vast variety of other health-depleting habits (Hall et al., 2013). Unfortunately, some officers bring this same lack of emotion home with them and appear relatively unaffected by what is going on around them. The spouse, partner, or significant other who is expecting an emotional reaction from such an officer often becomes frustrated by the external defenses that have developed because of police work (Besner and

Robinson, 1982). This attempt to protect one's family can be viewed by loved ones as cold, callous, and disengaged and can result in a breakdown in healthy communication, divorce, and/or infidelity. Seeking professional assistance with relationship issues and communication problems is highly recommended, especially from a professional who is knowledgeable about the law enforcement culture.

It is highly recommended that the officer and/or partner in such a relationship seek the assistance of a counselor or mental health professional knowledgeable in law enforcement culture who can assist with relationship and communication issues. Moreover, agencies should be proactive and consider offering workshops on creating and maintaining healthy relationships for law enforcement officers, couples, and families. We know the importance of relationships, often in the wake of many coming to an end (e.g., through break-ups, separations, and divorces); however, we also know that the leading indicator of a completed suicide involves relationship issues. Knowing this makes it even more important to provide resources and tools to keep relationships happy, healthy, and intact before issues arise. The following actions can be taken to maintain healthy relationships on and off duty:

- Provide resources outside the agency that work on relationship building.
- Conduct team-building activities that can be used within the agency.
- Take time off instead of saving it.
- Understand the importance of relationships and how they correlate with suicide.
- Provide couples and families with friendly activities.
- Seek out training on financial planning, family planning, retirement, communication, alcohol/substance abuse, and other issues that are huge stressors for relationships.

Administrators and supervisors must:

- Make sure that time is not being saved excessively.
- Promote team-building activities (e.g., softball, family events, picnics).
- Share local events that may benefit officers.
- Organize potluck lunches and allow officers to relax.
- Check on officers and ask about important events in their lives.

Psychological Well-Being

Psychological well-being plays an important role in overall health and is an extension of emotional well-being. As previously mentioned, policing has become more challenging in recent years in terms of felonious and/or violent acts against officers. The year 2016 was marked by a significant increase in officer deaths by gunfire. Two significant events were noted in Dallas, Texas, and Baton Rouge, Louisiana. The violence against law enforcement personnel continued into 2017 (ODMP, 2017). These events and many others have psychologically impacted officer perception and have increased hypervigilance on and off the job.

Hypervigilance is an increased state of vigilance and awareness that may be caused by fear, or, in an officer's case, the need to be constantly aware of the motives of other people and surroundings to protect safety. This is a state often characterized by an overt startle reflex, an increased heart rate, elevated blood pressure, and scanning and monitoring and can manifest as reactive symptoms of **critical-incident stress, cumulative stress, PTSD, and completed suicide**. Officers often experience a type of hypervigilance known as a biological roller coaster, which results in extremes in physiological functioning between hypervigilance on duty (e.g., to threat) and the inevitable physiological exhaustion that follows each shift (www.ncjrs.gov/leresources/safety.html). These extreme physiological factors, combined with organizational stressors and frequent exposure to public disapproval or condescension, seem to comprise a particularly potent set of risk factors (Violanti and Gehrke, 2004). Education and training on exercise, nutrition, and diet; mindfulness and meditation approaches; stress awareness and management; and organizational approaches to these issues are strongly recommended and should be offered on a continual basis.

Types of Stress

Critical-incident stress and cumulative stress are two types of stress that affect officers.

Critical-Incident Stress—Police officers are frequently exposed to critical incidents, are criticized and stigmatized, and do not always receive adequate support from administrators or the general public. Critical incidents in policing are described as events that have the ability to overwhelm the usual effective coping skills of individuals. They are often abrupt and powerful events that fall outside the realm of ordinary human experience (Violanti et al., 1996). They can include, but are not limited to, an officer-involved shooting, a line-of-duty death, the suicide of a family member or colleague, a natural or human-made disaster, mass-casualty or violent deaths or losses, and/or the death of a child.

An officer's perception of an event is a huge indicator of how he or she experiences an actual or potentially harmful threat and the brain's reaction to it. Under critical-incident stress or during an acute stress response, the brain shifts into fight, flight, or freeze mode for survival. Once alerted to a threat, the brain and autonomic nervous system produce a powerful hormonal cascade in an effort to create a boost of energy, increased strength, and speed in anticipation of fighting or running. At the same time, the brain takes in a massive amount of information, potentially creating memories of the incident that may trigger similar stress responses unconsciously in later situations. The resulting acute stress response can leave an officer physically, emotionally, and psychologically depleted, as well as drain his or her cognitive reserves. Thus, providing support to officers after such events is critical.

Social support can be especially beneficial to officers after critical incidents. It can come from many sources, including friends, family, colleagues, and, for police officers, the general public; however, police officers frequently do not experience support for their work from these sources (Beehr et al., 1995). Lack of social support is associated with adverse responses to critical incidents (CIs), including problematic alcohol use (Lindsay and Shelly, 2009) and PTSD symptomatology (Kirschman, 2006; Marmar et al., 2006). In addition to being detrimental to officers' health and recovery following a traumatic experience, lack of support, in and of itself,

may be a stressor. Law enforcement agencies are highly encouraged to develop critical incident stress management (CISM) teams composed of trained peer supporters and a mental health professional. These teams provide debriefings and education on the physical, cognitive, emotional, psychological, and spiritual components of critical events. A CISM team, used appropriately and in a timely manner, cannot only change lives, it can save them.

Officers, supervisors, and administrators can:

- Build a reserve of officers for a CISM team.
- Provide social support to fellow officers, should a CI occur (e.g., have snacks, water, etc., on hand once officers are back in the agency).
- Be on the lookout for officers who seem to be struggling after a CI.
- Provide officers and family members with a handout of things they may experience after a CI.
- Provide officers with a list of resources (e.g., clergy, employee assistance programs [EAPs], clinicians, etc.), should they need to seek outside assistance.

Administrators and supervisors must:

- Make sure that officers have adequate time off after a CI event and not allow them to rush back to work.
- Check on the officers and their loved ones and let them know there is support, should they need anything (maybe keep someone on call).
- Offer to assist with chores and errands—things not easily done by the officer or family members.

Cumulative Stress—Although critical-incident stress often receives the focus in terms of psychological well-being, the reality is that cumulative stress can have a far greater, long-term impact on an officer's health. Empathy, burnout, resilience to stress, disassociation, perceived stress, and quality of sleep may be factors mitigating this type of stress. The longer an officer is exposed to stress, the more likely that he or she will develop a state of hypervigilance that can lead to aggression, anxiety, and poor impulse control (www.ncjrs.gov/leresources/safety.html). Over time, countless incidents of stress, left unaddressed, can lead to unhealthy coping mechanisms. Eventually, the stress will present in other areas of the officer's life.

More recent and impactful research has demonstrated that officers exposed to chronic stress showed a negative effect on performance, coping abilities, and overall recall. A study by McCarty and Lawrence (2016) observed 227 police recruits representing four agencies from the beginning to the end of their academy experiences. When levels of distress increased, there was a marked decline in recruit self-control. Findings indicated that extended exposure to stress and stressful situations resulted in increased burnout levels. When burnout was reported at mild to moderate levels, a decrease in performance was noted.

Officers can begin to reduce cumulative forms of stress by:

- Allowing for downtime through rest and relaxation.
- Utilizing an agency's peer support team.
- Looking for solutions to help alleviate stress instead of focusing on issues that produce stress.
- Practicing healthy habits, including maintenance of a work/life balance.
- Recognizing the serious impact of cumulative stress over the length of a career and seeking education on effective methods to address it.

Administrators and supervisors must:

- Provide ongoing workshops and trainings in PTSD, suicide, and stress management.
- Ensure that EAP providers are trained specifically in law enforcement culture.
- Develop an agency peer support team.
- Include stress awareness in academy training blocks.

Post-Traumatic Stress Disorder and Completed Suicide

As discussed, officers are exposed to numerous traumatic events over the course of a career. In 2013, the American Psychiatric Association (APA) identified that exposure to a traumatic or stressful event is a diagnostic criterion for **post-traumatic stress disorder (PTSD)**. In the fifth edition of its *Diagnostic and Statistical Manual of Mental Disorders* (*DSM-5*, p. 1), PTSD is included in a new category, Trauma and Stressor-Related Disorders. (It was previously identified as an anxiety disorder.) However, the difficulty remains in ascertaining the actual number of officers who could be formally diagnosed with PTSD, since this is frequently overlooked in policing as a possible consequence or issue. Research shows that positive social support reduces the effects of traumatic experiences (Kirschman, 2006) and that officers with poor social support report more severe symptoms of PTSD (Marmar et al., 2006). Positive social support provides a sense of belonging and recognition, which leads to heightened feelings of self-worth and appreciation. Carlier, Lamberts, and Gersons (1997) reported that the emotional support of friends, coworkers, and spouses was a key factor in reducing the effects of trauma for police officers. In addition, Stephens, Long, and Miller (1997) found that lower social support correlated with higher PTSD scores in a sample of officers.

Another resulting factor from untreated stress exposure is **completed suicide**. The rate of officers who die by suicide in the United States continues to be a topic of debate among academics and practitioners alike. Aamodt (2008) discussed the commonly held belief that officers experience higher rates of suicide compared with the general population. However, this has resulted from a lack of accounting for demographic factors (e.g., approximately 88 percent of police officers are white males between the ages of 25 and 54). White males in general have an increased rate of suicide, and those within the age ranges noted are also at increased risk for suicide (CDC, 2015). In addition, the most common means for suicide within this population is firearms, often duty weapons. By virtue of the occupation, firearms are easily accessible; officers are competent in their use; and the results are more often fatal because of upper-extremity shots. Two independent meta-

analyses conducted by Loo (2003) and Aamodt and Stalnaker (2001) demonstrated consistency in the literature regarding this premise. For example, Aamodt and Stalnaker (2001) found that the number of police suicides was 52 percent higher than that in the general population; however, when compared with a similar demographic profile including age, race, and gender, officer suicide rates were 26 percent lower. There also remains a significant challenge in terms of a realistic accounting of police officer suicides. Police agencies may not correctly identify these events as suicides, given the presence of cultural shame regarding suicide as well as mental illness. In addition, families and agencies are often willing to remain silent about the deaths to allow families to receive insurance benefits and agencies to avoid acknowledging the deaths or any responsibility for them. Unfortunately, this mutual silence keeps agencies from receiving available funding to provide training and education on officer suicide, and families will continue to grieve the loss of loved ones to preventable deaths.

Suicide prevention and intervention programs are often seen as unnecessary; however, awareness of these matters helps highlight the issues facing today's law enforcement officers. It is highly recommended that law enforcement leaders institute ongoing education programs, while providing officers with the tools for healthy living, coping, and assistance. While EAPs are an important option, many officers do not believe that their activities are completely confidential. Resources must be provided that officers will use, and agencies must stop providing resources merely to check a box and say, "We provided something." Officers need resources that are safe and provide confidentiality. They also require safety when discussing concerns and symptoms openly with an agency administrator without the fear of judgment or reprisal. The reason that so many of our public servants suffer in silence is that they fear the unknown. It is easier to suffer in silence than to fear losing one's gun, badge, career, and the respect of fellow officers. These beliefs must be acknowledged and changed so that officers can begin having these difficult conversations that will no doubt save lives.

Ways to Improve Resiliency

Working with officers from the beginning of their careers to build resiliency can reduce the effects of stress over their careers. Establishing resiliency for law enforcement officers, much like in the military, is a significant challenge. While we understand the basic definition of resiliency, there is not a one-size-fits-all model. Officers are individuals with unique perceptions, personal and occupational stressors, and life experiences. However, agencies need to address resiliency starting in the academy, where the tools for physical, mental, and emotional health should be introduced. Ongoing in-service training throughout an officer's career should follow this, in addition to preparing the officer for retirement. While individual accountability is essential for an officer's self-care, police leaders also have a responsibility to serve as role models in advocating this important component for all employees.

Officers can begin to improve resiliency by:

- Allowing for downtime through rest and relaxation.
- Looking for solutions to help alleviate stress instead of focusing on issues that produce stress.
- Practicing healthy habits, including the maintenance of a work/life balance.

- Recognizing the serious impact of cumulative stress over the length of a career and seeking education on effective methods to address it.
- Seeking support from friends outside of law enforcement.

Administrators and supervisors must:

- Provide ongoing workshops and trainings in stress management and improving resiliency.
- Develop an agency peer support team.
- Include stress awareness and resiliency in academy training blocks.

Conclusion

While officers are aware of many of the inherent risks that come with the profession, many are unaware of the dangers that are directly and indirectly linked to stress, trauma, and mental health. Officers are also often unaware of the correlations between unmanaged stress and anger, burnout, fatigue, and poor overall health and an increased risk for mental health issues, such as depression and completed suicide. This disconnect often results from a lack of training on these risks. There is a mutual denial of the risks interwoven in the culture of officers' work. The message is unspoken but understood by all. If we do not address the issue of stress and mental health, we relay to officers that there is no issue. Officers ultimately grow to believe that there is something wrong with them, and agencies often relay that officers who suffer are merely bad hires. Officers without resources will suffer in silence. However, the risk for mental health issues or completed suicide is exponentially increased.

Officers are problem-solvers, and this keeps many from asking for help. Many are afraid of asking for assistance for fear of being viewed as weak, especially by fellow officers. Officers not wanting to discuss their mental health issues buy into the idea that there is no issue. This, in turn, keeps agencies from receiving adequate funding for these issues, and officers remain in denial that an issue exists. This is a deadly equation. There must be openness and honesty about what is truly killing our officers (e.g., automobile accidents, felonious assaults, gunfire, and suicide). Resources also must be provided that officers feel safe in using. The practice of providing resources just to say that something was provided must end. If we expect to change the mind-sets and the culture surrounding the mental wellness of men and women in uniform, we must provide training in the academy, post-academy, throughout officers' careers in law enforcement, and prior to their retirement. Resources must be readily available, confidential, and officer-friendly. Officer health and wellness must become a priority. This is not only necessary to help officers survive a career but to recruit the next generation of healthy officers. If the ultimate goal is for officers to be open and honest about their struggles and challenges, we must first start making it acceptable to do so.

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