

Mental Health in Law Enforcement

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Abstract

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. The Law Enforcement Mental Health and Wellness Act was enacted in January 2018, recognizing that law enforcement agencies need support in their ongoing efforts to protect the mental health of their employees (U.S. Department of Justice, n.d.). Mental health is just as essential as good physical health for law enforcement officers to be effective in keeping our communities safe. Identifying risk factors and becoming aware of available resources is essential to combat this epidemic that is plaguing our officers. Law enforcement officers are constantly put in high stress and traumatic situations. The effects that this stress has on our officers too often leads to some form of mental illness. With law enforcement officers screening significantly higher than the public for post-traumatic stress disorder (PTSD) and demonstrating high levels of suicidal thoughts, depression, and alcohol abuse, it is our job as leaders and fellow officers to increase our awareness and build relationships of respect and rapport so that we can lean on each other and improve our mental health (Lilly & Curry, 2020). This is critical if we are going to be able to continue to do what we have vowed to do, to protect and serve.

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Our group intention is to identify risk factors and situations that contribute to the mental health crisis that is within our law enforcement community. Along with identifying these factors we are also seeking to research and identify health programs, outlets, and resources that officers, and departments can use to help better improve the quality of life for not just the individual officer, but for the department as a whole.

Our research is to be conducted and gathered from a variety of sources including the world wide web as well as personal experiences. Along with these sources we will also be analyzing police agency programs from the state of Minnesota and Wisconsin to assist in gathering data as it relates to mental health within our ranks.

Within this document readers will have an opportunity to view statistical data pertaining to how the effects of high stress police work and trauma affects the thought process and lives of the individual officer. Along with statistical data this research will touch on personal experiences of officers that were involved with traumatic incidents and the aftereffects it had on their personal and professional lives. Stress and trauma not only affect peace officers on the street, it also affects correctional staff in detention centers as well. For this reason, there is a portion of reading that focuses solely on the correctional officers' view of certain events. The secondary goal of this research is to help individual officers and agencies identify healthy outputs and activities that will help increase the chances of our officers to not just survive, but to thrive.

Mental Health: The Numbers Matter

It is no secret that mental health plays a major factor in the arena of law enforcement and public safety. Everyday police officers, deputy sheriffs, state troopers, and other public safety personnel are called upon to deal with difficult and often traumatic situations that most of the general public will most likely never have to experience. The prolonged exposure to these incidents can, and will, undoubtedly have effects on the public safety officer both personally and professionally. It is therefore incumbent upon the leaders within an organization to not just acknowledge these incidents, but to recognize and identify strategies to help their officers cope with these traumatic situations.

Today, the topic of mental health is strongly associated with post-traumatic stress disorder (PTSD). Karen Lansing is a licensed psychotherapist and a diplomate of the American Academy of Experts in Traumatic Stress. Lansing specializes in the treatment of “duty-induced” PTSD. Lansing has treated hundreds of law enforcement officers, firefighters, paramedics, as well as military personnel. In an on-line article titled, “Trauma on the job”, Lansing identifies classic symptoms or indicators of PTSD as “inability to sleep, nightmares, intrusive memories that don’t fade in intensity, physical reactions to places or other things associated with the event, the feeling of always being on guard or, by contrast, feeling numb” (Lansing, 2016, para 6). Lansing continues to describe the symptoms of PTSD and adds that while PTSD can be associated with a single incident it is more often “caused by exposure to numerous traumatic incidents over several years or, in some cases, an entire career” (Lansing, 2016, para 7). Lansing describes this as “cumulative PTSD”.

Applying the information that was just read, what does this tell us as law enforcement leaders who take a vested interest in the well-being of the people we lead? The answer is easily

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identified but difficult to solve. Mental trauma, PTSD, and other wellness factors can happen to any of us, at any point in our career. The rookie officer who is dispatched to an active shooter incident while still in field training as well as the veteran officer who is dispatched to the third violent domestic assault call of the evening are all at risk for developing signs and symptoms that can have devastating effects on their professional and personal lives.

Let's take a deeper dive into the statistical data that drives this important topic.

Conditions such as PTSD and depression have been estimated to affect police officers at rates between 7 percent to 35 percent (Lilly & Curry, 2020). The key word in the previous sentence is "estimated." Spanning the years 2020 to 2021 law enforcement has been faced with numerous challenges. These challenges include the COVID-19 pandemic, the death of George Floyd, constrained budgets, as well as many other unique situations that have added stress to police agencies. Recognizing the need for more concrete data, Doctor Lilly and Sergeant Curry attempted to identify and narrow down this estimated statistic of 7 percent to 35 percent as it pertains to mental health and the field of law enforcement. Doctor Lilly is a clinical psychologist and director at Northern Illinois University. Sergeant Curry has held an extensive career in law enforcement in various positions such as an elderly service officer, lead homicide investigator, and is currently assigned to the Violent Crime Unit of the Peoria Police Department (Illinois Public Pension Fund Association, 2021, para. 2).

Doctor. Lilly and Sergeant Curry disbursed an on-line survey to thousands of active-duty law enforcement personnel. Of the surveys that were disbursed 1,355 officers responded. Among those that responded 84 percent identified as male and 21 percent identified as a veteran of the armed services. The survey revealed some startling numbers (Lilly & Curry, 2020):
-47% of the sample screened positive for PTSD

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-47% is 9 to 10 times greater than that seen in the general population

-29% of the sample received was in the “moderate” to “severe” range of anxiety

-37% of the sample received was in the “moderate” to severe” range of depression.

-55% of the sample received stated that they consider quitting their job on a daily or weekly basis

All these data should be alarming to not just law enforcement agencies, but to their communities as well. With this small sample we have learned that over half of our peace officers are considering leaving this profession. In a recent survey pertaining to hiring and retirement staffing with police departments the Police Executive Research Forum (PERF) noted that fewer new officers were hired, and resignations and retirements increased between the years 2020 and 2021 (Police Executive Research Forum, 2021). With applicant pools becoming smaller and smaller and departments losing experienced officers there is no greater time than now for authentic law enforcement leaders to identify resources, communicate strategies and programs to assist officers during stressful times. These authentic leaders will be relied upon to draw from their experiences, both positive and negative, and relay their intra/interpersonal thoughts and feelings to those officers that are suffering from stress and trauma.

Along with law enforcement agencies facing challenges in the office when it comes to mental health and officer wellness it is important that we also examine the effects of mental health on the home front with officers. Doctor Jarrod Sadulski is an adjunct professor with the American Military University. Doctor Sadulski had spent more than two years studying the effects of police stress on officers as well as their families. In 2017 Doctor Sadulski authored an article for a popular law enforcement website, policeone.com. The article was titled, “Managing police stress to strengthen relationships at home”. In this article Doctor Sadulski noted multiple

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effects of high stress police work and how they impacted the families of police personnel. These effects included a higher divorce rate than the average non-law enforcement family, a greater risk for financial problems, higher averages for substance abuse, and unhealthy living habits (Sadulski, 2017). In the following segment we will examine the effects of PTSD and mental health as it pertains to the individual officer.

Mental Health in Law Enforcement: Responding to and Dealing with Calls for Service

Law enforcement professionals respond to a variety of calls for service throughout their careers, which can affect them positively and negatively depending on the severity of the circumstances with each individual incident. The variety of incidents that officers respond to can be drastically different. This can directly impact them both positively and negatively. Of those calls for service, law enforcement officers can be exposed to traumatic calls on a daily basis which can be unpredictable, dangerous, and stressful, causing various types of emotions. According to Johnson, Russo, and Papazoglou (2019), those types of incidents are to include, but not limited to:

- Gruesome crashes
- Death, suicide, or serious injury of a co-worker
- Crimes against a child/children
- Personal brush with death
- Deadly force incident
- Homicides
- Pursuits

Challenges of Policing

In police work, there are numerous challenges. The challenges can also lead to stress. According to Johnson, Russo, and Papazoglou (2019) “Police work can be physically demanding and emotionally depleting, which can lead to the inability to relate and empathize, cynicism, and a loss of fulfillment in one’s work” (p.187, para.1).

Some of the indicators of stress can be identified during the initial call for service when being dispatched to the incident. Some of the contributors of stress are caused by the many unknowns of the incident, severity and type of call for service, and our preconceived thoughts of how the incident is going to unfold. A main contributor to the stress while enroute to calls for service is uncontrolled and rapid breathing. Ana Gotter (2020) from Healthline explains, “box breathing, also known as square breathing, is a technique used when taking slow, deep breaths. It can heighten performance and concentration while also being a powerful stress reliever. It’s also called four-square breathing” (Gotter, 2020, para.1). This technique will assist officers in reducing stress, which will affect positive decision making.

Stress Related Experience

The following is a real-life incident involving law enforcement personnel that had an effect on many of those that responded. On December 25, 2019, law enforcement personnel responded to an incident involving a juvenile male and his friend consuming alcohol, when it was reported that he was out of control throwing knives at other party goers. When law enforcement personnel arrived on scene, the juvenile male had left on foot, not dressed for the weather conditions. It was later determined that the juvenile male lived with his mother approximately five miles away at a rural farm site. Law enforcement personnel arrived at his residence and located him there with his mother. It was clear from observations on scene that he

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displayed indicators of impairment. After speaking with him, it was determined that he would be cited for underage consumption. The young male displayed disappointment in himself and was critical of himself regarding his behavior that had transpired throughout the evening.

One of us was familiar with this individual, as we had connected with him at a local recreational center located in one of our small cities. He was aware of our profession and initiated conversation regarding our profession in law enforcement on multiple occasions. One of us was aware that the young male was involved in sports at the local high school and was respected by his friends. Due to one of our past involvements with the young male, we wanted to reassure him that what he did was a mistake and that this was an opportunity to learn from. We could see his disappointment in himself, as evidenced by how he became emotional, broke down and cried, and was apologetic. The young male even asked one of us to lift weights with him the next time we saw him at the rec center since we treated him with respect during the incident. Prior to law enforcement personnel leaving his residence, it appeared that the young male was handling the situation better than when we had contact with him. He accepted the situation and took full responsibility for his actions.

Approximately an hour after law enforcement personnel left the residence, dispatch advised of a call for service involving the same juvenile male and his mother. Dispatch advised that the mother was distraught over the phone and very hard to understand, but she explained that her son committed suicide. The emergency response to the residence was stressful, with various thoughts of emotions. This incident was difficult for all involved, both personally and professionally, which had an adverse effect on the mental health of all involved. In the following segment we will examine closer the effects of emotional intelligence as it pertains to the individual officer.

Emotional Intelligence

As discussed in the lecture by M. Robinson, of the National Command & Staff College, Emotional Intelligence is, “the ability to identify, assess, and control the emotions of oneself, of others, and of groups” (Robinson, 2021). Robinson discussed five reasons why emotional intelligence is critical for leaders, which can be further examined relating to this real-life critical incident.

- Self-Awareness
- Emotional Management
- Effective Communication
- Social Awareness
- Conflict resolution

The critical incident that officers responded to was emotional and difficult which affected everyone’s individual emotions. The difficulty to be self-aware of those emotions was difficult to identify due to the circumstances on scene and prior contact with the young male. The difficulty in identifying those emotions can be further analyzed by emotional intelligence.

Robinson discussed, “the need to be able to recognize emotions as they happen,” (Robinson, 2021) in order to effectively control emotions to manage ourselves. If we are not self-aware of our own emotions, it would be difficult to determine what emotions had an impact on us during the critical incident. To manage ourselves internally, identifying emotions, both positive and negative, would provide opportunity in areas needed for improvement.

Robinson discussed emotional management and learning how to manage those emotions so officers “can regulate themselves and stay in control” (Robinson, 2021). During this critical incident, the ability to manage emotions was on the forefront, as family members were relying

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on law enforcement personnel to perform their duties in a professional manner. It's crucial to identify when our emotions have gotten the best of us, or when a situation is too stressful to be in. If someone is not in control of their emotions, removal from the situation providing a way for others to perform may be a more beneficial solution.

Effective communication was needed during this critical incident, as a multitude of personnel was involved, and family members needed directives to deal with the stressful situation. Robinson described effective communication as, "the ability to clearly convey directions and know what to say in order to inspire and motivate others" (Robinson, 2021). This area as a leader was important to assist the young male's mother during her difficult time of need. It's also important to communicate effectively during and after critical incidents to condition our mental health to eliminate a negative adverse effect towards those experiences.

Robinson also discussed the ability to be socially aware during difficult incidents to remain, "well-tuned to the emotions of others and the ability to pick up on what is going on around them" (Robinson, 2021). It's important to set aside our own emotions to focus on the emotions of others in order to sympathize so they are being provided a positive service. If observed indicators of negative emotions are identified within law enforcement personnel during critical incidents, the ability to provide them resources to seek help would be beneficial on the front end rather than noticing negative emotions later.

Lastly, Robinson discussed conflict resolution and leadership. Stressful events can cause conflict and differences that may have a negative impact on such events. According to Robinson (2021), "Focusing on conflict resolution creates a more effective workplace for employees, customers, and other parties." From a supervisory standpoint, if indicators of conflict are

identified at the early stages resulting from a critical incident, these conflicts can be avoided resulting in a positive resolution before our mental health impacts us negatively.

Mental Health in Corrections/Detention Staff

An often-forgotten branch of law enforcement is correctional facilities and those who work inside them. Those working in detention centers are generally out of sight, so they are not as memorable, nor recognizable as those patrolling the streets. One of us has over 20 years experience working inside a detention facility. They have personally experienced most of the mental health issues described in this section. They have also discussed these issues with many corrections staff across the nation. Detention staff and patrol staff face similar mental health challenges. Detention staff, however, also face some unique challenges that can lead to mental health problems. These mental health problems include high levels of suicidal thoughts, depression, PTSD, and alcohol abuse.

Detention staff spend most of their workday in a housing unit. In our experience, the staff are allowed to leave their assigned housing unit for their breaks and to respond to emergencies in other areas of the facility. There are several designs to a housing unit including linear, podular and direct supervision. Linear and podular designs allow the detention staff to supervise the inmates remotely but this typically leads to the inmates taking control of the housing units. Direct supervision design puts the detention staff's desk in the housing unit with the inmates. This allows the staff to be more observant and be in more control of their housing unit. This is a true benefit for the safety and security of the facility and the inmates, but it can be more taxing on the detention staff's mental health. Detention staff need to be on high alert when the detainees are out of their cells, which is typically most of the day. This alertness unfortunately becomes second nature and hard to turn off. Even on days off detention staff tend

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to be on high alert which affects their relationships with others. Some tend to over-identify as either a disciplinarian or care giver. In conversations with detention staff, we have heard many stories of detention staff intervening on other's behalf in the public. A detention staff member told one of us about witnessing a shoplifting at a store on their day off. The detention staff followed the shoplifter around the store for a while until their juvenile daughter reminded them, they were not at work.

Another effect of working in a detention center is that detention staff tend to lose trust in others. While they are at work, it is normal to question everything. Inmates often lie to get additional information, food, recreation time, time out of cell, etc. This tends to bleed over into personal life. Detention staff also start to lose trust in others, even loved ones. We have witnessed some staff take it to the extreme and dehumanize others. We have heard some staff saying things about others like "if their lips are moving, they are lying."

One of us attended a training called Corrections Fatigue to Fulfillment (Olmsted County Sheriff's Office, 2017). This course teaches corrections staff how to deal with many challenges that negatively impact their mental health. Some of these topics include public image, lack of purpose, and organizational culture. Traditional public image of detention staff is a big guy with a billy club that breaks up fights and hands out food. Serving food and breaking up fights are two of the many tasks detention staff are responsible for. Detention staff respond to similar 'calls' as law enforcement officers. Thefts, assaults, general complaints, inmate medical/mental health issues, etc. also occur inside detention facilities. Detention staff respond to these on a daily basis but are rarely recognized for their work. Because they are rarely recognized for their work, it is hard for detention staff to find true purpose in what they do. The intended purpose of detention facilities is to help correct inmate behavior, so they do not return to the facility.

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Unfortunately, quite often inmates come back into custody multiple times which is a letdown for staff who cared for that inmate last time they were in custody. Their return to the detention facility can feel like a failure on staffs' part to correct the inmate's behavior. An example of recognizing one's purpose is a carpenter who frames houses. On a daily basis they will be able to see what they have accomplished. They will be able to drive by that house years later and see their hard work. Purpose can be hard for detention staff to find. They need to look at it differently. Some find their purpose as a field training officer or an instructor to help train new hires. Others find their purpose to be a union representative, peer support, or various specialized roles they have an interest in. The traditional culture in detention facilities was for staff to simply toughen up, and deal with whatever happens. Those that asked for help were looked down upon, made fun of, shunned and told to figure it out. Thankfully this is slowly evolving in some agencies but that culture still exists.

One of us has experienced, witnessed and have been told by colleagues of other negative changes to detention staff including anger issues, isolation, abuse of alcohol/drugs, lack of compassion for others, over controlling others, less patience, and losing interest in hobbies. All these negative effects cumulate over a career and have long-term effects.

Detention staff face increased levels of anxiety, depression, PTSD, alcohol abuse and suicidal thoughts. In a Michigan study, 47 percent of custody (detention) staff reported medium to high levels of anxiety consistent with Generalized Anxiety Disorder. National rates of Generalized Anxiety Disorder are between three and five percent for civilians and military (Spinaris & Brocato 2019). The same study reports 15 percent of custody staff meet criteria for Major Depressive Disorder. These symptoms include "feeling down or hopeless, having difficulty concentrating, feeling tired or without energy, having difficulty enjoying activities,

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experiencing increased restlessness, or slowed down physical movement, and thinking that one would be better off dead.” (Spinaris & Brocato 2019, p 30). The national average is 6.7percent. The depression rates across all first responders is 21.4 percent (Spinaris & Brocato 2019). This Michigan study also reported 22 percent of custody staff reported symptoms consistent with PTSD. These symptoms include “irritability, unprovoked anger outbursts, aggression, sleep disturbances, hypervigilance, negative worldview, difficulty experiencing positive emotions, and avoidance of distressing stimuli associated with traumatic events.” (Spinaris & Brocato 2019, p 33). This is much higher than the national average of 3.5 percent in the general population, 2.5 percent in the military (all personnel, not active combat), and 10 percent in first responders (Spinaris & Brocato 2019). This study also looked at alcohol abuse and 18 percent of custody staff reported symptoms of alcohol abuse. The rate for the general population is about seven percent and nine percent among all first responders (Spinaris & Brocato 2019).

Another study by the National Institute of Justice found life expectancy is also affected by working in a detention facility. It cites a study from 1984 that noted the average lifespan of detention staff is 59 years. The study also cites the New Jersey Police Suicide Task Force, who found in 2009 the average lifespan among COs (correctional officers) to be 59 years. This is well below the national average of 75 years (Ferdik & Smith 2017).

A study out of California looked at suicide rates for those who work in detention facilities. According to this study, 1 in 33 people in the United States report their suicidal ideation as extremely high. Active-duty correctional officers rates were higher at 1 in 9, retired correctional officers were 1 in 7, and combat veterans were 1 in 4 (Lerman 2017).

The study from California also looked at how to counter these negative impacts on detention staff. The staff surveyed reported 82 percent thought their supervisors were

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competent, but half said their supervisors were uncaring. Approximately one third of the staff said they lack recognition for their good work and nearly half said they would move to another corrections department if they didn't have to sacrifice their seniority. Even more, 69 percent said they would immediately accept a job outside corrections for similar pay and benefits. Many of these staff report they have received minimal or no training on health-related issues and stress management. Only 18 percent report they have used their EAP (Employee Assistance Program) as they are concerned with confidentiality and/or negative consequences from management. Staff want help though. Resources requested were confidential links to counselors or therapists (49 percent were interested), online/digital resources related to health and well-being (58 percent) anonymous hotline for law enforcement (43 percent) stress management training (88 percent) trauma/PTSD training (82 percent) and training in personal nutrition and exercise (86 percent) (Lerman 2017).

We believe these are great areas to start addressing wellness in detention staff and one of us has received similar feedback from colleagues. There is more information staff crave such as more discussions and training on transition techniques. Transition techniques are in reference to making an internal change from being a detention staff to being a good parent, spouse, sibling, neighbor, etc. Another topic staff desire more info about is retirement planning and investing. Many staff mention a need to make the most of the few years of their retirement.

Mental Health: How a Leader Can Help

A law enforcement officer is faced with day- to- day stressors of not only her own life but also stressors of dealing with the ones she is sworn to protect. She faces stressors every day when responding to calls, thinking about how to handle calls, the situation in which she is responding to and the aftermath of the events she responds to. She provides resources to people

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who have mental health issues or who are in a crisis on a daily basis. Resources include, but not limited to: mental health commitments and assisting in getting them in contact with a mental health professional. Who is present to help the law enforcement officers?

According to the Federal Bureau of Investigation (FBI), in 2019, there were 236 law enforcement officers who died from suicide. In the same year, 48 officers were killed in the line of duty. Approximately five times the number of officers took their own lives. In 2020, 173 law enforcement officers committed suicide. This serious issue is trending downward, but one law enforcement officer suicide is too many. Also in 2020, 264 officers were killed in the line of duty many of which were due to the civil unrest experienced throughout the country. This would bring the number of line of duty deaths up over 100 percent from 2019. Although law enforcement suicides are down, the line of duty deaths are up tremendously. This is inexcusable and preventable (2020).

National Officers Safety Initiative (NOSI) conducted extensive research on the causes of suicide amongst law enforcement officers. Amongst those causes was substance abuse due to PTSD, stress, and other underlying factors. The study found evidence that alcohol use disorders significantly increased the risk of suicide ideation, attempts, and deaths. The study also found that drinking is an acceptable and common coping strategy amongst law enforcement officers. It also found that alcohol consumption among law enforcement peers is viewed as a social bonding practice. The study found that participating in stressful events can trigger a suicidal crisis for someone who is vulnerable. Law enforcement officers respond to several stressful situations throughout a shift.

The National Officer Safety Initiative (NOSI) conducted extensive research on several risk factors for suicide as being particularly relevant to law enforcement officers. “For example,

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one of the studies they used analyzed data from the Centers for Disease Control and Prevention (CDC) identified the following variables as being closely associated with suicide among law enforcement officers, members of the U.S. Army, and firefighters”:

- Treatment for a mental health condition
- Post-Traumatic Stress Disorder (PTSD) diagnosis
- Alcohol and substance misuse
- Job problems
- Intimate partner problems

The study also found that a common theme for suicide amongst law enforcement officers was particularly strong for job-related problems.

One of those most common terms we hear used in law enforcement is resilience. Resilience is the ability to overcome traumatic and difficult times quickly while working in our difficult times. This term has an adverse effect on law enforcement officers as we are constantly trying to be resilient, trying to fight off that emotional feeling. Trying to be the “tough guys” because we are resilient and cannot show emotions is what causes officers not to reach out and seek help. This is what keeps law enforcement officers from seeking help or reaching out for resources. The stigma is that one is weak and not strong enough to be a law enforcement officer because they reached out for help or sought counseling. This is what we need to get away from. We need more understanding and encouragement to seek out these kinds of resources. This can be done by encouraging Employee Assistance Programs (EAP) more often than just after a critical incident.

National Officer Safety Initiative (NOSI) conducted research on suicide by law enforcement officers. The research showed that almost 88 percent of law enforcement officers

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today are males. They noted that during their research, due to negative emotions and skewed perceptions, men refuse to reach out or show any sort of sign of weakness. Law enforcement officers, especially male law enforcement officers have a need to show masculinity regardless of how it may affect them mentally or physically. Many law enforcement officers look at seeking help for anything mental health related as weak or someone who can't handle stressful situations. This is the stigma in law enforcement that needs to end (2019).

Recommendations and Conclusions

Let's look at what we as leaders and supervisors within our departments can do to identify these issues early on before they unfortunately become an issue we can no longer address. As supervisors, we need to make sure we are encouraging our people. Identifying the things they can do better and providing them the resources they need to achieve that is crucial. A supervisor in law enforcement is expected to make sure those she supervises are doing the right thing. Responding to the call they are requested to respond to. Completing reports in a timely manner, engaging in community involvement and making the right decisions through the hard times.

Law enforcement officers are faced with handling the tough calls, seeing the rough crime scenes, and dealing with people on their worst days. Well, who helps them on their worst days? As supervisors, it is important to make sure we identify those tough and rather undesirable calls that staff are responding to and dealing with. Do we follow up with them after these calls? Do we see how they are doing or if they need anything? According to a study conducted by the National Officers Safety Initiative (NOSI, 2019), a large majority of law enforcement officers will not reach out to others for help due to the stigma of not being tough or able to handle tough times. So, what do we as the ones who supervise these officers do? Do we attempt to check in

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with them? Do we ask how they are doing, or does that make us look like we aren't strong or able to handle these stressful calls?

Do we provide them resources when we can't even reach out to these resources ourselves? As a leader in her department, it is important for her to reach out to those she leads. See how they are doing, talk about a time you were affected by a call or scene you were affected by. Check in with those you lead occasionally, even if it's just to talk about sports or something that is important to them at work. A current supervisor from another department said that they once had another supervisor tell them when they were an officer that they had an "easy job". The supervisor explained to the officer that his job was easy as all he had to do was to monitor the officers on his shift while they had to monitor the entire community. This statement alone shows that the supervisor cared about those he leads. It is important to make sure those you lead are doing okay. This can be done by hosting weekly meetings with your shift. Providing resources such as Employee Assistance Program (EAP), chaplains and conducting debriefs after a critical situation occurs to ensure officers know these resources are available.

It is important when debriefs are done to make sure you as a supervisor exclude yourself. This is done to make sure those you lead will hopefully not hold anything back due to a supervisor being present. It is amazing how much a simple conversation with your subordinates can lead to understanding what is going on in their lives. It's important to remember we are all still human no matter what we have been through. Do not be afraid to have these conversations. Do not be afraid to approach those subordinates who you notice are going out more, drinking more, spending time alone or secluding themselves from other department activities. Mental health is a very important topic. It's important to understand how you as a supervisor could

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potentially be the reason a fellow law enforcement officer lives today. Reach out and be proactive!

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